EDITORIAL

ROAD TO DEMEDICALIZATION- NEED OF HOUR IN PUBLIC HEALTH
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INTRODUCTION

Nowadays, the health status of population is generally related with progress in medical care. The health status of an area is often equated to the number of doctors, nurses, hospital beds per 1000 population. However, there is no evidence that there is any direct relation between health status of people and the so called progress of medicine.¹ In fact, the study of disease patterns during last century provides evidence that illnesses are increasing despite medical advancement. Rather, the deaths caused by medication mistakes more than doubled between 1983 and 1993, according to findings published in ‘The Lancet’.² This scenario had forced sociologists like Thomas Szasz (1963), Pitts (1968), Irving Zola (1972), Friedson (1970), to use the term ‘medicalization’ to describe such a trend where, medicines dominate our daily routine lives.³ Medicalization literally means “to make medical”. Medicalization of life is akin to ‘a pill for every ill’ concept.

For example, a normal headache due to exertion – which can be relieved through rest or sleep is sought to be relieved by analgesics. Medicalization may also be termed “pathologization” or “disease mongering”. Medicalization is the process whereby previously non-medical aspects of life come to be seen in medical terms, usually as disorders or illnesses. The process of medicalization is based on the biomedical model of disease, one that sees behaviors, conditions, or illnesses “as a direct result of malfunctions within the human body”.⁴

Medicalization is intruding upon our experience of everyday life. Over a last 60-70 years, a wide range of phenomena has been medicalized, including normal life events (birth, death), biological processes (aging, childbirth, menstruation), common human problems (learning and sexual difficulties), and forms of deviance. The medicalization of deviance refers to the process whereby non-normative or morally condemned appearance (obesity, unattractiveness, shortness), belief (mental disorder, racism), and conduct (drinking, gambling, sexual practices) come under medical jurisdiction.

Medicalization occurs at three levels: the conceptual, the institutional and the interactional levels. At the conceptual level a medical vocabulary is used to define the problem at hand. At the institutional level, organizations may adopt a medical approach to treat a problem. Physicians function as gatekeepers for benefits of an organization. At the interactional level, physicians are most directly involved. Medicalization occurs here as part of doctor-patient interaction, where a physician defines a problem as medical or treats a social problem with a medical treatment.³

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Medicalization has serious implications on social control, power, knowledge, authority, and personal liberty. The medicalization of life encourages our dependence on professional care, and also on medical drugs. More and more aspects of our lives are being brought under the ambit of medical control. Patients are essentially defenseless and are encouraged to become dependent on the medical system. Once dependent on the system, it is not possible for them to change the system.

There has been a gross medicalization in the continuum of care of an individual. It starts from unborn (antenatal checkups) phase of life to childhood (immunization) to adulthood and old age (general medical checkups). The doctor's grasp over life starts with the monthly prenatal check-up when he decides if and how the fetus shall be born; it ends with his decision to abandon further resuscitation in bedridden moribund elderly patients. Pregnancy and childbirth, normal biological processes all have been medicalized. Pregnant women are urged to seek care from a doctor numerous times throughout pregnancy (as part of routine prenatal care), including scheduled blood tests and ultrasounds. There is advocacy, too, for women to visit a medical provider before pregnancy occurs. Despite medicalization and technologization of childbirth, we have not been able to improve overall birth outcomes.5, 6

The process of medicalization perpetuates itself by offering medical labels to our life’s events, phenomena and experiences. Shyness, for example, has been recently categorized under the umbrella of a variety of disorders, including “avoidant personality disorder,” a label which may negatively affect self-perception.7 Another area that has seen increased medicalization in recent years is the area of child behavior. For instance, most of the children with ADHD (Attention Deficit Hyperactivity Disorder) could have been simply seen as hyper, or as having trouble focusing in school, not as having a biological disorder requiring medications.

Furthermore, medicalization has become a form of social constructions. Thus, it is now authority of certain social institutions and experts, rather than nature, who determines what, is a disease or health.1 People are being spoon-fed with readily available medical solutions to every conceivable symptom. This has resulted into a belief of people that they cannot cope with illness without modern medicines. This reinforces and lays the ground for iatrogenesis by when people surrender themselves to the doctors.

Ivan Illich had used a term social iatrogenesis to describe medicalization.8 As per this concept, medical interventions produce dependence on doctors and medicine. Such interventions tend to impoverish the non-medical health supporting and healing aspects of the social and physical environments. This decreases innate coping ability of human beings.

Iatrogenesis means ‘doctor-generated’. The word is derived from Greek words iatros = physician and genesis = origin. The term refers to sickness produced by medical activity. It is the injury done to patients and contracted in hospital—largely the unwanted side-effects of medications, ineffective, toxic and unsafe treatments and doctor ignorance, neglect, or malpractice, which poison, maim, or even kill the patient. For example, use of antibiotics alters the normal bacterial flora. This induces a super infection, permitting more resistant organisms to proliferate and invade the host.

Cultural iatrogenesis is the destruction of traditional ways of dealing with death, pain, and sickness. Modern medicine has in fact become detrimental to society. Medicine had deprived individuals and societies of their inherent/natural ability to cope with sickness and death. This way their tolerance and resistance is weakened. They tend to seek help of doctors even for mild symptoms. In fact, the whole culture has become over-medicalized.

Health care institutions are also minting money by performing unnecessary tests and prescribing medicines which are not required and are costly as well. Doctors are now more concerned about their profit share and reputation rather than
the desire for service of the society. As we see these days, these health care institutions are providing facilities to patient like a five star hotel. Suffering, healing, and dying, which are activities that cultures naturally taught mankind have now been overtaken by pharmaceutical MNC's and medical practitioners.

People are considered just as consumers or objects by the modern medical industry, destroying their capacity to regain or maintain health. For example, nowadays parents are overprotective. Due to their faulty child rearing practices, the tolerance power of child is reduced. Even in case of normal viral fever, parents give their child antibiotics. Even for a minor bleed, pain or diarrhea they rush the child to a doctor. As a result of that children's immunity threshold decreases. They develop antibiotic resistance. This mindset of parents is being exploited by pharmaceutical companies for their profits. Even for diseases like chicken pox, in which lifelong immunity develops by itself after one episode of infection, vaccines are now available in markets and are being vigorously advertised. Parents are eagerly arranging these vaccines for their kids. Doctors prescribe products like multi-vitamins, protein, calcium, iron supplements even when not required. All these can be easily obtained through proper diet. It is a well known fact that more than 80% disorders can be alleviated to quite an extent without resorting to medicines/surgery. A study done in 2007 has found that more than 56% of American children under 12 used more than one medication within the past 7 days.

In 1970s, when the pendulum of medicalization had swung too far towards pharmaceutical industries, a counter movement of demedicalization emerged. Demedicalization is the process by which things are organized or modified in a way that condition or life process under medical jurisdiction is considered as no longer a medical problem. Demedicalization focuses on building internal locus of control rather than dependence on physicians. This approach emphasizes more on prevention and non–medicinal approach. For example, many cases of prolapsed uterus, incontinence of urine in females can be easily treated with the help of behavior therapy. There is no need of extensive surgeries. Constipation can be taken care of by having more of fibrous and liquid diet rather than resorting to laxatives. Dysmenorrhea can be easily cured by using hot water bottle and some simple exercises. The problem of cough can be reduced by steam inhalation. The problem of dry eyes can be treated by warm compresses.

Health is conceptualized as a direct result of relation between mind and body. The role of thoughts and emotions on a person's ability to heal is often overlooked by medical practitioners. Like for example, menopausal symptoms can be successfully alleviated by healthy lifestyle, exercise and good nutrition rather than going for HRT (Hormone Replacement Therapy), many problems of infertility (due to vaginismus etc.) by proper couple counseling rather than directly resorting to medicine or surgery. Many chronic non communicable diseases are largely a result of our complete ignorance on both: the physical level (diet, lifestyle) as well as on the mental level (bad mental hygiene and discipline, wrong understanding of purpose of life). For example, there are many interventions for such diseases (diet, yoga, physical exercise, behavior therapy, clean environment etc.) which are simple, cheap and often without any need of medicine yet are quite effective. However, such simple remedies are often neglected or altogether ignored.

Demedicalization movement is further supported by the concept “Salutogenesis" given by Aaron Antonovsky in 1979. It focuses on factors that help the man remain healthy despite disasters, and terrible circumstances or even exposure to pathogenic factors. It also explores the sources of self-regeneration and self-healing power. It is the study of health and takes the view that individuals must pursue adaptive strategies that diseases and stressors are inevitable. The emphasis is on the healing resources and potential for active adaptation to new circumstances as well as for habitual changes for risk reduction and development of resources. Salutogenesis model also emphasizes on the strength of mind body system and stresses on demedicalization of health problems. The “placebo effect" is a well documented phenomenon. For example, when a sugar pill is substituted for the usual medication in patients, they may still report an
improvement as if they had taken the prescribed medication. If we consider the health problem as a challenge and utilize the resources available (home remedies) than many of them can be resolved without medicines and doctors.

Hippocrates also once said. “For the sick, the least is best.” This concept needs to be revived. Physicians should prescribe minimal medications for their patients and reassure them about their possible recovery with minimal or no intervention. It is the high time when we need to look back to our ancient remedies which focused more on the concept of demedicalization to cure majority of illnesses. In this way, we might be able to achieve our health related targets and Millennium Development Goals (MDG) well in time.

REFERENCES