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CLINICAL NATUROPATHIC MEDICINE

Leah Hechtman

SECOND EDITION



ELSEVIER

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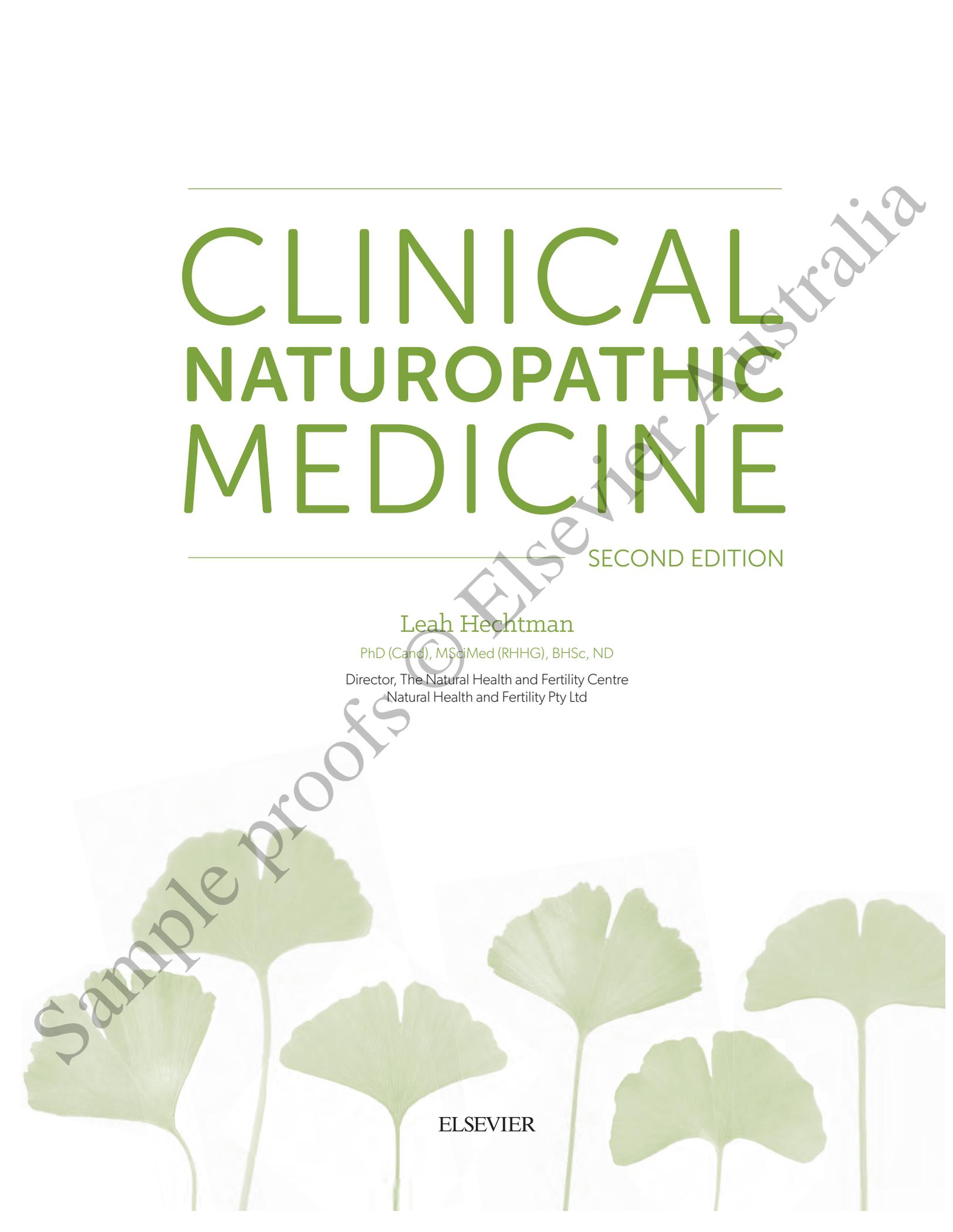
SECOND EDITION

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Foreword

One of the greatest problems limiting the reemergence of naturopathic medicine has been the lack of modern textbooks, especially those based on science. When I was a student back in the early 1970s, the most current textbook in the US had been published the year I was born!

For almost a century, the mantra of conventional medicine and its apologists had been that naturopathic medicine is not only not scientific but misguided, giving patients 'false hope' at best and delaying needed medical intervention at worst. I still remember a debate I had with an MD while I was working as a research associate at a medical school before I decided to enter naturopathic school. I had become a vegetarian and noticed many changes in my body and health. I asked one of my fellow researchers what these changes meant and was told, 'These are errors in your observations; diet does not affect you!' This may sound unbelievable today, but remember this was the doctrine of conventional medicine until recently. The problem for me in the debate, however, was that as a pre-professional I was not aware of research to refute him, only my personal experience. Shortly thereafter, I learned from the woman who married my roommate from college that her juvenile rheumatoid arthritis had been cured. This was quite a surprise to me as I was happily working with MDs and PhDs to find a cure for this incurable disease. When I asked how this happened, her response was that she had seen a naturopathic doctor. 'What is that?' I wondered. I had the opportunity to meet him and ask what he did for my friend. His answer: 'I taught her how to eat properly and detoxified her liver.' This was quite intriguing and a totally different way of thinking about health and disease. I then asked the ND the same question I had asked the MD. He took Guyton's *Medical Physiology* — then a standard textbook for medical schools — off his bookshelf and showed me what was happening to my body as I changed my diet. I was very impressed that the naturopath knew physiology better than the MDs/PhDs I was working with in medical research. I then asked him if I could spend a few days with him watching him see patients. After seeing 'incurable' after 'incurable' patient get better with his expert care, I was convinced that there was something special here. Clearly diet and natural therapies — though discounted by conventional medicine — were indeed effective. But when I asked him for research supporting his therapies or modern books on naturopathic medicine to read, he had nothing to offer.

Happily, this problem is now being substantively addressed.

The first modern textbook of naturopathic medicine was co-authored in 1985 by Michael Murray, ND and me, the

Textbook of Natural Medicine — breaking an almost four-decade hiatus. Now in its 5th edition, the *Textbook's* major contribution was beginning the documentation of the research support for natural medicine. The 2200-page text cites over 12000 references to the peer-reviewed scientific literature documenting the efficacy of natural therapies. Another important contribution was that we brought together for the first time multiple naturopaths as the experts for a scholarly publication. And finally, we developed and documented protocols for the use of natural therapies to promote health, prevent disease and even reverse a wide range of diseases. Unfortunately, it had for far too long been the lone standard for the profession. Finally, this changed with the emergence of Hechtman's excellent *Clinical Naturopathic Medicine*. The first edition provided great detailed guidance on how to practise natural medicine. This second edition provides a welcome update and advancement in depth and breadth.

The major contribution of *Clinical Naturopathic Medicine* that differentiates it from *Textbook of Natural Medicine* is that it is unabashedly focused entirely on the practice of naturopathic medicine. Hechtman and her colleagues expertly look at the historic origins of naturopathic concepts and therapies then integrate these with scientific research to provide a strong foundation for modern clinical naturopathy. While there is plenty of science, I especially appreciate how the authors carefully considered traditional naturopathic approaches and therapies in the context of modern science to provide students and practitioners with guidance on how to think about and treat patients. This is a key strength of *Clinical Naturopathic Medicine*: practical guidance and how to think about patients.

As appropriate, almost every chapter covers not only what to do, but also how to do it and how to optimise for the uniqueness of each patient. Nutrient dosages, herbal combinations, potential adverse interactions with conventional drugs, laboratory tests and clinical criteria identifying patient characteristics that require modification of the intervention, etc. are all covered. Truly, a remarkable compilation of how to practise naturopathic medicine conscientiously, effectively and safely.

Another very interesting aspect of *Clinical Naturopathic Medicine* is that it is systems, rather than disease, oriented. This means that most of the content is oriented towards physiological systems and what goes wrong rather than the disease the person has and how to treat it. While there is plenty of guidance on how to treat diseases, there is far more attention to understanding the function of the system, why it goes wrong and what to do about it.

Included also is some very sophisticated guidance on understanding the adverse effects of the drugs used by conventional medicine for each disease and how to mitigate their effects without impairing their efficacy. This later guidance is extremely important as few realise the prevalence of adverse drug reactions. Research has shown that 25% of patients suffer an adverse event as a result of medical care.^[1] Worse, in the US adverse reactions to **properly prescribed** drugs is the fourth leading cause of death.^[2] And for the elderly (over age 60!), the numbers are alarming: one in ten hospital admissions are due to adverse drug reactions.^[3] Fortunately, many of these adverse events can be prevented by the expert use of natural therapies — as fully described in *Clinical Naturopathic Medicine*. We clearly need conventional medicine: it has many almost miraculous successes which benefit all. However, it is an incomplete system and is very well balanced by naturopathic medicine. We need to stop using the term ‘alternative’ and instead focus on

‘collaborative’ medicine. For the benefit of our patients, we need to integrate the best of natural and conventional medicine.

I am extremely impressed with this work and wish it had been available when I was a student. Conscientious clinicians will use the great resource every day. Congratulations Leah Hechtman, ND and her skilled colleagues. This outstanding textbook will have a profound impact on improving the clinical quality and efficacy of our profession.

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Preface

As we release the second edition of this text, it is a perfect opportunity to reflect on the growth and change in naturopathy since the first edition.

The practice of naturopathy worldwide has continued to achieve greater recognition and acceptance in the wider medical communities. Improved research pathways, educational opportunities and greater evidence for our practice mean the profession continues to evolve positively. This in turn ensures that people are receiving the help they need. As naturopaths, we continue to strive for more, to push the limits, to stretch the boundaries. We continue to help people in need with a form of medicine that supports the body's innate ability to heal itself.

The intention to help others is undoubtedly the primary driver in our profession as evidenced by our standards of patient care. Naturopathic clinicians strive to find the cause of a patient's complaint. We seek to empower people through education and we choose to support them in their health concerns with the gentlest, yet most effective treatments available. We know what we do works. We are simply supporting the development of our time-tested treatments with research and modern medical practices.

We need to continue to take on more responsibility for the welfare of our patients as we strive for healthcare excellence. We need to validate and translate our practice into the language of modern medicine to enable greater access to more individuals who dearly need our care.

We need to share our knowledge and historical wisdom; formulate and share our strategies and work together to push forward. If we truly want to be at the table of modern healthcare, we cannot hide away and shield our methods. As naturopaths, we offer a unique perspective of healthcare and provide significant support and relief for patients. Our treatments encourage self-responsibility and involvement in the healing process.

The structure of this text was crucial to the design of the project. It was important that the content is easily accessible, logical and articulate. The textbook has been divided into three parts: Part 1 — Principles of

naturopathic medicine — providing an overview to our main treatment approaches; Part 2 — Naturopathic treatments — giving a specific overview of the two main treatments, nutrition and herbal medicine; and Part 3 — Body systems — detailing each system of the body and relevant major conditions. There are also appendices relevant for the student and the clinician, both in the book and online at Expert Consult. This text is accompanied by a second volume of advanced principles, topics and conditions.

Each component of this book has been arranged in a systematic manner: each chapter pertains to a specific system of the body or unique topic; and each condition is organised according to pedagogy that ensures the content is comprehensively and systematically covered. Within each condition, the reader can view the content in overview for quick access or as a detailed discussion that may provoke critical thought, reflection and consideration. The traditional approach to the topic has been incorporated and integrated into the carefully researched content that follows. Each reference was included not solely because it supported a statement, but because it ensured that the content delivered was sound and accurate. At the conclusion of each condition, the reader is provided with a comprehensive case study. This ensures that each contributor's unique clinical perspective enriches the content and translates the theory into realistic clinical practice.

At the heart of naturopathy, we must lean on our elders whose traditional system demonstrated that the essence of our treatment relies on the relationship between the patient and the clinician. Evidence-based medicine forms a component of our system of knowledge. It provides us with a lens to explain the efficacy of our treatment but can never replace the healing relationship. The relationship between clinician and patient continues to be the greatest teacher for growth and understanding and ultimately the platform for change and healing.

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Naturopathic philosophy

Kate Broderick

INTRODUCTION

Naturopathic medicine is categorised as a 'whole medical system'. Whole medical systems are 'complete systems of theory and practice that have evolved independently over time in different cultures and apart from conventional medicine or Western medicine.'^[1] Perhaps the greatest part of this categorisation is attributable to the comprehensive and seamless philosophical basis of naturopathic medicine and the closely aligned clinical theory and practice that flow from that philosophy. The foundation of naturopathic philosophy and clinical theory as the basis of practice can be compared to that of Eastern whole medical systems such as traditional Chinese medicine or Ayurveda, as well as to other Western whole medical systems such as homeopathy, though certainly naturopathic medicine is the youngest of these systems.

The evolution of naturopathic medicine since its establishment as a profession just over 100 years ago has run parallel in time to the evolution of modern conventional medicine, and this has resulted in influences that have shaped and galvanised both the naturopathic professional body and the practice of naturopathic medicine. It has been more heavily influenced by modern technological medical advances than by the older whole medical systems, while it has also been challenged to define its philosophy and clinical theory clearly and comprehensively in order to strengthen its identity and its approach to disease and healing.

Origins of naturopathic medicine

The history of naturopathic medicine can be traced back to ancient roots in Greco-Roman medicine, but a full exposition of the ancient period is beyond the scope of this text. This chapter will limit itself to a concise overview of the more immediate history of the profession, from the mid-1800s hydrotherapy and nature cure movements in Europe to the first two decades of professional formation in 20th century America. This will provide a basis for understanding the roots of modern naturopathic philosophy and clinical theory.

EUROPEAN HYDROTHERAPY AND NATURE CURE

While there are a number of key players in the development of the European hydrotherapy and nature

cure movements, the two most influential figures were Vincenz Priessnitz (1799–1851) and Father Sebastian Kneipp (1821–97). Their pioneering work in hydrotherapy was the subject of provincial rivalry and unrelenting professional jealousy from the medical community yet it laid the foundation for the development of a new system of medicine following on their traditions.

Born into a peasant family in Austrian Silesia, Priessnitz received no official medical training. He began treating injuries from local farmyard accidents with cold-water applications, wet bandages and compresses. From these early beginnings Priessnitz experienced overwhelming clinical success as he developed his art of water cure, with Chopin and Napoleon III among those who sought his clinical expertise.^[2] His fame soon spread far beyond the confines of Austria and patients from Britain, France, Italy, Turkey, America and Germany soon sought his guidance.^[3]

Like Priessnitz, Father Kneipp came from humble beginnings in Bavaria, Germany. Too poor to afford medical help, he cured himself of tuberculosis with cold-water therapy; nightly dips in the icy waters of the Danube were the key to his success.^[2] After attending a seminary and becoming a priest, he began to successfully treat the people of his parish using his water cure and herbal medicines. Word of his successful water cure spread, and one of his patients, Benedict Lust, would go on to take Kneipp's water cure across the Atlantic to America, providing the foundation for the creation of a new system of medicine.^[2,4] But the formation of this new system would draw from other roots already in America.

THOMSONIANISM, PHYSIOMEDICALISM AND THE ECLECTICS

Samuel Thomson (1769–1843) developed a method of healing that was predominantly based on the use of Native American herbal remedies and sweat baths. His approach was labelled heroic but was considered less harmful than the orthodox medicines being used at the time, which included the use of bleeding, mercury and arsenic. Thomson's simple healing system was based on the concepts of heat and cold; heat was considered life supporting and cold was considered life threatening. Substances that stimulated heat in the body, such as diaphoretics, were considered therapeutic, while substances

that introduced cold into the body, such as mercury, aconite and opium, were avoided.^[5]

Thomson had a strong belief in an individual's ability and right to self-treat and firmly believed that the practice of healing should remain with lay people. Underpinning his adamant belief that his system of healing should only be practised by householders was his strong aversion to medical education. He sold franchises to his healing method, which he called 'friendly botanic societies', until the time of his death in 1843.^[6]

The physiomedicalist movement was initiated by one of Thomson's assistants in reaction to Thomson's rejection of educational progression. In 1835, Thomson enlisted the support of Alva Curtis, a young and popular practitioner from Ohio who claimed to have lost only one out of 200 patients. Curtis used the position bestowed upon him by Thomson to gather support for his own system of healing and led a breakaway movement in 1838 with the establishment of his *Independent Thomsonian Botanic Society*.^[7] In contrast to Thomson's aversion to furthering medical knowledge, Curtis established medical schools to teach and develop his system of healing, which was largely based on the use of herbal medicine.

The physiomedicalist movement also initiated the use of an energetic diagnostic system. Patients in deficient states were regarded as 'asthenic', and those in excess states were regarded as 'sthenic'. Diagnostic procedures such as tongue analysis and pulse diagnosis were also employed so that the most appropriate herbal remedies could be selected.

After initial work by Curtis and Cook, the physiomedicalist movement was further refined by Thurston in 1900 as a:

... medical philosophy founded on the Theorem of a vital force or energy, inherent in living matter of tissue-units, whose aggregate expression in health and disease is the functional activities of the organism and whose inherent tendency is integrative and constructive; resistive, eliminative, and reconstructive to inimical invasion, or disease-causations.^[8]

The detailed and comprehensive work of Thurston provided the physiomedicalist movement with a philosophical basis. In his 400-page document, Thurston provided a rational outline of the failure of 'regular' medicine and went on to set out the theorems of physiomedicalism, the principles of the physiomedicalist movement, and a comprehensive manifesto on medical education, medical terminology, body systems, pathology, disease states, symptoms, diagnosis, food, immunity and the role of the physician.

Wooster Beach (1794–1868) established the 'reformed botanic movement', which drew on the professionalism of medicine and the heritage of indigenous herbal medicine and European and American healing traditions.^[9] As the numbers of practitioners and the popularity of this new movement increased, Beach's influence diminished, and the practice of this system of healing came to be known as the 'Eclectic' movement, with Beach widely considered to be the founder of Eclectic medicine.^[10] This movement

allowed practitioners to incorporate treatment modalities of other healing systems into their repertoire. Free to experiment with a range of healing modalities, the numbers of Eclectic practitioners soared. At its peak, Eclecticism claimed over 20 000 practitioners in the United States; these numbers presented serious competition for the practice of orthodox medicine.^[11]

Formation of a profession

Naturopathy was formalised as a system of medicine in the United States under the stewardship of Benedict Lust in the early 20th century. As mentioned, Lust was a disciple of Father Kneipp and he formally introduced the practice of Kneipp's hydrotherapy to the United States, opening the Kneipp Water Cure Institute in New York in 1896 at the age of 27.^[12] Lust is considered to be the father of naturopathy. Trained in osteopathy and chiropractic, he opened the first health food shop in America and founded massage and chiropractic schools in New York. He also obtained degrees in homeopathy and in Eclectic medicine in 1913 and 1914.^[13] Lust purchased the rights to the term 'naturopathy' from Dr John Scheel in 1902.^[14,15]

The formation of naturopathy as a profession and a system of medicine was based on European and American nature cure and similar systems described earlier in this section. Lust's overarching perspective was that if something was natural and it worked, then it could be considered part of naturopathy. Lust was a tireless and avid advocate of naturopathy, speaking and writing prolifically to both medical audiences and the lay public. His dedication and that of other early pioneers of naturopathy, as well as the popularity of naturopathy as compared to the orthodox medicine of the early 20th century, resulted in a rapid rise in the profession for the next 40 years.

Perhaps the most comprehensive and well-known text demonstrating the early philosophical foundations of naturopathy is *Nature Cure*, by Dr Henry Lindlahr, first published in 1913.^[16] Lindlahr was also a former patient and disciple of Father Kneipp, and was a major figure in the early American naturopathic landscape. *Nature Cure* perhaps went beyond any other contemporary writings to set out a cohesive and comprehensive philosophy and theory for naturopathy, though Lindlahr did not use that term, and this work is still used as a seminal text in the study of modern naturopathic philosophy and clinical theory.

But, despite the prolific writing of these early naturopathic pioneers, the profession went forward for more than half a century without any clear and concise statement of professional identity and without a philosophical or theoretical approach to practice that was documented and widely agreed to by the members of the profession. Political and cultural forces, as well as advancements in conventional medicine, negatively affected the ability of the profession to remain cohesive and the profession in America became almost non-existent by mid-century. A resurgence in the profession that can be correlated to the rise of the counter-culture in the late 1960s and the 1970s, and the political and legal battles that

ensued from that resurgence, provided a galvanising force for organising and regulating the profession. From that came the coalescing of the body of modern naturopathic philosophy and clinical theory that is the subject of the remainder of this chapter.

DEFINING NATUROPATHIC MEDICINE

Naturopathic medicine is a distinct method of primary health care — an art, science, philosophy and practice of diagnosis, treatment, and prevention of illness. Naturopath[s] seek to restore and maintain optimum health in their patients by emphasizing nature's inherent self-healing process, the vis medicatrix naturae. This is accomplished through education and the rational use of natural therapeutics.^[17]

The development of naturopathic medicine in America and the political forces it has defended itself against have resulted in America leading the charge to define the profession and its philosophies and clinical approach, with the above definition being a core part of early efforts. However, the philosophy and clinical theory of naturopathic medicine have migrated worldwide with the profession itself and have been adapted to align with different regulatory, educational, political and economic structures wherever it is practised. The philosophy and clinical theory presented in this chapter represent an adaptation that is suitable to the Australian landscape.

An Australian definition of naturopathy was developed in 2000 by the Naturopathy and Nutrition Forum, a working group of naturopathic practitioners and educators at a retreat coordinated by Southern Cross University. This definition, as follows, was subsequently adopted within the Naturopathy National Training Package of 2002:^[18]

Naturopathy is a distinct method of healing, underpinned by a philosophical perspective which recognises that all living forms possess a self-regulatory, inherent ability for self-healing. This inherent ability, or Vital Force, operates in an intelligent, orderly fashion. Naturopathic approaches to health care are aimed at supporting and enhancing the body's own ability to heal itself.

Expressions of health and disease are considered reflections of the dynamic interchange between the physical, mental, social, environmental and spiritual landscape of the individual.

Naturopathy is both an art and a science, drawing upon several lines of evidence, which range from qualitative, quantitative, cultural and traditional.

Naturopathic practice integrates a number of modalities, principally nutrition, herbal medicine and tactile therapy. These modalities are applied on the basis of specific principles, and within the context of a healing environment which endeavours to empower the individual, motivate and educate them in order to restore, maintain and optimise wellbeing.

The comprehensiveness of the Australian definition of naturopathy as compared to the more brief US definition,

above, is reflective of both the differences in the regulatory and educational frameworks of the two countries and the aims of the two definitions. It also reflects the fact that the brief US definition is part of a larger document that includes a longer definition, in addition to the six principles of naturopathic medicine, each of which is discussed in the next section. The key commonality of the two definitions is the concept of the healing power of nature, which is one of the primary distinguishing philosophical underpinnings of naturopathic medicine.

Concepts of health and disease

The preamble to the Constitution of the World Health Organization as adopted by the International Health Conference in 1946 defines 'health' as 'a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity.'^[19] This definition has not been amended since. In taking a holistic view of health and wellbeing, it is in complete alignment with the naturopathic approach to disease and healing.

Whereas the conventional model of diagnosis and treatment of disease approaches disease as a discrete entity that can be identified and eliminated through application of drugs or surgery, the naturopathic model approaches disease from a baseline presumption of health as the natural state of being. Naturopathic treatment seeks to restore health by removing the causes of disease or illness.^[20] A concise summary of the naturopathic model for restoration of health is shown in Fig. 1.1. This model gives us a preview of the principles of naturopathic medicine and the other important frameworks of naturopathic clinical theory detailed below.

1. Universe is ordered, intelligent, wise and benign
2. Health is a constant and natural state of being
3. Ill health is an adaptive response to disturbance in organism
4. Removal of disturbing factors will result in potential return of normal health
5. Intervention should involve least force necessary to stimulate self-healing mechanisms

FIGURE 1.1 Naturopathic model for restoration of health

Jeff J, Snider P. Course syllabus: NM5131, Naturopathic clinical theory. Seattle: Bastyr University; 1997–2005. Used with permission of Jared Zeff.

Relevance of philosophy and clinical theory to naturopathic practice

The existence of a unified philosophy and clinical theory to underpin naturopathic practice is not only vitally important to the definition of the profession for regulatory bodies and

the general public, but also critical to guide both the education of future naturopaths and the foundational approach of the practice of naturopathic medicine. As with any healing system, the view of a practising naturopath regarding what naturopathic medicine is will guide and shape what they do in the consulting room, how they justify what they do, and what they expect the outcomes to be. It is the lens through which all patients can be viewed to guide diagnosis and treatment or preventive care. Naturopathic philosophy and clinical theory serve as guideposts for the collective of a highly eclectic profession — they are the glue that holds the profession together — as well as serving to distinguish naturopathic medicine from other systems of natural therapeutics.

And importantly, a cohesive philosophy and clinical theory creates a foundation for thinking deeply about what we do and why we do it. It guards against the loss of individualisation of patient care and the movement of naturopathic medicine towards short cuts, protocols, loss of connection to our traditions, and the replacement of meaningful restoration of health with long-term reliance on symptom-based interventions.

PRINCIPLES OF NATUROPATHIC MEDICINE

There are six commonly recognised principles of naturopathic medicine, which provide the philosophical underpinnings out of which grow naturopathic clinical theory and practice. These six principles are the foundations for how naturopaths approach patient care. They are summarised in Fig. 1.2.

1. *Vis Medicatrix Naturae*: The Healing Power of Nature
2. *Primum Non Nocere*: First Do No Harm
3. *Tolle Totum*: Treat the Whole Person
4. *Tolle Causam*: Treat the Cause
5. *Docere*: Naturopath as Teacher
6. *Preventare*: Prevention

FIGURE 1.2 Six principles of naturopathic medicine

Vis Medicatrix Naturae (The Healing Power of Nature)

The healing power of nature is the inherent self-organizing and healing process of living systems which establishes, maintains and restores health. Naturopathic medicine recognizes this healing process to be ordered and intelligent. It is the naturopath[s] role to support, facilitate and augment this process by identifying and removing obstacles to health and recovery, and by supporting the creation of a healthy internal and external environment.^[17]

This principle is the key commonality between the US and Australian definitions of naturopathic medicine and naturopathy (see above), though the Australian definition uses the term ‘vital force’ to name this principle. It is the first principle of naturopathic medicine because it defines the major distinguishing philosophy of the naturopathic approach to healing, as compared to conventional or other medicines. As the cornerstone of naturopathic practice, it highlights the nature of the organism to operate according to an intelligent and ordered process and it also underscores the naturopath’s reliance on this intelligence to bring the organism back to health when the correct internal and external environments are provided.

The recognition of a ‘life force’ that is distinguished from the known laws of nature or the material sciences is common to the whole medical systems. These systems all carry a presumption that some form of energetic force provides the catalyst for life and for the capacity of the human organism to heal. The concept is described in ancient healing systems of both the East and West, some of which are still in practice today: Hippocrates named this force the *physis*, Galen named it the *pneuma*, Paracelsus dubbed it ‘the inner alchemist’ or *archeus*, in Ayurveda and yoga it is *prana*, and in Chinese medicine it is *qi/chi*. Across all of these systems of thought the concept of the vital force is defined somewhat differently. For example, in Chinese medicine, in the concept of *qi*, there is no distinction between matter and energy — both are comprised of *qi*.^[21] However, the core concept of this force being what enlivens the organism and guides it back to health from illness is shared across the systems.

As with these historical systems, the concept of the vital force was established as a core philosophy in naturopathic medicine at a time when the material sciences were much less advanced than they are at present. Thus, much of what might have been considered vitalistic in historical naturopathic practice can now be explained in materialistic/mechanistic terms, via the laws of chemistry and physics. And it is possible that at some time in the future, with the growing understanding of quantum physics, all aspects of what we refer to as the *Vis Medicatrix Naturae* will be explained in mechanistic terms. Certainly, in the fields of nutritional research and pharmacognosy (the study of medicinal drugs of natural origin, i.e. from plants or other natural sources), much of what a naturopath does can already be explained via modern scientific mechanisms of action. However, that does not negate the fact that, absent a full scientific exposition of the nature of the energetics and consciousness of human and other organisms, the concepts of *qi*, *prana* or vital force and the knowledge of how to support or encourage their movement via traditional therapeutics have great utility in the establishment and maintenance of human health.

The principle of the *Vis Medicatrix Naturae* aims to guide the naturopath to work with, rather than against, nature. As an important part of this aim, the naturopath’s view of the symptoms of illness is framed

in the context of the body's own innate natural healing mechanisms:

Rather than viewing the ill patient as suffering from a 'disease,' the naturopath views the ill person as functioning within a process of disturbance and recovery in the context of nature and natural systems ... Disease is the process whereby the intelligent body reacts to disturbing elements. It employs such processes as inflammation and fever to help restore its health.^[20]

Thus, the *Vis Medicatrix Naturae* is a 'self-organising and healing process', and disease is seen as something caused by disturbance of that process and the body's attempt to recover from that disturbance. Symptoms of acute disease, such as fever and acute inflammation, are seen as tools that the body uses to bring itself back to health — they are self-healing processes that express the *Vis Medicatrix Naturae* and enable the possibility of a complete cure. Suppressing those processes poses an obstacle to cure. Of course, in some instances, it can be necessary to suppress severe symptoms. This is discussed further in the section on the therapeutic order below.

There is a common variant in the discussion of the *Vis Medicatrix Naturae* that should be addressed: the *Vis Medicatrix Naturae* is often equated to 'vitality', which is somewhat of a sidestep from the principle. Certainly, the level of a person's vitality is something in which a naturopath is keenly interested. The level of vitality tells us what type of response a person may or may not mount to a treatment intervention and what level of intervention is best called for in a given case; that is, lower force vs higher force, among other things. However, the level of a person's vitality is not the same as the *Vis Medicatrix Naturae*. The *Vis Medicatrix Naturae* is the intelligence and order in natural processes, the tendency towards balance and health, whereas vitality can be considered as the power behind or within this intelligence. Perhaps the easiest way to distinguish these concepts is by analogy. If the *Vis Medicatrix Naturae* is very simplistically equated to the blueprint for an engine, then vitality can be equated to the fuel for the engine. The blueprint is always there, the level of the fuel can be higher or lower.^[22]

Primum Non Nocere (First Do No Harm)

Naturopath[s] follow three precepts to avoid harming the patient:

Naturopath[s] utilize methods and medicinal substances that minimize the risk of harmful effects, and apply the least possible force or intervention necessary to diagnose illness and restore health.

Whenever possible the suppression of symptoms is avoided as suppression generally interferes with the healing process.

*Naturopath[s] respect and work with the *Vis Medicatrix Naturae* in diagnosis, treatment and counseling, for if this self-healing process is not respected the patient may be harmed.^[17]*

This principle is familiar from its roots in Hippocratic medicine, and on the surface has commonality to the Hippocratic oath still taken by medical doctors in the contemporary world. Hippocrates said, 'As to diseases, make a habit of two things: to help, or at least to do no harm.'^[23]

This first precept or principle provides the clearest connection between the principles of naturopathic medicine and the therapeutic order, discussed below. This first precept has two important components: using therapies that minimise risk of harmful effects and applying the least force necessary to diagnose and affect a cure. The first component shows a contrast to conventional medicine, where negative side effects of medications tend to be accepted as the norm and both surgeries and medicines can put the patient at substantial risk. Of course, in any system of medicine, there is a balancing of the risk of not treating against the risk of providing the available treatment.

However, in naturopathic medicine, the therapies used are generally much lower force interventions than those in conventional medicine. In both diagnostics and treatment, 'lower force' generally refers to procedures and examinations that are least invasive to the patient's body and expose the patient to the least amount of risk. With regard to treatment, it also refers to using more gentle therapies, those with a more subtle action, whenever possible, and using more aggressive therapies only when absolutely necessary to avoid risk.

The second precept points to the naturopath's avoidance of suppressing symptoms of disease, as to do so will interfere with the healing process. Symptoms, particularly those characterised by inflammation or discharge, are seen as expressions of the body's attempt to heal, and barring any harm from allowing them to run their course, suppression of symptoms is generally avoided. Suppression can be defined as anything that prevents the development, action or expression of a symptom, inhibiting or stopping a normal healing process from occurring. The concept of a normal healing process is discussed in the section on the process of healing below.

Palliation of symptoms is sometimes necessary when a disease process has risen to the level of being dangerous to the patient or when the patient is in a great deal of pain or discomfort. Palliation can be defined as making a disease or its symptoms less severe or unpleasant without removing the cause. It can be done in a way that is suppressive or in a way that is not suppressive, although both possibilities are not always available in every case. As an example, the palliation of a fever higher than 40°C can be achieved in a suppressive way by bringing the body temperature down to normal or close to normal with a non-steroidal anti-inflammatory drug, or it can be achieved in a non-suppressive way by gently lowering the core temperature using hydrotherapy to a level that is no longer dangerous but which allows the fever to still do its important work in the healing process. The different forms of palliation generally present the decision of whether or not to suppress — if there is a possibility for cure, for return to normal health, the second principle urges us to

avoid suppression to the greatest extent possible while ensuring patient safety.

The third precept ties in with the foundational first principle and calls for choosing therapies that rely upon the *Vis Medicatrix Naturae* for healing. In general, the more aggressive a therapy is, the more it is supplanting or potentially counteracting the intelligence of the *Vis Medicatrix Naturae*, and in cases where no harm will result from using only lower force interventions to support the body's natural healing processes, this precept urges that approach. This minimises to the greatest extent possible the potential of harm, because the naturopath is then working with the body's own innate healing capacity instead of trying to force healing by substituting a stronger intervention and their own judgment about what is right for the patient. The *Vis Medicatrix Naturae* knows what is right to bring the patient to health. In this, the importance of teaching the patient about the healing process is clear so that both the naturopath and the patient understand the diagnostic and treatment approach and respect the body's innate capacities.

It is often said that the corollary to the principle First Do No Harm is First Do Nothing. This acknowledges that it is not what the naturopath does that returns a person to health, but when the vitality is strong enough and the causes of illness are not overpowering the system, the *Vis Medicatrix Naturae* will return the patient to health without intervention.

Tolle Totum (Treat the Whole Person)

Health and disease result from a complex of physical, mental, emotional, genetic, environmental, social, and other factors. Since total health also includes spiritual health, naturopath[s] encourage individuals to pursue their personal spiritual development. Naturopathic medicine recognizes the harmonious functioning of all aspects of the individual as being essential to health. The multi-factorial nature of health and disease requires a personalized and comprehensive approach to diagnosis and treatment. Naturopath[s] treat the whole person taking all of these factors into account.^[17]

Treat the whole person is the third of the six principles of naturopathic medicine. This principle sets out a bio-psycho-social-spiritual approach to assessing and treating patients. Naturopaths take into account not just the physical body, but also the patient's state of mind and mental functioning, their emotional state and emotional intelligence, the exposures that their particular environment presents, the nature of their family and social relationships, and their connection with their spirituality. This holistic approach recognises that the various aspects of a person are intimately interconnected such that no part can be understood without reference to the whole, and the whole is greater than the sum of the parts. It is also an approach that puts the patient at the centre, rather than the disease.

In contrast to holism, a reductionist approach will tend to look at the minute parts of a system and extrapolate or

attribute behaviours of that system to its isolated parts, essentially analysing the complex human organism in terms of its fundamental constituents — for example, biochemical pathways, cellular mechanisms or organ functions — and treating that analysis as sufficient explanation of the whole. This can be seen very clearly in the therapies of conventional medicine.

However, just because naturopathic medicine is a holistic pursuit, one cannot deny that it also has its reductionist components. Particularly as the realms of functional medicine and naturopathic nutrition increasingly overlap, and pharmacognosy continues to elucidate the specific biochemical and pharmacological actions of many herb constituents, naturopathic medicine is showing a tendency to gravitate more towards a reductionist approach. The third principle of naturopathic medicine might serve as a caution against moving too far in that direction. This is not to say that reductionist information about the workings of the minute aspects of the human organism does not have value — of course it does. But naturopathic philosophy and clinical theory urge that this information be seen within the wider scheme of things, rather than being considered as the 'truth' that ends the conversation. Any amount of understanding that we have from the material sciences must be considered in light of the organism as a whole, as well as the limits of the human intellect to process the full complexity of the human organism.

Naturopaths examine many facets of a person when considering what may be causing and what may remedy illness in an individual — each person's experience of illness is different — and a truly individualised view of the patient is necessary to a holistic approach. Taking an individualised view of both the patient and their experience of illness is necessarily a patient-centred approach. In 'Towards a global definition of patient centred care',^[24] Stewart defines patient-centred care as that which:

(a) explores the patients' main reason for the visit, concerns, and need for information; (b) seeks an integrated understanding of the patients' world — that is, their whole person, emotional needs, and life issues; (c) finds common ground on what the problem is and mutually agrees on management; (d) enhances prevention and health promotion; and (e) enhances the continuing relationship between the patient and the doctor.

Despite the source of this definition being a conventional medical journal, it is an apt description of the patient-centred naturopathic approach.

Tolle Causam (Treat the Cause)

Illness does not occur without cause. Causes may originate in many areas. Underlying causes of illness and disease must be identified and removed before complete recovery can occur. Symptoms can be expressions of the body's attempt to defend itself, to adapt and recover, to heal itself, or may be results of the causes of disease. The Naturopath seeks to treat the causes of disease, rather than to merely eliminate or suppress symptoms.^[17]

The fourth of the six principles of naturopathic medicine, Treat the Cause, flows naturally from the preceding principle, because treating the whole person necessarily implies treating the primary causes of illness, and *Tolle Totum* indicates where to look for the causes: the physical, the mental, the emotional and the spiritual.

Lindlahr's unity of disease as outlined in *Nature Cure* states that there are three primary causes of disease: lowered vitality, abnormal composition of blood and lymph, and accumulation of morbid matter and poisons in the system.^[16] Of course, the era in which this book was published explains its dated language, and we would describe these causes somewhat differently today. Lindlahr's three primary causes of disease point to the conditions of the body that are setting up an environment for illness to take hold. If disease were a plant, then the condition of the body is the soil in which the plant of illness may grow. A person can give illness a fertile soil in which to take root or can deny it that fertile soil through appropriate habits that follow natural laws. A modern naturopath would refer to this foundational condition of the body as the 'terrain' for disease. Contrast this to a pathogen, which is like the seed being planted in that terrain.

To describe briefly each of Lindlahr's three primary causes, the concept of vitality has been discussed above as related to the principle of the *Vis Medicatrix Naturae*, as the 'fuel that runs the engine'. Lowered vitality is a state of depletion that occurs as the body, mind, emotions and spirit are denied the conditions needed to maintain their healthy function, or it can occur constitutionally. In naturopathic philosophy and clinical theory, anything that negatively affects the state of the vitality is termed a 'disturbing factor', and the longer that disturbing factor persists, the more depleted the vitality becomes.

'Abnormal composition of blood and lymph' relates primarily to the proper access of the body to necessary nutrients. If a person doesn't ingest, digest or absorb well the essential proteins, fats, carbohydrates, vitamins, minerals, and other micronutrients, or they don't breathe properly to maintain the appropriate levels of the various blood gases, then they do not have what they need in their blood and lymph to nourish their cells. 'Accumulation of morbid matter and poisons' in the system relates to the build-up of toxins over time, whether from endogenous or exogenous sources. If the cells and tissues, and perhaps especially the organs of elimination and extracellular fluids, are burdened with a large toxic load, then cellular function is disturbed or compromised, and organ systems begin to experience dysfunction.

As an aside, Lindlahr goes deeper than these three primary causes and states that they are, themselves, caused by a greater underlying common cause: 'transgression of natural laws in thinking, breathing, eating, dressing, working, resting, as well as in moral, sexual and social conduct.'^[16] Again, this comports with the language of his time, but these ideas are reflected in modern language in the section below on the determinants of health. From his three primary causes, it appears as if Lindlahr places all causes of illness in the physical body. However, his list of 'transgressions of natural law' demonstrates that he also

considered mental and emotional influences and elsewhere in *Nature Cure* he lists 'mental afflictions' as a secondary cause of illness. Finally, it is worth noting that Lindlahr's three primary causes of disease are closely interrelated, because not only do they all spring from the same deeper causes in lifestyle, but also once one has begun, it is more likely that the others will follow.

Returning to the concept of the terrain as the internal environment of an organism that provides the setting for either health or disease, as well as determining an individual's tendencies or susceptibilities to illness, we must consider the endogenous production of toxins in the body and the condition of toxemia. Toxemia is the production of high levels of metabolic waste created by maldigestion — the dysbiotic bacterial metabolism of poorly digested food in the intestines. These toxins enter the blood, irritate tissues systemically, interfere with organ function and become the basis for chronic illness, inflammatory processes, autoimmune processes and other dysfunctions.^[25]

Endogenous toxicity sourced in gastrointestinal dysfunction and inflammation is one framework from which to look at all three of Lindlahr's primary causes of disease. Though this is a long-standing traditional naturopathic theory, it is clear from recent research that the absence of beneficial bacteria in the colon and/or the presence or overgrowth of non-beneficial bacteria or other organisms, in either the small intestine or the colon, are correlated to various diseases, particularly those involving dysregulation of the immune system. From a more traditional perspective, we can surmise that the action of dysbiotic flora on various foods during digestion, as well as the failure of proper digestion in the absence of necessary beneficial bacteria, forms toxic by-products, which then increase the total toxic load on the body's systems of elimination and which can overwhelm these systems, producing symptoms of illness. Chronic gastrointestinal dysfunction and inflammation will reduce digestive and absorptive capacities for essential nutrients and ultimately devitalize the entire system via chronic impacts on lymphatic and nervous tissues associated with the gastrointestinal tract (GIT). It is this line of thought that supports the traditional naturopathic approach of seeking the cause of illness in the digestive system and treating the cause accordingly.

Of course, it is important to note that even the normal metabolic processes produce a regular baseline load of endogenous toxins that must be eliminated from the body. This is what our eliminative organs are designed to do. When they are overwhelmed by a heavy load of toxins from other sources, or when the body's organs of elimination are not functioning optimally, even the accumulation of our normal metabolic wastes can create the symptoms of illness. Finally, we are exposed in the modern world to a plethora of exogenous toxins throughout our daily lives, all of which contribute to the body's total toxic load and affect the capacity of the eliminatory organs to maintain a balanced internal environment. We can draw from this an understanding of the naturopathic approach to placing a primary treatment emphasis on detoxification, depuration and elimination in

order to address the accumulation of toxins as a cause of disease.

Docere (Doctor as Teacher)

The original meaning of the word 'doctor' is teacher. A principal objective of Naturopathic medicine is to educate the patient and emphasize self-responsibility for health. Naturopath[s] recognize and employ the therapeutic potential of the [practitioner]-patient relationship.^[17]

This is the fifth of the six principles, and despite its brevity, there are several very important concepts within it. Educating the patient is just one component; it is well understood that naturopaths teach their patients about how their bodies function, the nature of disease and healing, and the importance of health-supporting behaviours. Second is the idea of emphasising self-responsibility. If a naturopath is teaching their patient how to support their own health and also emphasising self-responsibility, then they are not acting in a paternalistic way; that is, the naturopath is not directing the patient nor acting as an authority above them. Instead, they are working in partnership with the patient, serving as a guide and allowing them to access and use the information to empower their own behaviour.

The third important component of this principle is the recognition and employment of the therapeutic potential of the practitioner–patient relationship. This underscores the idea that the cultivation of a meaningful therapeutic relationship with patients is a type of teaching or guiding in itself, and it has value in the healing process of the patient. In order to work with patients in this way, a naturopath must get to know them well, within the context of a long-term, continuing therapeutic relationship, and develop trust so that they will share their full range of experiences and challenges to allow the constructing of a picture of who they are as a whole person. The naturopath provides a safe, non-judgmental space for the patient to be the whole of who they are. This can call for significant time and patience on the part of both the naturopath and the patient.

The ability to be a therapeutic presence for patients can be one of the most valuable skills that a naturopath can apply in the treatment room. Therapeutic presence can be defined as 'bringing one's whole self into the encounter with clients, by being completely in the moment on multiple levels: physically, emotionally, cognitively, and spiritually.'^[26] This includes being unconditionally present with the patient, deeply listening from a place of discernment and non-judgment, and an ability to take on a witness perspective on both self and other. Attention is given to both verbal and non-verbal communication, and the cultivation of self-awareness of attitudes, words and judgments, as well as emotional intelligence on the part of the naturopath, is a foundational practice.

The emphasis placed on self-responsibility in this principle points to the benefits of an egalitarian relationship between practitioner and patient in naturopathy. In Western culture, the conventional healthcare system has historically tended to create more of

an active–passive or guidance–cooperative relationship between doctor and patient, with the doctor assuming a more authoritarian role sitting hierarchically above the patient. Within this healthcare culture, it can sometimes be a challenge for a naturopath to facilitate the creation of a more egalitarian relationship with a patient. However, it is quite often the case that patients seeking care from a naturopath are looking for a space where their concerns will be fully heard and where they are a full partner in their own health decisions, making those decisions based upon an understanding of their body and their condition and the treatment options and potential outcomes available. It is this type of empowerment that the naturopath seeks to create.

The act or action of 'teaching' may be accomplished by a naturopath in any number of ways and in a wide array of settings. Providing information or sharing specific knowledge with a patient one-on-one can help them understand some aspect of themselves (body, mind, emotions, spirit) better, and that understanding then becomes a framework around why certain recommended treatments or behaviour changes can be useful. This can be most powerful when the naturopath can identify where the largest gaps are in a person's knowledge about health. But this type of informational support results in action or behaviour change in the patient only when the underlying reason for a detrimental behaviour is a lack of understanding or information. For example, providing information to a smoker regarding the negative health impacts of smoking is unlikely to motivate them to change that behaviour, because most smokers are already very aware of the increased incidence of some diseases that result from smoking.

Beyond providing informational support to patients, or even providing that support via community lectures or writing, naturopaths often support and teach patients by assisting them in their own process of self-evaluation, helping them to see where their own blind spots are, or misalignments between their beliefs and actions. This also generally will include emotional support via counselling and assisting patients to understand how various mental and emotional patterns can be connected to problems with physical health. The connection between early childhood trauma and various types of chronic illness that are often present in patients who seek care from a naturopath, such as autoimmune disease, is an important consideration and the 'safe space' afforded in a naturopathic consultation can often provide a place for past traumas to rise to the surface to be healed. Thus, it is crucial for a naturopath to have a good referral network of practitioners who are more highly trained in working with mental and emotional conditions to work with in partnership in complex cases.

Preventare (Prevention)

Naturopathic colleges emphasize the study of health as well as disease. The prevention of disease and the attainment of optimal health in patients are primary objectives of naturopathic medicine. In practice, these objectives are accomplished through education and the

promotion of healthy ways of living. Naturopath[s] assess risk factors, heredity and susceptibility to disease, and make appropriate interventions in partnership with their patients to prevent illness. Naturopathic medicine asserts that one cannot be healthy in an unhealthy environment and is committed to the creation of a world in which humanity may thrive.^[17]

This is the sixth and final principle of naturopathic medicine. It is important to note in introducing this principle that, whether a naturopath is aiming to assist a patient in healing from disease, or preventing potential future disease, the therapeutic approach still follows the same strategies. All six of the principles apply in a preventive context as well as in the context of illness, and the clinical theory as discussed in the following sections likewise applies to both contexts.

There are many different types of preventive care, and naturopathic medicine approaches these from all levels. Primary prevention can be defined as actions taken to prevent a state of illness from ever occurring. In naturopathic medicine, primary prevention might include diet and lifestyle modification; instruction on health supportive daily habits; smoking, drug or alcohol abuse cessation; weight loss; or counselling that assists a patient in resolving mental or emotional patterns that might eventually lead to either physical or mental illness. Primary prevention also commonly falls into the public health arena, with measures such as infectious disease reporting, sanitation and food safety regulations.

Secondary prevention can be defined as early detection of sub-clinical disease; that is, disease that is not yet showing outward signs and symptoms. In large part, this type of prevention falls into the realm of conventional medicine. Examples of secondary prevention are PAP smears, mammograms, scheduled screening blood tests and bowel cancer screening. A naturopath can still play a vital role in ensuring appropriate secondary prevention for patients. Naturopaths, in working holistically, will tend to gather significantly more information from patients and to see patients more frequently than their GP, and thus, naturopaths are uniquely situated to identify any concerns that might signify a need for further investigation to detect early development of diseases. Referral to the GP is the responsibility of a naturopath in such instances. Naturopaths also play a role in directly addressing early risk factors for more severe disease, such as high blood pressure, chronic inflammation or blood sugar dysregulation.

Lastly, there is tertiary prevention, which can be defined as actions taken to reduce the negative effects of disease or treatments or minimise reduced function from established disease. For patients with severe chronic or terminal illnesses, this can be an important role of the naturopath, to assist in support of a higher quality of life, a subjective sense of greater wellbeing, palliating of side effects of high force medications, or assisting healing from surgery. In conventional healthcare, tertiary prevention falls primarily into the realm of palliative care, though heroic conventional treatments quite often prevent a

disease or injury from having more profound impacts on structures or functions of the body.

At the beginning of this section on prevention, the point was made that all the other five principles also apply in a preventive care context. Now, coming full circle, we will close this discussion of the six principles of naturopathic medicine by noting that the opposite is also true: the concept of prevention is also built into all the other five principles. A naturopath's support of the *Vis Medicatrix Naturae* is naturally preventive, as it assists in maintaining a high level of vitality, which supports health generally. A naturopath's recommendation of the least invasive treatment methods under the principle of First Do No Harm will focus on foundational health behaviours first, which are naturally preventive as well as being curative. Recommendations aimed at the cause of an illness will help to prevent recurrence by making the patient aware of the causes of disease and how to avoid them. Treating the whole person will serve to give the naturopath a view over all parts of a person, even those that are not at present dysfunctional, allowing treatment recommendations that support the wellness of the whole both curatively and preventively. And finally, it would be hard to conceptualise a naturopath as teacher separate from the concept of prevention, as naturopaths empower and motivate their patients to a state of wellness through these two concepts hand-in-hand.

People are beginning to realize that it is cheaper and more advantageous to prevent disease, rather than to cure it.

Dr Henry Lindlahr, Nature Cure^[16]

NATUROPATHIC CLINICAL THEORY: CONCEPTUAL FRAMEWORKS

While the six principles discussed in the preceding section provide the main philosophical foundation that guides the naturopathic approach, clinical practice requires further conceptual frameworks that guide how a naturopath views disease and healing processes, how a naturopath approaches development of a treatment strategy for each patient, and what the specific components are of a holistic view of health. These frameworks are discussed below.

The process of disease and healing

The naturopathic view of the process of healing,^[20] as conceptualised and defined by Dr Jared Zeff, is represented in Fig. 1.3.

Beginning at the top of this schematic, the naturopathic perspective of the process by which acute illness ('reaction') occurs is shown as: a person begins in a state of normal health, then disturbing factors are introduced which cause a disturbance of function, then the disturbance of function causes a reaction — an acute illness. Disturbing factors are discussed further in the

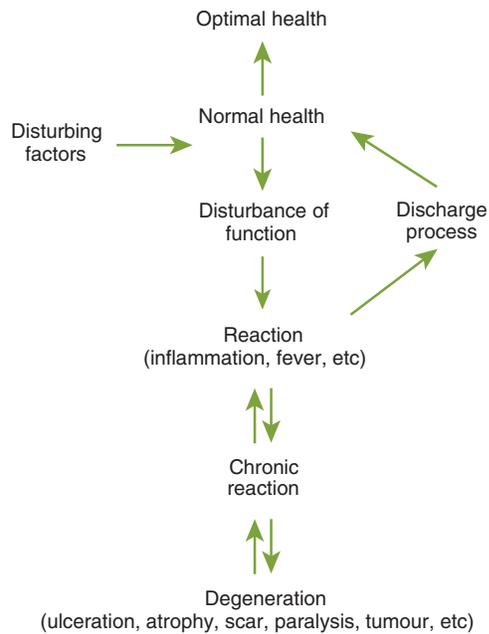


FIGURE 1.3 The process of healing

Zeff JL, Snider P, Myers SP et al. A hierarchy of healing: the therapeutic order. In Pizzorno JE, Murray MT, editors. Textbook of natural medicine. 4th edn. St Louis: Elsevier; 2013.

section below on the therapeutic order. However, a few examples to consider would be inappropriate diet, overworking/stress or excessive alcohol or caffeine intake. These speak to the concept of setting up the 'terrain' for illness, discussed earlier in this chapter.

Setting aside for now the possibility of more severe or damaging acute illnesses or injuries, when the acute reaction is not suppressed and the process is allowed to run its course, the disturbing factors are removed. Then the person has a high enough level of vitality and the acute reaction guided by the *Vis Medicatrix Naturae* will result in the body going through a discharge process, which returns the body to normal health. This is represented in the schematic by the arrows moving upwards to the right from the reaction stage back towards the top and normal health. Note that a person does not travel in reverse from the reaction stage to normal health without going through the discharge process. A discharge can come in many forms, from those that we are familiar with in acute illness such as a runny nose, coughing, sneezing, vomiting or diarrhoea, to those that might be less easily recognised as a discharge, such as sweating, skin rashes, odours, crying or other emotional outbursts.

This will obviously not be an appropriate approach for all acute conditions. Acute conditions are generally those that are self-resolving within a relatively short period, and they have an inflammatory component. But this is a broad spectrum of illness or injury, from the common cold, minor skin infection or low-grade gastrointestinal virus to severe bleeding or life-threatening illnesses such as appendicitis, severe asthma or meningitis. The self-resolving nature of an acute illness must be recognised

as either return to health in a relatively short time, or potentially death if appropriate intervention is not applied. One of the tasks of the naturopath is to make a judgment in the case of acute illness as to whether a higher force intervention is needed to preserve life or prevent major damage to the organism and to refer appropriately and in a timely manner. But in the event of an acute illness that can safely be left to run its course, supported by advice to remove any disturbing factors and to rest to conserve the vitality, this will allow the reaction to proceed through all of the stages of inflammation to the discharge process and result in a return to health.

We return to the process of healing schematic in Fig. 1.3. Consider what occurs when there is suppression of the acute reaction: the continuation of disturbing factors, which creates a cumulative burden on the body and/or a lowered state of vitality that prevents a sufficient discharge process, will drive the human organism into a state of chronic reaction.^[20] In contrast to an acute reaction, which is generally brief and self-resolving, a chronic disease/reaction is of longer duration and, by its nature, generally does not self-resolve as long as the factors that led to the chronic reaction remain in place. If the chronic reaction is of a great enough severity or long enough duration, it can then result in a degenerative state, including structural changes to the body that may ultimately be irreversible.

A chronic reaction, or disease state, is viewed as reversible within this framework, with the approach being to remove the disturbing factors that are placing a continuing burden on the body, stimulate the *Vis Medicatrix Naturae* to support self-healing, and avoid suppression of any resultant discharge process, within the bounds of safety for the patient in that process. More specific discussion of how this is done in the context of patient treatment can be found in the section on the therapeutic order, below. This general approach supports the patient in moving from the chronic reaction state back to a state of acute reaction, from which the discharge process can proceed, resulting in return to health. However, depending on the patient and their condition, multiple iterations of this process can be necessary to fully regain normal health, with each iteration of discharge moving the patient closer to that state.

The process whereby a patient moves from a chronic reaction and devitalised state to an acute reaction and discharge is often referred to as a 'healing crisis', though the term 'healing reaction' is more apt. According to Lindlahr, '[a] healing crisis is an acute reaction, resulting from the ascendancy of Nature's healing forces over disease conditions.'^[16] The primary thing to note with regard to a true healing reaction is that it is an expression of the action of the *Vis Medicatrix Naturae* in the body's attempt to return itself to normal health. In that sense, it is the same as a discharge process in any acute illness. A healing reaction is usually short-lived and self-limiting and generally, while the patient may feel acutely worse in some symptoms, they will have an overall sense of feeling more well.

When a patient experiences an increase in symptoms during treatment, it is the task of the naturopath to discern

whether it is a healing reaction or an actual increase of symptoms due to a worsening underlying condition. An examination of the pattern of the acute reaction within the overall history of the patient's case will often elucidate the difference. And naturopaths are assisted by Hering's rules of cure in this differentiating process. Hering's rules state that healing, that is resolution of symptoms and/or pathology, will generally occur from the top of the body downwards, from the deeper, more vital organs to the more superficial or less vital organs, from the centre to the periphery (i.e. core to extremities), and from the most recent to the oldest, with reference to the original occurrence of a symptom or pathology.^[27] An examination of the patient's symptoms during an acute reaction often reveals these patterns, indicating a movement towards return to health and, if these patterns are not seen in the patient's symptom picture, it can indicate that the healing process is not moving in the right direction or the disease state is actually moving deeper.

In the process of the healing reaction, the symptoms of the reaction, as an expression of the *Vis Medicatrix Naturae*, must not be suppressed except in cases where it is necessary for the safety of the patient, and in that event, as minimal a level of suppression as possible. A suppression during the process of a healing reaction will stop the healing process and reverse it, driving the chronic reaction back to a deeper state.

The therapeutic order

The therapeutic order is a natural hierarchy of therapeutic intervention, based on or dictated by observations of the nature of the healing process, from ancient times through the present.^[20]

The therapeutic order, presented in Fig. 1.4, represents the framework within which a naturopath works to develop

1. Establish the conditions for health
 - Identify and remove disturbing factors
 - Institute a more healthful regimen
2. Stimulate the healing power of nature (*Vis Medicatrix Naturae*); the self-healing processes
3. Address weakened or damaged systems or organs
4. Correct structural integrity
5. Address pathology: use specific natural substances, modalities or interventions
6. Address pathology: use specific pharmacological or synthetic substances
7. Suppress or surgically remove pathology

FIGURE 1.4 The therapeutic order: hierarchy of healing

Zeff JL, Snider P, Myers SP et al. A hierarchy of healing: the therapeutic order. In Pizzorno JE, Murray MT, editors. *Textbook of natural medicine*. 4th edn. St Louis: Elsevier; 2013.

specific treatment recommendations for individual patients. It is deeply interwoven with the six principles and with the process of healing. The therapeutic order 'operationalises' the general philosophy that crosses all six principles to use the lowest force interventions possible to both support the natural work of the *Vis Medicatrix Naturae* and avoid harm to the patient. This first addresses the cause(s) of illness, and does so in a holistic manner with regard to all aspects of the body, mind and spirit of the patient, allowing the patient to learn through the therapeutic process how to heal and maintain their own health.

The therapeutic order itself can be viewed through different lenses. It can be very helpful when first learning to work with this framework to view each level discretely — to compartmentalise the types of interventions or therapies that can fall at each level and to view the levels in a step-wise manner to maximise understanding of the underlying philosophy. However, an experienced practitioner mind can view the framework through a more complex lens, with an understanding that each level of the order will tend to be iterative of the level(s) above it, and that compartmentalisation of certain treatments at a given level can be an over-simplification. For example, if a practitioner prescribes a herb to support liver function in a patient with an overload of toxins or signs of liver compromise, one view of this is to put that therapy at level 3 of the therapeutic order, as tonifying a weakened system. However, it can also be argued that a well-functioning liver is essential to vitality, and so strengthening it is perhaps also falling at level 2, as stimulating the *Vis Medicatrix Naturae* (an argument that is even more compelling if the energetic aspects of the herbs are taken into consideration). For the purposes of this chapter, we will adopt the more compartmentalised view in order to establish firmly an understanding of the general tenor of each level of the order.

LEVEL 1: ESTABLISH THE CONDITIONS FOR HEALTH

The therapeutic order starts with the lowest force interventions that naturopaths can recommend — those that are at the heart of a person's daily lifestyle, diet and habits. The first level of the order establishes this as a two-pronged approach: to identify and remove disturbing factors and to institute a more healthful regimen. This level provides a direct connection to the process of healing, where we see that disturbing factors are the causative force that pushes the organism into a state of reaction. We have discussed the removal of those disturbing factors as a vital component of the healing process — this is treating the cause. Another term that can be used to describe disturbing factors is 'obstacles to cure'. The terms are relatively synonymous, but the difference in description can provide insight to a naturopath who is working to discern the patient's needs at this level of the therapeutic order. A disturbing factor might be readily identifiable as an active force in a person's life, whereas an obstacle to cure might look more like a blockage. In practice, these often turn out to be the same things — the things causing

illness are the same things that are getting in the way of a return to health.

If the first prong is viewed as ‘non-healthful things to be removed’, then the second prong, instituting a more healthful regimen, can be viewed as ‘healthful things to be added’ to a patient’s way of life. Again, at this first level, the naturopath is focused on the lowest force interventions, which generally will consist of behavioural or dietary changes on the part of the patient. The guidance for the many different areas of life and habit that might be addressed in a holistic manner at this level is provided by the determinants of health, which are discussed in the final section below.

Even though this first level of the order contains the lowest force interventions, it is important to note that, depending upon the patient’s overall condition, state of vitality or toxicity, and specific pathological conditions, the safety of the patient must always be taken into consideration with any treatment recommendation in order to avoid harm. For example, advising a patient with pronounced kidney dysfunction to change their water intake, or advising a patient with insulin-controlled diabetes mellitus to alter their dietary patterns, must be done cautiously and with close attention to the potential negative outcomes of these recommendations, which would be safe in other types of patients.

LEVEL 2: STIMULATE THE VIS MEDICATRIX NATURAE

When using the lowest force interventions at the first level of the therapeutic order, the naturopath is partnering with the patient to give the *Vis Medicatrix Naturae* what it needs to bring the person back to normal health and to remove things that are getting in the way of it doing its job. But in that first level we are relying on the patient’s vitality in its current state to drive the process of healing. Some patients can be helped at the first level alone, but many patients, especially those with chronic illnesses, have a lowered vitality and need additional intervention.

At the second level of the therapeutic order, the naturopath is providing a slightly higher level of intervention, while still relying on the patient’s innate healing capacity. This acknowledges that the patient’s current state of vitality may need support or stimulation in order for the first-level interventions to return the patient to health. At the second level, the *Vis Medicatrix Naturae* is stimulated in order to increase the effectiveness or strength of the patient’s innate healing processes.

There are several ways that this can be accomplished, and the particular intervention chosen for an individual patient will depend on the condition of the patient, their level of vitality and their choices as to what to pursue. Perhaps the simplest ways to stimulate the *Vis Medicatrix Naturae* are by exposure to the natural elements: fresh air, sunshine, time spent in nature, honouring of the rhythms of nature in daily life, and the therapeutic use of water are some examples. With hydrotherapy being one of the core

therapeutic modalities of traditional naturopathy, the modern body of knowledge on the therapeutic use of water is vast, can be applied in a highly individualised way and is perhaps underappreciated in modern naturopathic practice.

Other methods for increasing vitality and stimulating the *Vis Medicatrix Naturae* are modalities that we might call ‘energetic’ in nature, such as breath work or gentle body movement, ingestibles such as homeopathy or flower essences, and acupuncture or other related therapies that move or unblock the flow of energy. The latter of these are considered to be stimulations that are more specific because they tend to be administered according to the particular presentation of the patient. However, their effects nonetheless result in a stimulation of the vital force.

LEVEL 3: ADDRESS WEAKENED SYSTEMS

If interventions or treatments applied at the first two levels of the therapeutic order are insufficient to start the patient on the path towards healing and support them in continuing to move in that direction, then naturopaths move on to the third level, the next higher level of force in treatment. This is often the case in longer-standing chronic reactions or in cases of more severely lowered vitality, in which organs can be compromised, blocked or congested from long-term stresses. Naturopaths select treatments at this level based upon the particular systems in each patient that are showing signs of decreased or compromised function. Naturopaths often tend to gravitate to looking first at the digestive and detoxification systems, as these systems are considered the foundation of health as discussed earlier in this chapter. However, beyond this, the nervous, endocrine, cardiovascular, respiratory, genitourinary, musculoskeletal and integumentary systems must be considered, as well as placing some focus on systems within systems, such as the menses within the endocrine system.

This level will tend to include natural therapies that are ingestible and are providing specific support to an organ or a system. Many, but not all, clinical nutrients (referring to nutraceuticals rather than nutrition via food) and herbal medicines used nutritively or to stimulate or support particular biochemical pathways or cellular systems fall at this level. It is also at this level where there begins to be cross-over between naturopathic medicine and functional medicine, with specific testing being conducted to look at biomarkers of system or organ function prior to prescribing treatments aimed to stimulate or support specific biochemical or physiological processes. This implies a reduced deference to the *Vis Medicatrix Naturae* — it is a movement into the realm of being slightly more forceful, of isolating and encouraging certain functions in the body rather than allowing the body to return to balance on its own design. However, when systems or organs have been overloaded or compromised for some time, this level of treatment has great utility, and it is still working *with* constructive natural processes rather than *against* pathological processes, as will be seen in the fifth level, below.

LEVEL 4: CORRECT STRUCTURAL INTEGRITY

Structure and function are closely intertwined. If a structure is compromised, for example blood flow or nerve conduction is impeded to an organ, then the function of that organ will be changed — weakened, irritated/inflamed, stagnated. Sometimes a structural change precedes a functional change, as in an injury that causes some skeletal misalignment or scar tissue formation, and sometimes functional change can precede structural problems, as in chronic inflammation that causes muscles to place asymmetrical stresses on the skeleton, nerves and blood vessels.

Naturopathic manual therapies can be used to address some structural issues. If a functional change caused the structural problem, then the underlying functional problem must also be addressed at the preceding levels of the therapeutic order, or the structural therapy will likely have only short-lived effect. If a structural problem was created by a forceful trauma to the body or postural habits, then the treatment may be more straightforward. Along with manual therapy by the naturopath, often chiropractic, osteopathy, specialised forms of massage, exercise prescriptions, or physiotherapy can be great adjunctive therapies when addressing structural integrity. Naturopathy has a long history of being intertwined with chiropractic and osteopathy, and many early naturopaths were also trained in these medical systems.

LEVEL 5: ADDRESS PATHOLOGY WITH NATURAL INTERVENTIONS

In the first four levels of the therapeutic order, the specific nature of the pathology is not directly considered in relation to the Western pathological diagnosis — the naming of the disease in those terms — except as it is relevant to ensuring the safety of the patient and avoidance of harm. Instead, the person as a whole has been considered, as well as their lifestyle and environment, along with identifying what organ systems or structures might be under-functioning or compromised. At the fifth level of the therapeutic order, the naturopath turns to look directly at the identified pathology and pathophysiology. Most patients will improve and move towards the direction of healing when the first three to four levels of the therapeutic order are applied. But in some cases, it is necessary to move to a higher level of force in our interventions.

At the fifth level, the naturopath is using natural interventions from the same point of view as a medical doctor uses synthetic pharmacological agents. Hence, this level of the therapeutic order is often referred to as ‘green allopathy’. At this level, the natural intervention is being used to directly address — that is, counteract — the pathogenesis or the signs and symptomatology of the disease. For example, in a case of type 2 diabetes mellitus, herbs or nutrients used to target lowering elevated blood sugar or increasing insulin sensitivity of cells directly, or in a case of an inflammatory disease, herbs or nutrients used with a directly anti-inflammatory action. As the second of these examples indicates, treatments at this level can be suppressive, and this is one of the key reasons why this

level is considered to contain higher force interventions. But in addition this level is where the naturopath turns from working with the organism to working against the disease, taking the naturopath a step away from the foundational philosophies.

LEVELS 6 AND 7: CONSIDER PHARMACOLOGICAL DRUGS AND SURGERY

The inclusion of these levels within the therapeutic order is critical in order to acknowledge both the full range of treatments that are available in any given case and the ultimate necessity of these high force interventions in some cases. Because these two levels of therapeutics are beyond the scope of a naturopath’s practice in Australia and most of the world, they will not be discussed in any detail here. However, again, it is incumbent upon a naturopath to use their training and experience to assess risk correctly for all patients and to make appropriate referrals to the GP, specialist or emergency department when these levels of treatment are indicated. Conversely, use of suppressive therapies when it is not necessary will pose an obstacle to the process of healing and can ultimately prevent a cure.

The determinants of health

In considering disturbing factors in the process of healing, or what constitutes ‘establishing the conditions for health’ at the first level of the therapeutic order, the naturopath is guided by a final framework, the determinants of health. Within this framework, there are three major categories: inborn traits, disturbances and lifestyle factors.^[15,20]

Inborn traits include a person’s genetic make-up; maternal diet, lifestyle, emotional state, general health and toxic exposures; and the individual’s constitution.^[15,20] Historically, naturopaths and other practitioners alike might have considered that most of these would be beyond the reach of any type of therapy to influence after birth. However, the growing field of epigenetics and the concept of neuroplasticity are demonstrating that our environment, stressors, emotional state and many other factors will influence which of our genes are being expressed at any given time and how our nervous system might adapt to overcome innate traits. It is possible that changes in lifestyle, diet, energetics, emotions and psychological and mental patterning can influence the impact that genes or other inborn traits have on who a person ultimately becomes. Likewise, with a person’s constitution, it will always be what it is — it does not change — but the particular expression and robustness of our constitution can be influenced with constitutional remedies/therapies and positive lifestyle choices.

The second major category is disturbances, or disturbing factors, which connects directly to the process of healing and the first level of the therapeutic order. Disturbances can be events that have happened in the past that have left a longer-term lack of wellness in the body, such as past illnesses (particularly chronic or recurrent ones), injuries, medical interventions, traumas or toxic exposures. They can also be current disturbances which

Spiritual life	Digestion, toxæmia
Fresh air	Rest
Exposure to nature	Sleep
Clean water	Exercise
Natural light	Socioeconomic factors
Loving and being loved	Culture and community
Diet, nutrition	Meaningful work
Unadulterated food	

FIGURE 1.5 Determinants of health: behavioural, environmental and other life factors

Zeffer J, Snider P. Course syllabus: NM5131, Naturopathic clinical theory. Seattle: Bastyr University; 1997–2005. Used with permission of Jared Zeffer.

consist of any aspect of the person's current life that is pushing the body, mind, emotions or spirit towards reaction or towards maintaining a state of chronic reaction.^[15,20] As with the first category, there may be factors here that are beyond treatment; for example, if a patient has had an organ removed. In development of treatment recommendations, the naturopath and patient work in partnership to identify these past and present disturbances, remove them where possible from present life conditions, and work retrospectively on any lingering effects from past disturbances that were not fully resolved, which can be on the physical, mental, emotional or spiritual levels. On this last point, it is important to look at whether and how past illnesses or symptoms may have been suppressed for a view into what may arise to be healed as the treatment process continues.

The third major category covers lifestyle factors across a holistic array of considerations that include socioeconomic, relational, environmental and other factors outside the realm of the individual patient.^[15,20] Fig. 1.5 features a list of some of these determinants of health, though it is not exhaustive. The principle of treat the whole person is perhaps seen most in operation in this list of factors that contribute to human health, and the second prong of level 1 of the therapeutic order is represented here. Instituting a more healthful regimen, viewed holistically, will seek to address what can be addressed across all these factors, while acknowledging that the naturopath, and indeed the patient, can often have only minimal, if any, influence in some of these areas.

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