

Why are so many doctors resistant to change?

A recent article in the British Medical Journal by Frank Davidoff (2002; 324: 623-624) explores the effect of shame in the health professions. I believe that shame is one of the major factors preventing the greater acceptance of homeopathy in the world today.

In the 1960's, a large randomized controlled study by the University Group Diabetes Program showed that tolbutamide (a blood sugar lowering agent), was associated with a significant increase in mortality in patients who developed myocardial infarction. One might expect that the medical profession would respond with gratitude when informed of a way to improve patient safety. Instead, this report was met with skepticism, outrage and even legal proceedings against the investigators; the controversy went on for years.

Homeopaths are familiar with this type of response. Despite growing evidence of its efficacy, homeopathy is still not well accepted in conventional medical circles. Quality research in homeopathy has often been met with skepticism and doubt. The persecution of French researcher Jacques Beneviste is perhaps the best-known example of this.

A clue to understanding this persecution and resistance came at the annual meeting of the American Diabetes Association soon after the tolbutamide research was published. A practitioner admitted at the meeting that he simply could not – and would not – accept the findings, because revealing to his patients that he had been using an unsafe treatment would shame him in their eyes. Echoes of this fear of shame are ubiquitous among efforts to change medical practice.

What is shame? Shame is a basic human emotion that comes closest to the concept of “mortification” found in our homeopathic repertories. It also is directly related to embarrassment, humiliation, chagrin and guilt which all represent an insult or injury to the ego. Shame is the deepest of all these concepts, because it penetrates to the core of what it is to be human. Studies have indicated that shame often has strong influences on motivating our behavior, particularly moral behavior. Shame can cause us to feel feeling inferior, degraded and exposed. Our behavioral response is typically avoidance and silence.

Being a patient can result in feelings of shame. The psychiatrist Aaron Lazare wrote a paper in 1987 describing how patients often feel

shame about their illness, seeing their disease as a defect, inadequacy or shortcoming. Visits to allopathic doctors can often produce shame because the individual feels physically and psychologically exposed.

Physicians themselves are particularly vulnerable to shame. Studies have shown that the extreme distress of physicians who are sued for malpractice is attributable to shame. One trait that many physicians share is perfectionism. This trait is often necessary to survive the rigors of medical training but its dark side is the inability to accept and handle failure, with the accompanying feelings of shame. The medical system often uses shame as a punishment for medical students when they make errors during their training. For these reasons many doctors have an extreme sensitivity to shame.

What are the keys to dealing with this problem of shame in health care? The first is the recognition of the universality of shame as a fundamental human emotion and a powerful force in slowing change. This dark side of human growth and improvement must be brought to light.

The second is confronting and dealing with shame as it arises in ourselves, in our work and in our communities. From this perspective, shame can be seen as an “obstacle to cure” in the health professions.

Lastly, we must embrace the antidote to shame – wonder. Socrates once said that “It is the state of wonder that creates the human desire to learn”. Wonder is an attitude that we hold within ourselves. It is more than curiosity or pondering. Curiosity and pondering come from an openness of the mind. Wonder comes from an openness of the mind, heart, imagination and spirit. It keeps us asking the questions that we should be asking, not merely taking what one learns on faith. Wonder is the most important attitude that homeopaths carry in their work. Samuel Hahnemann, the founder of homeopathy, was a powerful example of wonder. He had the courage to be open, experiment and constantly try new things. Wondering is a central quality that defines homeopathy. It traditionally has separated homeopaths from allopathic medical practitioners. This bridge needs to be crossed before homeopathy can reach greater acceptance and find its rightful place in the world.

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