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Editorial 2

Diagnose and Dispense vs. Envision and Empower – Integrating Yang and Yin in Health Care

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There is a common misperception that the term integrative medicine simply means combining complementary and alternative medical (CAM) therapies with conventional care. Why is that perception incorrect? It is incomplete. Integrative health care not only uses a wide variety of therapies, it also embraces a different, more holistic and humanistic world view.

The prime directive of most conventional care is “diagnose and dispense.” Before deciding on a therapeutic intervention in the conventional model, one must ascertain an accurate diagnosis. Many algorithms and clinical guidelines are built on the diagnose/dispense framework. This framework often starts by narrowing a patient's rich experience into a narrow “chief complaint”, thereby limiting the focus of the medical encounter, and transforming the patient from a decision-making partner into a whiner whose complaints must be managed. If a patient has multiple problems, the tendency is to manage them separately, using separate guidelines for each (few guidelines incorporate the complexity of patients with multiple simultaneous diagnoses). There is a vast, specific vocabulary for discussing diagnoses, embodied in the ever-growing International Classification of Diseases, ICD (now version 10). Many billing systems (and therefore financial management and incentive systems) are based on the ICD codes. Thus, the “diagnose and dispense” model has a strong hold on medical sector economic policies that affect how care is delivered.

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