

# Your Health

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## GOVERNMENT CHECK-UP BCNA HOSTS "MLA WELLNESS DAY" AT PARLIAMENT

Gauging the health of our elected officials with proactive and preventive medical tests—that was the theme of the BCNA's first annual MLA Health & Wellness Day.

On October 28, in Victoria, the BCNA invited all MLAs as well as their legislative assistants to drop by the Grand Pacific Hotel for medical tests and to learn about naturopathic medicine. [See Joy MacPhail's comments from Hansard, p. 2]

Although naturopathic medicine has been a licensed health profession in BC since 1921, many elected officials still don't know who NDs are or what they do. The BCNA hopes to change that not only through ministerial consultations but by offering all politicians an opportunity to meet NDs in person, to see what NDs do in their clinics, and to get simple, effective, cost-effective health advice.

On offer in October were several diagnostic tests. These included:

**CardioVision**, a test using blood pressure as a gauge of arterial stiffness/flexibility. CardioVision assists ND in identifying those patients who are at significant risk for cardiovascular disease;

**DEXA Bone Density Testing:** DEXA scanning is the safest and most accurate method to measure bone mineral density, an overall measure of

how much calcium there is in the bones. DEXA is an integral tool in detecting and diagnosing osteoporosis;

**Darkfield Microscopy:** Also known as Live Blood Analysis, Darkfield is a way of studying live whole blood cells under a specially adapted microscope that projects the dynamic image onto a video screen. Digestive, eliminative and immune functions can be assessed as well as the presence of bacteria and other micro-organisms;

**Heart Rate Variability Assessment (HRVA):** This non-invasive test is a useful diagnostic tool for measuring the state, tone and balance of the autonomic (involuntary) nervous system (ANS). The length of time between consecutive heartbeats is regulated by the ANS and is changed by many factors such as pH, temperature, stress, hormones, etc. The body always strives to achieve balance or homeostasis. Thus, the amount of variability of the heart rate may indicate either challenges to homeostasis (balance) and/or the ability of the body to react to these challenges. One's overall degree of physical fitness, emotional state and nervous system health can be determined by this test;

**ABO Blood Typing:** Naturopathic physician Peter D'Adamo has written widely about health and diet as linked to blood type (e.g., *Eat Right 4 Your*

*Type and Live Right 4 Your Type*). Knowing your blood type—and following your blood type diet and lifestyle recommendations—can help you lose weight, increase your energy, prevent disease and improve overall wellness.

The BCNA's MLA Health & Wellness Day was a huge success. Over a third of all MLAs, including several ministers, plus many legislative assistants came by for testing, information, healthy snacks, and to find out more about the profession.

If you're interested in any of the tests mentioned here, contact the BCNA for information on an ND near you.

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J. MacPhail [Excerpted from Hansard, October 28, 2003]: Today I want to celebrate the practice of naturopathy and urge all British Columbians to embrace this wonderful science-based health care delivery system. Naturopathy, of course, is a practice of medicine that promotes health wellness and illness prevention, and that perhaps makes it apart from the other practices of medicine in this province. It's not to pit one practice of medicine against the other but to embrace all practices of medicine that are science-based and accessible so that British Columbians can continue on the path of increased health year after year. Naturopaths, of course, are medically trained for years and years and often are MDs with a specialty in naturopathy. Many of us had the opportunity today to get tested by the naturopaths, and the results were interesting, to say the least. What we do know is that in our health care system, when there is so much pressure on services and when access is an issue, it makes sense for British Columbia to embrace the practice of naturopathy so that people can have health care where they need it, when they need it... *I must say, though, that with the tests that were done on all of us today, there's probably some bad news for the B.C. Liberal government, and I'm sorry I have to bring that bad news to them. It turns out that in all of my tests, I'm extremely healthy, and I'm going to be around for a long, long time.* [Applause.]

A10 Sunday, August 10, 2003-The Morning Star

## Naturopaths defend rights

BY LEANNE RITCHIE

Morning Star Writer

Naturopathic doctors (NDs) are concerned the Liberal government may ax a patient's right to choose.

Dr. Ray Lendvai, ND at the Vital Path Health Care Centre in Vernon, said the government is considering changes to NDs' scope of practice.

The recommendations would limit an ND's ability to conduct physical exams, impose limits to allergy testing, limit manipulation therapies, limit administering local anesthetic and limit access to many pharmacy items even though most items requested have been traditional component of naturopathic practice for decades.

"It would be like trying to practice medicine without all the full tools," said Dr. Lendvai.

There are about 200 licensed practicing NDs in B.C. and each year, British Columbians make several 100,000 visits. About 10 per cent of the population is estimated to visit an ND on a regular basis.

"People have a legitimate right to access safe and effective health care from naturopathic physicians," said Dr. Lendvai.

The proposed changes come from a process which began in 1995. The government of the day decided to modernize the health care acts and create a new model for regulating health professions. At the same time, they gave each of the medical professions the opportunity to comment on one another.

The Liberal government is anticipated to make a decision on the proposed changes in January. Dr. Lendvai is encouraging the public to sign a petition at Vital Path against the changes and write their MLA.

NDs see patients with all types of ailments, he said.

"We study the same medicine as medical doctors but our method of



Dr. Ray Lendvai of the Vital Path Health Care Centre in Vernon holds up a petition for the public opposing legislative changes which would limit the scope of practice for naturopathic doctors.

MORNING STAR PHOTO BY LEANNE RITCHIE

treatment is different," he said. "We treat the whole person. We don't just focus on removing the symptom."

"We want to make sure there is the preventative health care aspect available," he said.

The profession has a track record of safely treating patients, said Dr. Lendvai. Despite being around in B.C. since 1921, there have been no serious injuries or fatalities of anyone as a result of taking a naturopathic treatment.

Dr. Lendvai said many of his patients have tried all the medical drugs available for their condition but were unable to handle the side effects.

"For some of them there's no other option," he said. "Our patients' are concerned. They are wondering what's going to be available."

He added NDs are taking the strain off the medical system by providing an alternative. Vernon in particular suffers from a shortage of medical doctors accepting new patients.

Despite the changes to MSP last January which reduced provincial coverage for NDs, Dr. Lendvai said people are still coming in for treatment.

"People still come and pay out of their own pocket even after they paid their taxes that are supposed to pay for health care," he said.

However, if the changes go through, they may not have that choice, he said.

Talks with the government are still on-going and Dr. Lendvai is hopeful.

He has invited MLA Tom Christensen and MP Darrel Stinson to visit Vital Path and learn more about the profession.

Millions of individuals develop the flu each year and only experience mild symptoms. There is a two day incubation period before symptoms of fever, cough, chills, sore throat, body aches, fatigue or headaches appear. Influenza virus spreads through coughing and sneezing, direct contact with contaminated surfaces and objects or unwashed hands. Flu symptoms usually subside after two to three days and disappear within a week. Once an individual has had the flu, their body will have produced antibodies that protect them from the same strain of virus for a prolonged period of time. Complications from influenza infection are very rare and may occur in individuals with an underlying medical condition, those greater than 65 years of age, and young children that have a predisposition to respiratory infections. Pneumonia is the primary complication of influenza and can result in hospitalization or death in those that are at extremely high risk for complications.

**INFORMATION ON THE FLU VACCINATION**

The "flu" vaccination, more correctly termed the influenza vaccination, is a vaccine against specific strains of the influenza virus. There are over 500 different viruses that can cause flu-like symptoms. The vaccine is formulated from the three most common strains seen in the previous year. The influenza virus is constantly changing. A flu vaccine is only effective against the same strain of influenza virus used to develop the vaccine. It takes about two weeks after the flu shot to develop sufficiently high levels of antibodies to protect you from the influenza virus. These antibodies start to lose their effectiveness within a few months. According to Health Canada, the influenza vaccination is recommended

*Review the following information to become better prepared to determine if flu vaccination is the best option for you or family members.*

for individuals at high risk for developing serious complications if they were to contract the influenza virus. High risk groups include all people aged 65 years or older, people with serious long-term health problems, diabetes, cancer, kidney disease, immunosuppressive disorders, children on long-term treatment with acetylsalicylic acid (ASA), as well as health-care workers, residents / workers / volunteers of nursing homes, chronic-care facilities and retirement homes and women who will be more than three months pregnant during the influenza season.

The research from Health Canada suggests that the flu vaccine that closely matches the current seasonal influenza strains temporarily prevents the flu in healthy persons less than 65 years old about 70% of the time. For individuals over 65 years of age the efficacy rate of the flu vaccine is reported to be less than 30%. 75% of individuals have prolonged (up to 2 days) soreness at the site of the injection. Children are at the greatest risk of side effects including: fever, body aches, allergic reactions and potentially a severe paralytic illness. There is a rare risk of allergic reaction in individuals with an allergy to eggs. Warning signs include: breathing difficulties, hoarseness, wheezing, hives, paleness, pronounced weakness, rapid heartbeat, or dizziness.

According to the manufacturer of the vaccines, the flu vaccination should *not* be given to persons with an acute respiratory infection or with any other active infection or serious febrile (fever) illness. Vaccination is also not recommended for individuals who develop anaphylactic type reactions (hives, swelling of the mouth and throat, difficulty breathing, hypotension and shock) when they eat eggs. Immunization should be avoided in patients with an active neurological disorder until they are stabilized. The normal immune response following influenza vaccination may not develop properly in individuals undergoing immunosuppressive therapy. This includes those taking high doses of systemic steroids. Thimerosal, a mercury containing compound, is commonly used as a preservative in flu vaccines. There is a mild risk of a paralytic disorder called Guillain-Barre Syndrome.

**POINTS TO CONSIDER BEFORE MAKING A DECISION ON FLU PREVENTION**

If you already have had the influenza virus this year, your body will have developed antibodies to the influenza virus. Antibodies, developed by the body, when one has actually had the flu are more robust than antibodies from the flu vaccine and will protect one for a longer time.

The selection of the influenza strains that make up the vaccine is a hypothesis or guess. There is no way of knowing what strains will be the most prevalent in any given season.

The flu vaccine only promotes temporary (about 2 months) immunity to the viral strains or closely related viral strains contained in the vaccine.

Continued next page

## Dr. Bennett, Continued from page 3

The only way to acquire natural and long term immunity to a strain of the influenza virus is to recover naturally from the flu.

The process that is used to destroy the viruses and create the vaccines often uses formaldehyde, heavy metals (mercury) and chemicals. There are concerns and need for more extensive research about the effect that these substances have on the human body and the lack of long term safety associated with their use, especially with the potential for increased risks that yearly vaccinations might entail.

Vaccinations prevent the body from naturally responding to external pathogens like viruses and bacteria. Individuals who regularly maintain a strong healthy immune system will protect themselves from any adverse effects of the flu, will build permanent immunity and will decrease the potential for developing unknown side effects from long term exposure to vaccinations.

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### DO I NEED A FLU SHOT?

The flu vaccination was developed by the allopathic health care system to decrease the risk of contracting the influenza virus. However, the best way of preventing any flu or complications from any flu is through prevention. The main focus of prevention needs to be on daily healthy habits that ensure an optimum immune system and overall health. A strong immune system is the most effective prevention strategy against the flu or any other virus.

### WHAT DO I DO IF I GET SICK?

If after prevention, you still contract the flu, seek naturopathic care for the treatment of flu symptoms. Homeopathy, hydrotherapy and herbal medicine are effective treatments for the infection of influenza virus if used in the **early** stages of the infection.

If you have additional questions or concerns, please discuss these with your naturopathic doctor or other health practitioner.

#### *Epilogue (for technophiles only):*

Technical Details Of The Flu Vaccine: The flu vaccinations used in Canada are manufactured by Shire Biologics and Aventis Pasteur Limited. The vaccines contain: 15 ug haemagglutinin of Strain A/New Calendonia/20/99 (H1N1) & 15 ug haemagglutinin of Strain A/Panama/2007/99/ (H3N2) & 15 ug haemagglutinin of Strain B/Hong Kong/330/2001. Preservatives: 0.01% thimerosal as a preservative, and trace residual amounts of egg proteins, sodium deoxycholate and/or polyethylene glycol p-isoctylphenyl ether (Triton X-100). Note: The vaccine produced by Aventis Pasteur also contains neomycin. The vaccines are created in the following manner. Every year flu viruses around the world are collected. About one year prior to a vaccine being available, three strains of potential viruses are selected based on researchers estimation on the likely strains that will affect a given area. These viruses are cultivated in laboratories using chicken eggs and are then deactivated using formaldehyde and sodium deoxycholate and/or polyethylene glycol p-isoctylphenyl ether (Triton X-100). The vaccines are then packaged. Action and Clinical Pharmacology (as taken from Shire Biologics monograph) ☒The flu vaccine is a split-virion influenza vaccine that promotes an active immunization against influenza. Within seven days after injection of the vaccine there is an increase in circulating antibody to the viral haemagglutination and peripheral blood lymphocytes are primed to respond to in vitro stimulation by vaccine antigens. Intramuscular injection of inactivated vaccine leads to the presence of local IgG antibody in the upper and lower respiratory tract.<sup>1</sup> Cytotoxic T lymphocyte response occurs after administration of either killed or live virus vaccines and is detectable in the absence of demonstrable antibody response. The influenza virus regularly has genetic mutations like antigenic drifts or antigenic shifts. Antigenic shifts that involve abrupt rearrangement in the DNA encoding hemagglutinin or neuroamidase are potentially more harmful than antigenic drifts, involving only single base pair changes. Influenza B viruses only undergo antigenic drift. Antibodies offer some protection against new viral strains emerging from antigenic drifts, but not against viral strains resulting from antigenic shifts. REFERENCES: Aventis Pasteur Limited: [www.aventispasteur.com/canada/products/vaxigrip](http://www.aventispasteur.com/canada/products/vaxigrip) \* Canadian Coalition for Influenza Immunization (CCI) \* Centre for Infectious Disease Prevention and Control (CIDPC) \* Centre for Disease Control: <http://www.cdc.gov/ncidod/diseases/flu/fluvirus.htm> \* Health Canada - It's Your Health - Flu Shots \* [www.hc-sc.gc.ca/pphb-dgspsp/publicat/cig-gci/](http://www.hc-sc.gc.ca/pphb-dgspsp/publicat/cig-gci/) \* Shire Biologics 1-888-382-2246 \* Search for influenza virus research topics using Medline \* Searches for Influenza virus on the web site include: <http://encarta.msm.com/encnet/refpages/refarticle.aspx?refid=761557270> \* <http://www.spotlight.org/01.07.00/Vacc/vacc.html> \* <http://www.sightings.com/health/doctorsflu.htm> \* <http://www.foreverhealthy.net/html/archives/vaccines.html>

Dr. Peter Bennett is a licensed naturopathic physician practicing in Victoria's Saanich Peninsula. Reach him at his clinic at 250/544-4331 or link to his website at [www.peterbennett.com](http://www.peterbennett.com)



Annual physical exams are no longer covered by MSP—or so MDs are claiming. A recent form received at the BCNA from a Victoria clinic states that “The Medical Services Plan does not pay for routine physical examinations on otherwise healthy people and they have made it clear that doctors should not bill MSP for this service.” The fee was stated as \$115. If you're paying for an annual physical, consider seeing an ND instead of an MD: NDs can perform all the regular diagnostic tests, blood pressure, blood sugar, etc., as well as a range of preventive medical tests not commonly offered by MDs.

# INFLUENZA: NATUROPATHIC MEDICAL TREATMENT OPTIONS

Dr. Ingrid Pincott, ND

It's that time of year when people consider their options for fighting off the yearly flu bug. The flu vaccination that is provided by Health Canada is developed using statistics generated by a computer one or two years in advance. It predicts what flu might circulate in any given year and then these viruses are made into a vaccine. Mary, a 43-year-old patient of mine, stated that she did her own in office research at her place of work. She noted that the vaccine seemed to work in 50% of the cases. In those that got the vaccine, 50% still got the flu, and some immediately after the vaccination! The other 50% did not get the flu. As part of her research she found out that they put mercury and formaldehyde in many vaccines, as preservatives, and she didn't want these "unknowns" injected into her. She had come into the office for the yearly homeopathic remedy for the flu.

Dolisos, a homeopathic company in France, develops a yearly homeopathic remedy made from the current flu vaccine. This remedy is diluted and succussed, like all homeopathic remedies are, so they do not actually contain any of the original ingredients but are the energetic imprint of the viruses. In clinical practice we have seen that when these are orally administered weekly for five weeks every fall that the flu can be avoided. In addition to this I recommend monthly doses of influenzinum and thymulin—also homeopathic remedies. When the entire family follows the regime the vicious cycle of kids bringing home bugs from school and then passing it through the entire family is greatly reduced. The cost for this program is minimal and tastes good so the smallest member of the family will take them!

Mary said she was keeping up her regular detoxification programs every fall, winter and spring and finds that her husband will take it with her so it makes it easier to stick to. She was also following my Basic Daily Treatment Guidelines (BDTG) which include recommendations and protocols that I have found over my 18 years of practice to benefit everyone. These include: limit wheat and dairy and emphasize proteins and vegetables rather than starches in the diet; drink 8 glasses of pure water a day; get enough sleep; take good quality calcium, magnesium, B complex and essential fats in the form of flax oil or purified fish oils; have fun and move your body. This takes into consideration that the most common deficiencies in the average North American diet include magnesium and essential fats and the most common food allergies are dairy and wheat. When Mary follows this her sinuses stay clear as the wheat and dairy give her congestion and contribute to more frequent colds and sinus infections. When she detoxifies regularly this clears her intestinal tract and she can't remember the last time she had the flu!

The monthly average cost of the BDTG, the flu prevention program and the detoxification programs is \$86.00. What insurance program do you know that costs you so little for the upkeep of your greatest asset... your health? Consider this the next time you sit down and do your monthly budgeting. Health care in this country is changing and more and more people will see a price tag attached to health services. This will foster more self-responsibility and choice regarding health care services. The other benefit will also be that employees will start to demand extended health insurance that will cover the health care they want including naturopathic medicine, chiropractic, massage, and acupuncture treatments.

Dr. Pincott has been practicing naturopathic medicine since 1985 and is currently practicing in Campbell River. She can be reached at 250/286-3655 or [www.DrPincott.com](http://www.DrPincott.com)



*Public health employees are being forced to take the flu vaccine. Based on government objectives to ensure 80% of health care workers are immunized annually, the provincial health officer Dr. Perry Kendall has asked all facilities to develop a written policy advocating staff influenza immunization. His directive is backed by the Health Employers Association of BC. In short, the directive "forces" staff through a policy which penalizes those who don't get immunized. If staff get immunized, and then get flu, they are entitled to sick time with pay. If staff decline immunization, and then get flu, they are forced to take leave without pay. The exclusion imperative puts enormous pressure on individuals, particularly single parents who cannot afford unpaid leave.*

Source: HEABC correspondence and Ministry of Health Planning documents

# EMPTY OCEANS

When you see a clear cut forest the environmental devastation is clear. As are the remains on land from fire, or any number of natural or human-made catastrophes. But what goes on in the world's oceans remains a visual mystery. What we can't see can't hurt us, right? Not so argue many scientists and researchers in recent reports on the unregulated plunder of ocean life.

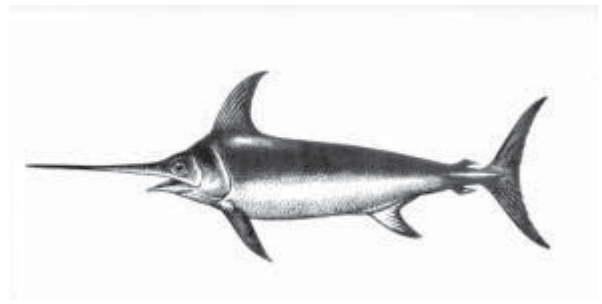
Fish have long been the food of choice for a healthy, protein-rich diet with essential fatty acids. However, decades of huge-scale over-fishing, oceans ravaged by gigantic high-tech trawlers and mega-ships that process hundreds of thousands of pounds of fish at sea, have taken a global toll. Many species are at risk and some food fish are on the verge of extinction. "Industrialized" fishing of predator fish (e.g., tuna, swordfish) has reduced stocks, since 1980 levels, by 80%.

The most insidious aspect of the global "mega" fishing is what's referred to as "bycatch": The 7 million dolphins killed in tuna nets, for example. Shrimp nets, too, take everything in their wake as they drag across the ocean floor—fish, shellfish, crustaceans, etc. Shrimp "bycatch" exceeds the actual shrimp catch. Bycatch is then disposed of.

Demand for fish, coupled with declining stocks, is reflected in the growth of fish farms. Fish farms tripled globally in the 1990s. 25% of food fish is now farmed. But fish farms pollute the seas with antibiotics-ridden, disease-carrying feces. Worse, and what many people don't know, is that fish farms are often self-defeating: Many farmed species are carnivorous, requiring over-fishing of fish-food species.

Food trends have also devastated certain species. The Chilean sea bass was *Bon Appetit* magazine's "2001 Dish of the Year." Boycotted by many restaurants now, the fish is on the brink of extinction and those caught illegally are below 10 pounds—compared with 150 pounds two decades ago.

A 2003 US report showed that only 22% of federally managed fish stocks are fished sustainably. At the same time, coastal development, nutrient runoff, and other pollution sources are hastening the loss of wetlands, estuaries, native aquatic plants, and coral reefs, all of which are vital to nurturing marine species. Meanwhile, those same species are also suffering from problems caused by invasive plants and animals, aquaculture, and climate change.



Broadbill swordfish: The primary target of long-line industrial fishing fleets. Although in maturity they can reach 2,200 lbs., the average swordfish caught today averages only 88 lbs.

The Audubon Society has created a consumer guide for fish consumption, reprinted below:

**AVOID EATING** (Ratings are based on a species being at risk or posing a risk to others)

King, tanner and snow crabs; Atlantic cod; halibut; flounder and sole; bluefin (rare) tuna; wild scallops; haddock; monkfish; snapper; swordfish; marlin; grouper; shark; shrimp; wild and farmed Atlantic and Pacific salmon; orange roughy; Chilean sea bass

**EAT INFREQUENTLY** (Ratings are based on concern about a species, fishing methods or stock management)

bigeye (steaks) and yellowfin (steaks and canned light) and albacore (canned white) tuna; Atlantic and spiny lobsters; mussels; squid; Pacific flounder and sole; farmed rainbow trout

**EAT GUILT FREE** (Ratings are based on these species being abundant and/or well-managed with low bycatch)

wild Alaska salmon; farmed mussels and clams; striped bass; farmed freshwater catfish; crawfish and tilapia; Pacific cod; cat mahi-mahi; Pacific halibut; stone and dungeness crab; skipjack (canned light) tuna



The once super-abundant Atlantic cod

Sources: *The Empty Ocean* by Richard Ellis; the Pew Ocean's Commission "America's Living Oceans"; Macleans, November 3, 2003. Drawings: With permission from Richard Ellis, *The Empty Ocean*, Shearwater Press, 2003.

# A narrow view of wider access to alternative health care

The late Peter Seaton would get a heck of a laugh out of the strange turns one of his health-care recommendations has taken 12 years on.

Seaton chaired B.C.'s Royal Commission on Health Care and Costs in 1991. Among the commission's many findings was that something needed to be done to reduce the bickering among various health professions over who was qualified to do what under provincial law.

Keep the focus on preventing harm while maintaining choice for consumers, Seaton advised the government of the day. The Health Professions Council was

subsequently charged with making that happen, and has spent the last decade reworking the act and regulations that now govern 23 B.C. health professions.

But what eventually emerged from the lengthy process were recommendations that could limit consumer choice more than ever for those wanting alternatives to traditional medical care. The "enhanced interdisciplinary practice" that Seaton envisaged is still nowhere in sight, and the bickering has become increasingly bitter.

Consider the case of B.C.'s 180 naturopathic physicians.

Schooled for a similar length of time as medical doctors but with an emphasis on holistic and natural medicine, the naturopaths went into discussions with the Health Professions Council in 1994 hoping to expand their scope of practice to include such currently verboten acts as minor surgery, lab tests and childbirth. The council's preliminary report five

years ago stopped short of giving the naturopaths everything they asked for. But it did recommend that they be allowed to work inside hospitals, do spine manipulations, prescribe certain drugs and order lab tests.

Then came a round of public hearings, and everything changed.

The B.C. College of Chiropractors objected strenuously to naturopaths doing spinework. The College of B.C. Pharmacists got nervous about which drugs naturopaths would prescribe. The College of Physicians and Surgeons refused to endorse a list of acceptable drugs and substances of any kind.

The physicians' college, along with B.C.'s midwives and acupuncturists, argued vehemently against the naturopaths' bid to deliver babies. The B.C. Dietitians' Association lobbied against them having hospital privileges or continuing to do allergy tests, noting that treating a life-threatening allergic reac-

tion was beyond the profession's scope.

By the time the council wrote its final report in 2001, it had changed its mind so dramatically around naturopathy that even treatments the profession has performed for 80 years in B.C. had been ditched.

Allergy testing will be forbidden if the council's report guides the government's hand as new laws are drafted over the next year, says B.C. Naturopathic Association spokesman Jim Hart. So will the use of "hazardous energy" — X-rays, ultrasound, electronic-impulse devices. Dietary counselling could also be restricted.

That could severely curb treatment options for hundreds of thousands of British Columbians who routinely choose naturopathic care, contends Hart.

"One of the things this is showing is that all the health-care professions have to start working co-operatively instead of engaging in turf wars," says Hart, who has organized an MLA-only health and

wellness clinic today at the Hotel Gran Pacific to promote the benefits of naturopathy. "Our attitude is that there's a lot of sick people to go around."

Health Planning Minister Sinc Hawkins says Hart is overreacting. The council's recommendations are "advice and nothing more, she says, adding that her ministry has barely begun the process of drafting new scopes of practice.

"There's a lot of fear-mongering out there that we're going to clip everyone's wings," says Hawkins. "We could very well end up broadening the scope for some professions. This story keeps kicking around and I don't know how to put it to rest, but the fact is that no decision have been made yet."

So if you've always trusted in government to do the right thing, don't worry about any of this. But if you value choice in health care, now's the time to speak up.

*jpateron@tc.camwest.com*

## A Closer Look



JODY PATERSON



Copy to the BCNA

Konrad Von Finckenstein, Commissioner  
Competition Bureau, Industry Canada  
Dear Sir:

I write in regard to the legislative changes in British Columbia that will reduce the current and traditional practice of Naturopaths in BC. This will gravely affect the Naturopathic practice in BC and as a consumer it will limit my choice of health care. This letter is a complaint against the actions of the BC government, the BC College of Physicians and Surgeons, the BC College of Pharmacists and the BC Association of Dietitians and Nutritionists.

To understand the gravity of the situation I will explain that naturopathic care is not covered under any government plan. Consumers pay for the service willingly out of their own pockets. There are no consumer complaints about naturopathic service and it can be demonstrated that individuals choosing this service are healthier for it and not a burden on the system. Naturopaths, like doctors, and pharmacists are business people who run legitimate businesses. This decision is clearly not based on science or safety, but rather business.

The BC government is limiting naturopathic practice on the recommendations of other groups representing business people who stand to benefit from limiting their competition. Namely, the BC College of Physicians and Surgeons, the BC College of Pharmacists and the BC Association of Dietitians and Nutritionists. This means that Naturopaths are not able to compete openly and fairly in the Canadian market even though consumers are demanding their services. Surely this move is contrary to the competition rules of Canada.

I am quite sure you are familiar with the following definitions. They may or may not apply to this situation, but certainly they appear to be logical choices to the layman.

**Monopoly: exclusive possession of the selling of some commodity or service.**

**Monopolize: obtain exclusive possession or control of (trade, commodity).**

**Cartel: manufacturer's union to control production, marketing arrangements, prices, etc.**

**Conspiracy: (Competition Act 45.(1)(c)(d) - Every one who conspires, combines, agrees or arranges with another person to prevent or lessen, unduly, competition in the production, manufacture, purchase, barter, sale, storage, rental, transportation or supply of a product, or in the price of insurance on persons or property, or to otherwise restrain or injure competition unduly.**

If monopolizing activities exist, then this action by the government, recommended by other parties who stand to benefit, will undoubtedly decrease the opportunity for consumers to have choice of products and services.

Thank you for your assistance, Vicki Kushner

# Patents on Life Forms: Who Owns What?

Who owns your food? When you buy an apple are you free to plant the seed and grow a tree for your own personal use? When you purchase a loaf of bread, are the ingredients proprietary or free to be shared? Believe it or not, food has become as proprietary as Mickey Mouse. True, if you invent a machine or unique manufacturing process and are granted a patent there are laws to protect your research and development to, ostensibly, ensure a return on your investment. But what happens when humanity's most basic needs are given patents?

The World Trade Organization (WTO), which has 146 member countries, is working to fundamentally shift the global approach to ownership of our most basic needs. Each WTO member agrees to principles and requirements in respect to trade. One facet of membership is that the WTO requires all member nations to be "patent compliant"—that is maintain 20 year standards in relation to trade-related aspects of intellectual property rights (TRIPS). This covers the entire gamut of intellectual property, from trademarks such as Coke to copyright on, say, literature, and patents (including drugs, microorganisms and plants). Many developing countries do not follow international patent systems; those countries have until 2016 to become compliant. The most contentious area in regard to patents is medicine—both pharmaceuticals as well as naturally derived medicines such as botanicals. The principle behind TRIPS is that intellectual property rights will spur innovation.

To date TRIPS has, however, not fostered the development and innovation purported by the WTO. What it has done is secure high prices for pharmaceutical drugs and usurped many indigenous medical practices by patenting commonly used therapies and knowledge. In some cases, it has resulted in the theft of traditional knowledge built up by communities over centuries.

In India, for example, the neem tree has served as a free village pharmacy and community store for centuries. Many Indians use neem to help babies sleep, keep flies away, for pain relief and skin ailments, as a disinfectant and pesticide, among many other things. It's no wonder that neem is synonymous as "the tree of life." But in the last decade Western companies have taken out more than 70 patents on the properties of the neem tree alone! One patent, taken by the US company WR Grace and the US Department of Agriculture was thrown out in a court challenge, as the patent was on a process already "known" and in use. But that challenge was costly to the Indian government and, despite being successful, only in relation to one patent.

Tens of thousands of patent applications have been granted in the past decade on herbs, spices and staple crops. Some microbes have even been patented. There are patents on tea, soya, coffee, cotton, pepper, cauliflower, cabbage, peas, melons and even the use of Hessian. Agribusinesses now effectively own the development rights on maize, potato, rice, wheat, sorghum and all vegetables. A recent UK commission on intellectual property rights found that patent protection of plants had not stimulated research into crops suitable for poor farmers and that it posed a threat to the custom of exchanging seeds.

TRIPS was a major item for discussion at Cancun, the recent WTO talks which broke down before they began.

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PHYSICIAN REFERRALS \* NATUROPATHIC MEDICAL INFORMATION \* STUDENT INFORMATION

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The BCNA offers patients, across the province, referrals to licenced naturopathic doctors (NDs) in their area, as well as student information to persons interested in the profession. It is the BCNA's purpose

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