## "Current Comments"

Openmindedness in Science and Medicine

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The death of a friend or contemporary is an awesome, saddening demonstration of one's own mortality. But there are also myriad commonplace, insignificant, and sometimes foolish trifles which place you in an older generation. One example is the blank expression on a child's face when you mention a favorite celebrity in your age bracket. It is even more embarassing when you confess that you have never heard of Stevie Wonder or the L.A. Express. Unfortunately, there are even less subtle reminders of aging.

Someone recently advised me to find myself a young doctor. "At your age that should not be difficult," he gloomily reminded me. "A young doctor is less likely to drop dead on you than an older doctor, and once you start to fall apart (as if it might happen at any moment) it'll be impossible to replace your present doctor with one who will take the time to learn all about you. Besides, a younger doctor is likely to be better educated, simply because he's more recently educated. And younger minds are more receptive to new treatments; to what just might work. When the time comes (my gloomy friend is addicted to the phrase 'when the time comes'), a younger doctor is more apt to have an open mind." I never realized that experience produced a closed mind.

"Of course," he continued, "what you really want is a research physician, but almost none of them take patients. The ordinary diseases likely to kill you don't interest them!

My friend was cynical, but what he said made a peculiar kind of sense. His remarks betrayed his own prejudice against the old—what he meant was not necessarily a young doctor, but an open-minded, daring, or perhaps unconventional doctor, whatever his or her age.

With your survival at stake, would you want to be treated by a conventional, orthodox—albeit well-trained—technician? Or would you rather entrust your life to a physician who is well-trained but also skeptical, experienced but also unafraid to think for himself?

It all depends. I know an eminent director of a research institute who needed hernial surgery. Applying his customarily thorough approach, he began a systematic search for the doctor who had the most experience in hernial surgery, and finally went to Tennessee for what others regarded as a routine operation. His local medical colleagues were offended if not insulted. But he did have a right to ask, "How many hernias have you

sewed up lately?" He considered experience paramount.

However, if you should ever become one of the many thousands of patients in mental institutions suffering from "incurable" depression or mania, I don't think you'd want a doctor who would be satisfied to "maintain" you in a semi-vegetable state by using tranquilizers. I would prefer someone who suspects that depression may be related to food allergy, vitamin deficiency, electromagnetic radiation, or some other factor ruled out by traditional psychiatry.

Historically, advances in medicine—as well as in the rest of science—have been brought about by those with both training and curiosity, experience and intuition, detached objectivity and concern.

The single most important attribute of a scientist is the open-mindedness necessary to try out new ideas when the old ones fail. A few years ago Linus Pauling was attacked as senile because of his unorthodox beliefs. One does not have to agree with the basic tenets of orthomolecular psychiatry (indeed, we should re-

main skeptical) to admire Pauling's daring—which certainly should not be attributed to senility.

A physician in Chicago recently told me that tobacco smoke is the causitive agent in many cases of depression. But the mental health establishment refuses to listen to him. One wonders about the social and economic impact if large scale testing proves his theory correct. Perhaps the prospect of going crazy will "grab" more smokers than the prospect of dying of cancer.

It is not sufficient merely to apply the conventional wisdom to individual cases—especially when the resulting treatment does not work. Medicine is not as precise as mathematics, though it can be at times. You can't argue with a low blood count or a weak pulse. No one denies the importance of mastering what is known in medicine or, as is now more common, of mastering what is known in a speciality or sub-specialty. But to act as if all the important questions had been answered is closed-mindedness.