

Prevention or Treatment?

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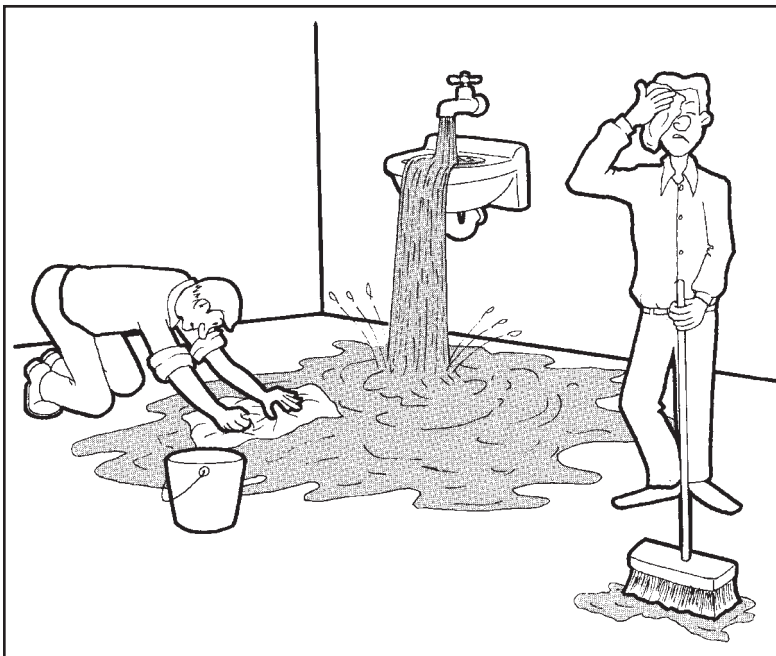
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Need For Better Balance

Prevention is far preferable to treatment. It is often more of an effort to achieve, however, because it involves changing people's habits and attitudes. Western medicine has concentrated its efforts on treatment rather than prevention. The US government spends billions of dollars for a medical system that stations an ambulance at the foot of a cliff to pick up the victims who have fallen over the edge and take them to sophisticated medical centers for treatment instead of spending a few million dollars for a healthcare system that would erect a fence around the edge of the cliff to prevent the people from falling off in the first place. Kicking the cigarette habit, avoiding alcohol, fastening car seat belts and eating a more optimal diet of foods-as-grown are all examples of the way the fences could be built around our cliffs and so avoid many preventable, self-inflicted Western diseases.

Or look at the running faucet filling a sink from which the overflow is flooding the floor! Two men work long hours mopping up the water. Their aim and ambition in life is to keep the floor dry. It has never occurred to them that

turning off the faucet might enormously reduce the need to mop the floor. Of course, the running water represents the cause of disease and the flood on the floor the diseases filling hospital beds and doctors' offices.



Medical students learn the standard techniques of floor mopping but they receive very little instruction in how to find and turn off running faucets. Industrial enterprises provide the best mops man's ingenuity can devise in the form of drugs, surgical techniques and space-age tech-

nology. For these we must be grateful. But, let them not blind us to the need to search out and wipe out the causes of our Western diseases at their source!

The analogy is plain. There is, and always will be, a flood on the floor, the presence of disease in the world, which must be dealt with by the best means possible. But how much better it would be to turn off the faucets as well as mopping the floor rather than ignoring the former while concentrating on the latter.

Some clinicians still contend that we need more proof about the diet faucet: A diet rich in calories, fat, sugar and salt, yet depleted in fiber. To them I say: If a man has fallen into the water and a lifesaver is at hand, you throw it to him. You would hardly ponder whether it is the right size, the correct shape, or the specific gravity while the man is drowning! The testing can be done later so as to improve rescue arrangements for future needs.

Much testing remains to be done regarding the role of diet, but our knowledge is sufficient on which we can and must act. In addition, we have an obligation as a Western Society to warn the countries of the developing world, which are eager to adopt our rich Western diet: If they adopt it, they do so at their peril!

Dr Burkitt, from London, England, is world-renowned for his discovery of the Burkitt Lymphoma and for the promotion of a diet higher in fiber yet lower in fat.