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United States Senate**

Integrative Medicine: A Vital Part of the New Health Care System

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Mr. Chairman and members of the Committee, thank you for the opportunity to speak to the Committee about the vitally important issue of health care reform. My name is Andrew Weil, and I am founder and director of the Arizona Center for Integrative Medicine at the University of Arizona's College of Medicine, where I am also the Lovell-Jones Professor of Integrative Rheumatology, Clinical Professor of Medicine & Professor of Public Health.

Everyone agrees that functional, cost-effective health care must be built on a foundation of disease prevention and health promotion. The main reason for the impending collapse of the American health care system is its lopsided focus on intervention in established disease, much of which is lifestyle related and therefore preventable.

It is less obvious that meaningful health care reform also requires a transformation of medicine. The high-tech interventions that conventional medicine primarily uses, including pharmaceutical drugs, are simply too expensive. American health professionals are not trained to use low-tech, cost-effective treatments that work well for many common disease conditions.

Integrative Medicine (IM) can solve both of these problems. As developed and taught by the University of Arizona Center for Integrative Medicine, it addresses all aspects of lifestyle to promote health and alleviate illness. Our national educational models are taught online and can be scaled to deliver training to large numbers of physicians, nurse practitioners, and allied health professionals to make them agents of lifestyle change. Furthermore, by identifying and employing a range of therapies from dietary adjustment to breathing exercises to carefully selected methods currently outside the medical mainstream (for example, acupuncture and osteopathic manipulation), IM can offer low-cost alternatives to pharmaceutical drugs and surgery for many conditions that now drain our health care resources. We emphasize proven, low-risk, low-cost interventions to treat disease, progressing to high-cost, high-tech interventions only when the severity of conditions demands them or after simpler measures have failed.

For practitioners of IM, preventing disease is not an afterthought, it is the cornerstone of our practice – the physician and patient form an ongoing partnership to maintain health, rather than fight illness, and IM practitioners are trained to be agents of lifestyle change. We treat illness promptly and aggressively when appropriate, but always seek to maximize the body's innate capacity to stay healthy and resist disease and injury.

My message today is that this system, integrative medicine, must be a key part of American health care reform. Here is why:

The citizens of the United States spend more per capita on health care than do the citizens of any other nation in the world – by a long shot. Costs of medical care have spiraled out of control, rising at such an accelerating rate that they are now a leading cause of personal bankruptcy. Every thirty seconds, an American files for bankruptcy as a result of health care costs.

Despite the magnitude of this crisis, when I listen to discussions about health care reform, I hear next to nothing about the real causes of the crisis or the real changes required to solve it. Most commentators assume that the root problems are (a) how to give more people access to the present system and (b) how to pay for it. I strongly disagree.

Why? If we were the healthiest people in the world, perhaps our massive expenditures for health care would be justified. But the sad fact is that by virtually every measure of health outcomes - including longevity, infant mortality, fitness, and rates of chronic diseases – the United States is at or near the bottom compared to other developed countries. We are paying more and more for health care, and have less and less to show for it. Clearly, we are spending all that money in wrong ways.

Please consider the following myths, and the realities that they conceal:

- **Myth #1:** Because America has the most expensive health care in the world, it must have the best.

Reality: The World Health Organization recently rated America 37th in health outcomes, on a par with Serbia.

- **Myth #2:** American technology makes it possible for us to achieve medical excellence.

Reality: We have powerful technology, but we misuse it and overuse it, driving up costs and worsening health outcomes. To choose just one small example, expensive cholesterol-lowering statin medications, which may have serious side effects, are being recommended for millions of healthy women and healthy men over 69 years of age, but an analysis in the January, 2007 issue of the medical journal, *The Lancet*, concluded that such medications did not reduce total deaths in those groups. [source: *The Lancet*, [Volume 369, Issue 9557](http://www.thelancet.com/journals/lancet/article/PIIS0140-6736(07)60084-1/fulltext), Pages 168 - 169, 20 January 2007, [http://www.thelancet.com/journals/lancet/article/PIIS0140-6736\(07\)60084-1/fulltext](http://www.thelancet.com/journals/lancet/article/PIIS0140-6736(07)60084-1/fulltext)]

- **Myth #3:** Our medical schools and scientific facilities produce the world's finest physicians and conduct the most productive research.

Reality: Our medical and scientific infrastructure is extensive, but it is controlled by an almost fundamentalist orthodoxy that limits our ability to understand and promote health and to prevent disease. Medical education today omits whole subject areas of great relevance to those ends, including nutrition, mind/body interactions, and environmental

effects on health. We train researchers to think simplistically and focus narrowly on single interventions directed at the physical body, especially pharmaceutical drugs. (The manufacturers of those drugs strongly influence researchers, practitioners, and the journals that report research results.)

In short, we do not have a “health care” system at all. Instead we have a disease management system that is deeply dysfunctional and getting more so by the day. Our national health is deteriorating, and we have the highest percentage of uninsured citizens of any democratic society; no other nation is close. With unemployment rising at an alarming rate, great numbers of Americans are losing their health insurance along with their jobs, further swelling the ranks of the uninsured. This is unacceptable.

So what must we do?

Let me say again: The challenge is not figuring out how to give more people access to the present collapsing system. The challenge is to envision what we can create to replace it.

I have long taught that health is an individual responsibility. It is up to you to learn how to maintain it and to protect your body’s potential for self-healing as you go through life. No doctors, no treatments, no system can do this for you or force you to do it on your own.

Medical professionals and institutions can help, however, by improving your understanding of health. They can inform you about the influence of lifestyle choices on your risks of disease. They can provide preventive medical services to protect you from common, serious conditions, for instance, by immunizing you against infectious illnesses and screening you for forms of cancer that are curable if detected early. They can identify and explain problems that require expert diagnosis and treatment, then guide you in selecting the best therapy. They can help you if you are a victim of trauma or suffer a heart attack or need other emergency medical or surgical attention.

I believe – strongly and passionately – that every American has a right to good health care that is effective, accessible, and affordable, that serves you from infancy through old age, that allows you to go to practitioners and facilities of your choosing, that offers a broad range of therapeutic options. Your health care system should also help you stay in optimum health, not just take care of you when you are sick or injured. You should expect and demand this of your country, whether you are rich or poor, whatever the circumstances in which you live. A free, democratic society *must* guarantee basic health care to its citizens – all of them – just as it guarantees them basic security and safety. It is in society’s interest to do so: the healthier our population, the stronger and more productive we will be as a nation.

It comes down to this: Our long-term goal must be to shift our health care efforts from *disease intervention* to *health promotion* and *disease prevention*. That does not mean withholding treatment from those who need it; those with existing conditions need to be treated effectively and compassionately. But my concept of prevention goes well beyond immunization, sanitation, and diagnostic screenings. *I am suggesting that the time has come for a new paradigm of preventive medicine and a society-wide effort to educate our citizens about health and self care.*

Breaking dependence on costly high-tech medical interventions will require fundamental changes in medical education and practice, as well as rethinking the nature of health and healing, the role of treatment, and our expectations of medicine. Without a transformation of medicine we cannot have the health care we so desperately need: health care that is effective, serves everyone, and does not bankrupt us individually or collectively.

It can happen. It is happening. Federal mandates can only serve to speed an ongoing, natural evolution that is well underway. I lead an effort at the University of Arizona to train doctors in integrative medicine, which, as I have said, values inexpensive, safe and effective, low-tech treatments as alternatives to outrageously priced pharmaceutical drugs. In fact, my work to advance this new field has provided part of the inspiration to testify here today, because its early success makes me absolutely certain that it is the key to getting American health care back on course.

Consider: Integrative medicine is quickly gaining momentum. I founded the first integrative medicine training program at the University of Arizona in 1992. Today, 42 academic health centers, including those at Harvard, Duke, Johns Hopkins, and the University of California as well as the Mayo Clinic, have IM initiatives. [source: <http://www.imconsortium.org/about/home.html>] At the University of Arizona alone, we have trained over 400 physicians, nurse practitioners, and medical residents, many of whom are now leading their own programs at other institutions in this country and around the world. We are expanding our trainings as quickly as we can, because demand for them is increasing rapidly, and are working to make a comprehensive curriculum in IM a required, accredited part of all residency training in all medical specialties. I can assure you, that more and more doctors and allied health professionals want to practice this kind of medicine, because they see it as the medicine of the future: cost-effective medicine that can revitalize American health care and make it truly the best in the world.

Consumers have already embraced integrative medicine, but skeptics still question whether it really works. We need good outcomes studies to convince them, but we already have data showing that patients do indeed achieve better outcomes and are more satisfied with their care when treated by integrative physicians. For example, a 2008 study of patient experiences at the University of Michigan's Integrative Medicine Clinic showed that over 62 percent of responding patients called the clinic's care either "excellent" or "best care ever." An amazing 81.2 percent of respondents reported partial or full effectiveness of their patient plan in achieving their primary objective. [source: <http://www.liebertonline.com/doi/pdf/10.1089/acm.2008.0154>] That is a success rate most conventional clinics could not match.

But health care reform can and should extend beyond the clinic. It must also include the creation of incentives and disincentives to encourage people to make better lifestyle choices in their daily lives that reduce risks of the chronic diseases that now absorb so many of our health care dollars. This is a tall order, requiring that the government, private sector, and individuals all pull together and move in the same direction. It must be done.

Thank you again for inviting me to testify today. I would be happy to assist the Committee as it considers health care reform and suggest that the Arizona Center for Integrative Medicine is well positioned to reach out to other health care leaders who share our belief in the importance of transforming medicine in order to secure the health and future of our society.