
A panacea of general practice

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As a general practitioner with an interest in palliative medicine, occasionally patients with end-stage malignancies are referred to me. For these people the search for a panacea is well and truly over. Rather than searching for a cure for cancer they are now mostly searching for control of their “pain,” with all that that implies. One of my roles is to protect my patients from those peddling a panacea who in the process may impose burdensome costs, be they physical, psychological, or financial. The motives of those selling a “cure” may be altruism or greed, or indeed both.

Who was Panacea? As doctors of the modern age we no longer take the Hippocratic Oath. However doctors of previous generations would have been familiar with the opening paragraph of the oath, which in rapid succession mentions Apollo, Aesclepius, Hygieia, and Panacea. Apollo represented civilization, order, and the pursuit of intellectual activities such as medicine. Aesclepius, the son of Apollo, was the physician–god who was punished by the gods for bringing the dead back to life. He had two daughters, Hygieia, representing health, and Panacea, which literally means “cure all.”

It is of interest that the probably oldest medical code of ethics, the Hippocratic Oath, mentions a physician who was punished for going too far by bringing life back to the dead. It also speaks of his daughter, who searched for the cure to all illness. Was the daughter attempting to do her father’s work in a different form, in searching for immortality? Would the gods look upon a “cure all” as a process akin to breathing life into the dead?

Perhaps the search for the panacea and the popularity of such remedies has a deeper explanation. Most people find the acceptance of death and per-

sonal mortality difficult. Many of us live life by denying or suppressing such thoughts. Our search for heroes in everyday life may be one way of coping with such thoughts. We like to identify with a movie star, a sporting hero, or indeed a mythical god. These heroic figures are greater than ourselves and soar above mere mortals. By attaching ourselves to their stars we too can escape the mundane fate of death.

Is the search for panacea an identification with a heroic struggle? Is this quest for a panacea an extension of our wish to deny mortality? Could it be that the scientist in his search for the “hidden truth” or “cure” is in a way living on, through his research?

On a more base level some health practitioners take advantage of this heroic struggle against mortality by marketing “cure alls” for incurable conditions. Their motives, as mentioned, are often mixed.

An alternate way of understanding this riddle is to look at the Greek myth of Acteon, the hunter, who came across the beautiful naked Diana bathing. Diana punished the unwelcome intruder by transforming him into a stag, whereupon he was devoured by his own pack of dogs.

Jean-Paul Sartre, the French philosopher, describes the “Acteon Complex” whereby the scholar/scientist searches for the “white nudity,” or truth, just as did Acteon when he pushed aside the branches that covered the naked “truth” of Diana. The pursuit of knowledge is a hunt. The scientist violates the truth with his gaze and then risks punishment by the gods, who regard the discovering of truth a crime. Is it the fate of all men who hunt the truth to be mesmerized or fatally wounded by that which they discover?

What is the latest panacea being sought? Could those who are researching stem cells or genetic engineering or even screening for the detection of smaller and earlier malignancies be the next to suffer the fate of Acteon? Remember the exciting treatment some years ago of female infertility with

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Human Growth Hormone extract and the disastrous resultant Jacob–Creutzfeld disease?

Schools of thought do influence medical practice. At present we are in an age of pharmaceuticals and investigation. As our investigative techniques become better and more refined we are discovering preclinical tumors of uncertain significance. Ductal carcinoma in situ of the breast was a rare condition prior to screening mammography. Now many women with this condition have extensive investigations with attendant emotional and physical trauma—yet the significance of the disease remains poorly defined. Screening for prostate and lung cancer raises similar imponderables. *Primum non nocere*.

The pharmaceutical industry is driven by the search for a panacea. The recent problems with the COX-2 inhibitors are a good example of how easy it is to become carried away with what seems to be the perfect drug, but in the fullness of time, the limitations of this new “cure all” for arthritis have become obvious.

However one must not be too critical. Look at penicillin and the anticholesterol statins and numerous other beneficial medications. It seems that sometimes the branches covering Diana can be parted slowly, to avoid startling her. Can we learn to spy on the naked beauty surreptitiously? Or at least in a way that will not violate truth and exact a punishment? Or indeed, is this ethically permissible?

Early last century the “Germ Theory” was the major scientific breakthrough, which had a significant effect on the practice of medicine. Is it because medicine was and is still a mixture of science and art that scientific discoveries can so easily be mis-

interpreted by zealous doctors seeking a cure? Doctors in America and Great Britain were seeking to explain many illnesses such as diabetes and rheumatoid arthritis. They suggested a mechanism called auto-intoxication whereby bacteria and their toxic products were absorbed into the body causing disease. “Focal Sepsis,” a collection of germs and pus, was used to explain even psychiatric disorders. Many unjustified operations—including major bowel surgery—were performed to eliminate bacteria and thereby, according to the theory, alleviate mental illness.

It is a noteworthy paradox that in our medical lifetime peptic ulcer disease has been shown to be an infectious disease. Slow careful scientific research has altered the whole management of this common problem, and the various forms of stomach surgery, so common in the recent past, are now rarely needed.

The burning parallel today is the challenge of stem cell research, cloning, and chromosome–gene manipulation. These and similar paradigms go to the heart of the question—what are the risks of parting the branches to gaze at Diana’s naked and seductive truth?

The comparatively new paradigm of evidence based medicine and its bed fellow, the randomized controlled clinical trial, will hopefully make it less likely that we will subject ourselves and our patients to the disasters of the Acteon syndrome and a fruitless search for the panacea. However the lure of Mercury, the god of profit and commerce, and the seductiveness of Diana both risk blinding us to some future calamity.