

BP – Placebo Effect

BBC Documentary - Placebo Effect As Good As Surgery For ... ► 5:58 Mar 5, 2014 - Uploaded by AltMedChannel https://www.youtube.com/watch?v=HqGSeFOUsLI

Fascinating documentary about the science and psychology of placebos, centered on a gathering of the Harvard Placebo Study Group at a remote cottage in Ireland. Full documentary featuring Nicholas Humphrey, Anne Harrington, Dan Moerman, Howard Fields, Fabrizio Benedetti. Directed by Jemima Harrison. 2002. http://www.youtube.com/watch?feature=player_embedded&v=QvbQnMvhQFw#at=88

That's what the Harvard Placebo Study Group had to say. Here's what skeptics have to say:

http://www.skeptic.com/eskeptic/09-05-20/#feature The Placebo Effect BY HARRIET HALL, MD

"Jane D. was a regular visitor to our ER, usually showing up late at night demanding an injection of the narcotic Demerol, the only thing that worked for her severe headaches. One night the staff psychiatrist had the nurse give her an injection of saline instead. It worked! He told Jane she had responded to a placebo, discussed the implications, and thought he'd helped her understand that her problem was psychological. But as he was leaving the room, Jane asked, "Can I get that new medicine again next time instead of the Demerol? It really worked great!"

What's going on here? What is the placebo effect and how does it work? The term "placebo effect" is unfortunate; it leads to misunderstandings. Placebos themselves don't have any effect. They are inert: that's what placebo means...

Mark Crislip, MD, thinks the placebo effect is a myth. "I think that the placebo effect with pain is a mild example of cognitive behavioral therapy; the pain stays the same, it is the emotional response that is altered ... Ain't no such thing as a placebo effect, only a change in perception." He's correct in saying that the placebo effect does nothing to change the pain signals in the nerves. But most people think the change in perception is the placebo effect and is worth pursuing."



First of all, placebo is about much more than pain signals. It has an impact on nausea, surgery, recovery rates...

Secondly, the fact that perception affects physical conditions is absolutely worth investigating given that the current scientific paradigm says that subjective states are not real and therefore cannot be causal. In fact perception/consciousness affecting outcomes is precisely the point.

Thirdly if a change in perception can positively affect someone's experience of pain and help healing, then we should be working hard to help people develop the perceptions most highly associated with less pain and more healing.

Lastly, yes, placebo is the mystery of how mindset, expectation, perception, consciousness, whateveryouwanttocallit, affects one's physical response to an inert substance or pretend procedure. Placebo is about how mind affects matter, and that consciousness is causal. It's not a mystery in the quantum paradigm. It is an example of the new paradigm.

http://www.huffingtonpost.com/david-h-newman-md/placebo-surgery_b_4545071.html Jan 7, 2014:

"Got arthritis? Sham surgery is highly effective. Broken back? Sham surgery works. Torn meniscus? Have a sham.

Last week the New England Journal of Medicine published yet another trial showing that fake surgery can be as good as the real thing. This time the subjects were candidates for knee surgery, with a torn meniscus and debilitating pain. When they arrived in the operating room, study surgeons in Finland performed either a meticulous repair of the torn cartilage, or a charade. Incisions were made, and closed, with no other intervention. In case anesthetized patients could hear or understand, the doctors and nurses passed instruments, made surgical sounds, and pretended to do surgery for as long as the procedure would normally take.

Both surgeries worked. Unfortunately for proponents of the meniscus surgery, however, subjects who underwent the fake procedure experienced just as much improvement in pain and activity as those whose meniscus was actually repaired.



As odd as it may seem the finding that sham surgery works, and works as well as a highlytechnical procedure, is not new. In 2009 two trials of vertebroplasty, a procedure to reconstruct vertebrae that break due to bone weakness, found the same improvements in sham and real surgery groups. In the 1950s a common heart procedure, mammary artery ligation, was highly effective for reducing heart pains, but no better than a sham. Knee surgery to repair arthritic joints, laser surgery to improve cardiac blood flow, and acupuncture for migraines all can improve patients' symptoms and function, and all were the same as a sham."

doctors.inmyarea.com/the-**placebo-effect-explained** Written by <u>Derek Bryan</u> on Thursday, June 20, 2013:

"Many people have heard of the "placebo effect," and can understand on a fundamental level that the power of **belief can have a genuine influence on the real world**. But few fully understand the science behind the placebo effect—even the scientific community. Placebos are **shockingly effective in the treatment of almost any condition**, and their usefulness in clinical studies makes their ordinariness even more extraordinary.

In addition to clinical trials, some doctors even **prescribe placebos to patients who have not responded well** to other forms of treatment. In some cases, placebos can carry an effect as good as, or better than, traditional forms of medicine and treatment.

Scientists have not yet fully uncovered the secret to the placebo effect in our bodies, but the phenomenon is repeatedly observable. Since the psychological effect of believing has a physical effect on bodily symptoms, scientists know there is some kind of **connection between mind and body**."

If those scientists would understand that the mind is more than what the brain does, they would begin to understand the <u>post-materialist model</u> of the mind-body connection. Conventional science just can't explain it.

Even the American Cancer Society is getting wise to the fact that the placebo effect is not "business as usual" when it comes to understanding health, illness, and disease.

From American Cancer Society updated 10/12: <u>Placebo Effect - American Cancer</u> <u>Society</u> www.cancer.org > ... > Treatments and Side Effects > Treatment Types

"In the past, some researchers have questioned whether there's convincing proof that the placebo effect is a real effect. But there are studies showing that the placebo effect is real. Since many scientific tests have shown the placebo effect, it's one way we know for sure that the mind and body are connected.



Some scientific evidence suggests that the placebo effect may be partly due to the release of endorphins in the brain. Endorphins are the body's natural pain killers. But there's probably more to it than this.

Many think the placebo effect occurs because the patient believes in the substance, the treatment, or the doctor. The patient's thoughts and feelings somehow cause short-term physical changes in the brain or body. The patient expects to feel better, and so he or she does feel better for some time. But even if a person feels better after taking a placebo, it doesn't mean the person's illness or symptoms were not real.

What's commonly called the placebo effect even plays a role in mainstream medicine. Many people feel better after they get medical treatments that they expect to work. But the opposite can also happen, and this seems to support the idea of the expectation effect even more."

"What Is A Placebo?

A <u>placebo</u> is any substance, injection, liquid, pill, procedure, or even full-on therapy that **does not** directly affect an illness or condition, but is administered as if it does. It's not a medicine, but is sometimes allotted as if it were. Numerous studies have shown that placebos tend to affect about one third of all patients who take them, no matter what kind of illness or condition the placebo is supposedly intended to treat. The effect is similar even when patients understand that they are taking a placebo, and can even have reverse effects if a patient believes the placebo is harmful. This is a physical effect based on a person's expectations, so it depends on a person's confidence that a treatment will work, even if that confidence is unconscious.

How Does It Work?

The placebo effect has been <u>accepted by most scientists</u>, but few have been able to explain the connection. Since the psychological effect of believing has a physical effect on bodily symptoms, scientists know there is some kind of **connection between mind and body**.

One explanation suggests that there are ties to release of endorphins in the brain, which function as natural pain killers. Our bodies release endorphins in anticipation of a positive treatment effect, and help ameliorate the problem. But since negative effects occur with a negative expectation, this cannot be the only explanation. Another explanation pivots on conditioning. Our bodies eventually **learn to anticipate** that a form of treatment usually has a positive effect on the body, and react accordingly. Even negative placebos, surrounded by doubt and anxiety, are responsive to our bodies, which are conditioned to react negatively to such emotion...

In addition to clinical trials, some doctors even **prescribe placebos to patients who have not responded well to other forms of treatment**. In some cases, placebos can carry an effect as good as, or better than, traditional forms of medicine and treatment."

That is not a very compelling explanation of how it works.



If the explanation is "the anticipation", it doesn't avoid the mind-as-causal issue which poses a big challenge to materialist, reductionist conventional assumptions. It is not the physical medicine, but the expectation or anticipation - the mind state - that triggers a body reaction. "*Our bodies eventually learn to anticipate that a form of treatment usually has a positive effect on the body, and react accordingly.*" If it was just the body being dragged to the doctor while the patient was unconscious, the body alone would not react in anticipation of anything.

It also doesn't explain how "In addition to clinical trials, some doctors even prescribe placebos to patients who have not responded well to other forms of treatment. In some cases, placebos can carry an effect as good as, or better than, traditional forms of medicine and treatment." If it was a matter of conditioning, there should be no better effects than what has been experienced in the past.

The mind state is causal (not to be confused with "casual"). The conventional Newtonian "modern" paradigm (350 years old) can't accommodate a range of phenomena that the <u>quantum paradigm</u> can account for with both scientific evidence and an internally consistent, broadly coherent logical framework.

A framework for understanding that something as profoundly subjective as <u>Meaning</u> is central to the mind body and mind matter connection.

Placebo Effect Explained | Medical News and Health Information

http://www.ivanhoe.com/channels/p_channelstory.cfm?storyid=3314 Apr. 15, 2002

"The so-called "placebo effect" in medicine has been talked about for nearly half of a century. Researchers from the University of Michigan offer a new way to look at the placebo effect. They say the term is being misused and needs to be better defined.

They suggest placebo effect is often really a "meaning response."

The authors offer this example; a British study involved more than 800 women who had regular headaches. Some of the women were given aspirin that had been labeled with a widely advertised brand name. Another group was given the same aspirin in a plain package. The study reports the branded aspirin worked better in the patients than the unbranded aspirin.

Some would consider this the "placebo effect." However, researchers say this is not truly a placebo effect because no placebo was involved. Instead this is what they consider a "meaning response."



Meaning response is defined as the physiological or psychological effects of meaning in the treatment of an illness. In this case, it was the brand name on the aspirin, not the placebo, that had an effect on the patient.

Researchers write, "The one thing of which we can be absolutely certain is that placebos do not cause placebo effects. Placebos are inert and don't cause anything." They hope by focus on the idea of meaning response instead of placebo effect will lead to a greater insight into how treatments work." SOURCE: Annals of Internal Medicine, 2002;136:471-476

"As with energy and matter, mind and matter may be equivalent even though they appear completely different. And just as energy and matter are related through a third entity, the speed of light, mind and matter also may be related through a third entity, meaning." - Larry Dossey, MD was the first physician asked to deliver the Mahatma Gandhi Annual Address in New Delhi, is a NY Times Best-selling author, was co-chair of the NIH Mind-Body Panel, and is the founding editor of **EXPLORE: Journal of Science and Healing**. His new book is:

One Mind: How Our Individual Mind is Part of a Greater ...

<u>www.amazon.com/One-Mind-Individual-Greater-Consciousness/dp/1401943152</u> "Larry Dossey, MD is a pioneer who keeps finding new frontiers. With One Mind, his merging of science and wisdom has come full circle...

http://www.nytimes.com/2014/10/26/magazine/what-if-age-is-nothing-but-a-mindset.html?action=click&pgtype=Homepage®ion=CColumn&module=MostEmailed&version= Full&src=me&WT.nav=MostEmailed

"Jeffrey Rediger, a psychiatrist and the medical and clinical director of Harvard's McLean Hospital, was invited by a friend of Langer's to watch it with some colleagues last year. Rediger was aware of Langer's original New Hampshire study, but the made-for-TV version brought its tantalizing implications to life.

"[Langer is] one of the people at Harvard who really gets it," Rediger told me. "That health and illness are much more rooted in our minds and in our hearts and how we experience ourselves in the world than our models even begin to understand."

We aren't really very rational creatures. Our cognitive biases routinely steer us wrong. Langer's notion that people are trained not to think and are thus extremely vulnerable to right-sounding but actually wrong notions prefigured many of the tenets of "behavioral economics" and the work of people like Daniel Kahneman, who won a Nobel Prize in economic sciences.



By the 1970s, Langer had become convinced that not only are most people led astray by their biases, but they are also spectacularly inattentive to what's going on around them. "They're just not there," as she puts it. When you're not there, Langer reasoned, you're very likely to end up where you're led. She set up a number of studies to show how people's thinking and behavior can easily be manipulated with subtle primes.

If people could learn to be mindful and always perceive the choices available to them, Langer says, they would fulfill their potential and improve their health. Langer's technique of achieving a state of mindfulness is different from the one often utilized in Eastern "mindfulness meditation" nonjudgmental awareness of the thoughts and feelings drifting through your mind — that is everywhere today. Her emphasis is on noticing moment-to-moment changes around you, from the differences in the face of your spouse across the breakfast table to the variability of your asthma symptoms.

Placebo effects are a striking phenomenon and still not all that well understood. Entire fields like psychoneuroimmunology and psychoendocrinology have emerged to investigate the relationship between psychological and physiological processes. Neuroscientists are charting what's going on in the brain when expectations alone reduce pain or relieve Parkinson's symptoms. **More traditionally minded health researchers acknowledge the role of placebo effects and account for them in their experiments. But Langer goes well beyond that. She thinks they're huge — so huge that in many cases they may actually be the main factor producing the results.**" **MORE**

MORE: "As an example, she points to a study she conducted in a hair salon in 2009. She got the idea from a study undertaken nearly a decade earlier by three scientists who looked at more than 4,000 subjects over two decades and found that men who were bald when they joined the study were more likely to develop prostate cancer than men who kept their hair. The researchers couldn't be sure what explained the link, though they suspected that androgens (male hormones including testosterone) could be affecting both scalp and prostate. Langer had another theory: "Baldness is a cue for old age," she says. "Therefore, men who go bald early in life may perceive themselves as older and may consequently be expected to age more quickly." And those expectations may actually lead them to experience the effects of aging. To explore this relationship between expectations of aging and physiological signs of health, Langer and her colleagues designed the hair-salon study. They had research assistants approach 47 women, ranging in age from 27 to 83, who were about to have their hair cut, colored or both. They took blood-pressure readings. After the subjects' hair was done, they filled out a questionnaire about how they felt they looked, and their blood pressure was taken again. In a paper published in 2010 in the journal Perspectives on Psychological Science, they reported that the subjects who perceived themselves as looking younger after the makeover experienced a drop in blood pressure.

A few years earlier, Langer and one of her students, Alia Crum, conducted a study, published in the journal Psychological Science, involving 84 hotel chambermaids. The maids had mostly reported that they didn't get much exercise in a typical week. The researchers primed the experimental group to think differently about their work by informing them that cleaning rooms



was fairly serious exercise — as much if not more than the surgeon general recommends. Once their expectations were shifted, those maids lost weight, relative to a control group (and also improved on other measures like body mass index and hip-to-waist ratio). All other factors were held constant. The only difference was the change in mind-set.

Critics hunted for other explanations — statistical errors or subtle behavior changes in the weight-loss group that Langer hadn't accounted for. Otherwise the outcome seemed to defy physics. "To which I would say, 'There's no discipline that is complete,' "Langer responds. "If current-day physics can't explain these things, maybe there are changes that need to be made in [conventional] physics."

Langer wondered whether the biochemistry of Type 2 diabetics could be manipulated by the same psychological intervention — the subjects' perception of how much time had passed. Her theory was that the diabetics' blood-glucose levels would follow perceived time rather than actual time; in other words, they would spike and dip when the subjects expected them to. And that's what her data revealed. When a student emailed her with the results this fall, she could barely contain her excitement. "This is the beginning of a psychological cure for diabetes!" she told me.

She told me about a yet-to-be-published study she did in 2010 that found that breast-cancer survivors who described themselves as "in remission" were less functional and showed poorer general health and more pain than subjects who considered themselves "cured."

I asked Tripathy whether there's any precedent for what Langer is trying to do. "Well, there are many examples in medicine where improvement in the emotional state seems also to bring about some improvement in the disease state," he said. "We know, for example, that Tibetan monks can meditate and lower their blood pressure. People with hypertension, they embark on behavioral changes, and you can see the improvement in the medical indexes, like fewer heart attacks." **END OF MORE**

It's time for medicine, and science generally, to move past the old classical limitations on consciousness and the imbalanced emphasis on purely physical causes and cures.