

2nd Scientific Symposium of Einsiedeln

Women - Willing victims of modern medicine?

Critical appraisal of screening in gynaecology, of hormones, of obstetrics: A timely medical practice on the horizon

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The critical appraisal of the benefit of contemporary medicine by the use of modern methods of clinical epidemiology raises a number of questions.

Recent analyses quantifying and comparing beneficial as well as adverse effects of medicine have identified a number of medical practices with doubtful overall benefit. It is intriguing to observe that an undue proportion of practices with a questionable «net benefit», often mass interventions, are performed on women. Such practices include *periodic examinations by gynaecologists (breast cancer screening, periodic pap smears, periodic pregnancy controls and routine ultrasound in pregnancy)* as well as *screening for osteoporosis and prophylactic hormonal «substitution»*. *Unnecessary operations* are often found in gynaecology, and treatment of «high» *cholesterol* by the prescription of lipid-lowering drugs is more common with women than with men in some places in spite of the lack of evidence that it can protect women from coronary disease. Women treated with lipid-lowering drugs are more likely to be harmed than benefited.

It indeed appears that the «modern and health-conscious woman» has been

convinced of the need of frequent screening examinations, of the benefit of prophylactic hormonal treatment after menopause, and of the uselessness of her uterus after childbearing. It has also become fashionable to be concerned about the measurement of bone density and about early control of girls by gynaecologists. What may be the cultural background for such a development? Is it Patriarchism, and how is it maintained? Or is it rather «Matriarchism» of over-mothering, that led to this situation, and how do both, bemothering and befathering, interact? Is there a will of men to exercise hegemonial power or is it the women who leave the decisions to the authority of father figures? How are people used to recognising *female* and *male* elements in their own person and understanding their interaction? Finally, what can schools of unconventional medicine contribute to the understanding of this situation, and which timely research questions may arise?

It can be conjectured that modern man tends to believe that there is a life without suffering and death thanks to the magnificent technical achievements available. This may lead to an increasing wish to believe that the eternal interplay between certainty and uncertainty (between the *male* and the *female*), so well known to human beings, comes to an end, eventually. The measurable hard facts of modern technology, seemingly, provide certainty and security even in cases where modern technological achievements have nothing to offer. Successful coping with uncertainty, however, needs a kind of «technique» other than the technological fix of sophisticated medical equipment. Mastering uncertainty requires independence and courage which in fact are «female» competencies. The development of these human competencies can be enhanced by culture and societal values. Ultimately, however, everyone must acquire them alone. Unfortunately – or perhaps fortunately – the ability to cope with uncertainty can thus never be demanded from another person or societal group. The re-creation of a culture and society which provides opportunities for learning and practicing how to deal with uncertainty, therefore, emerges as an important «political programme».

The *2nd Scientific Symposium of Einsiedeln* will address mastery of inevitable uncertainty as a basis for the development of a more rational and less anxious medical practice.