

Letter to the Editor: The Pundit Speaks

By Randolph M. Howes, M.D., Ph.D.

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“Medical Practices Lack Solid Scientific Support”

In September of 2020, shocking headlines stated, “Only 1 in 10 medical treatments is backed by high-quality evidence.” Most believe that the treatments prescribed by their doctors are supported by high-quality scientific studies but that is far from being true. An analysis in the *Journal of Clinical Epidemiology*, concluded that only 9.9 percent of recommended treatments had high-quality evidence according to the gold-standard method for determining whether they provide high or low-quality evidence, called GRADE (grading of recommendations, assessment, development and evaluation). Using the same system, 37 percent had moderate, 31 percent had low, and 22 percent had very low-quality evidence. Lack of high-quality evidence, according to GRADE, means that future studies might overturn the results. Studies that are “blinded” – in which patients don’t know whether they are getting the actual treatment or a placebo – offer higher-quality evidence than “unblinded” studies. Blinding is important because people who know what treatment they are getting can experience greater placebo effects than those who do not know what treatment they are getting. Many poor-quality trials are being published. It is estimated that there are currently 25 thousand medical/scientific journals turning out over one million publications annually. It is also estimated that 50% of these papers have reached the wrong conclusions. The tsunami of trials published every year, combined with the need to publish in order to survive in academia, has led to a great deal of rubbish being published. Large studies lend themselves to misinterpretation and misrepresentation of underlying facts. Slick advertisers capitalize on these ludicrous false associations. Studies that report a link between some new risk factor and disease are everywhere and frequently mean little or nothing. We must remain enthusiastic concerning medical science but must also be dedicated to truthful reporting. One author wrote, “In the present-day digital world, it is challenging to function comprehensively, given our increasing reliance on the internet, which has touched every aspect of our lives, including healthcare. We are constantly inundated by false information, including medical information—purposefully deployed—that spreads so quickly and persuades so effectively.” Some of this online health information includes interactive websites, internet-based games, online health press rooms, disease symptoms simulations, opinion polls, Twitter feeds, and doctor–patient online consultations. So, there’s an increasing need to check and evaluate data sources, particularly for health and disease topics. It is ironic that accepting nonsense medical “headlines” may be your greatest medical risk factor for your overall wellbeing.

In the America that I love, we must recognize that on average, most of the medical treatments whose effectiveness has been tested in systematic reviews are not supported by high-quality evidence. Be skeptical and await actual proof, before adopting lifestyle changes or swallowing a “magic pill.”

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