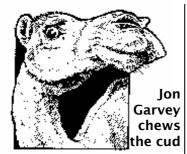
## Ruminant



## The principle of universal veracity

I received a very remarkable letter today. It was from a relative of one of the staff at my old practice in Kent, and in essence thanked me for being responsible for curing him of a collection of health problems which had plagued him for longer than I myself have been alive.

It is, of course, a gratifying experience to receive some indication that one's work has been worthwhile, and even appreciated, but in this case the correspondent was not even my patient, and we have never even met. This is not very surprising, as it appears to be a general rule that it is the people for whom one seems to have done least who return to give thanks, whilst one's inspired diagnoses and superhuman efforts disappear into the paper shredder of time.

All I did in this case was to respond to the relative's request for a diet sheet. I had just started experimenting with food allergy, mainly with a view to treating childhood behaviour disorders, and had acquired from somewhere a rotating diet scheme for detecting sensitivities. I hadn't even got around to using it. But we had discussed it a bit in the surgery, and when I was asked for a copy, it didn't seem particularly unethical to pass it on—it could, after all, do no harm.

Since then I have changed practices, read Mackarness and other trendy allergy authors, tried various diets in people with various disorders, and had, on the whole, resoundingly unsuccessful results. Certainly, there was nothing like the 30 per cent of all illness proven to be allergic in origin, as some writers would have one believe.

Migraine and eczema responded extremely frequently, but most of the ill-defined complaints remained stubbornly ill-defined. So much so, in fact, that I had just come to the point of abandoning the whole approach in favour of tranquillisers for everything, since to spend an hour of NHS time explaining to people how to starve themselves is only justified by having some hope that they will return at the end exuding that joie de vivre which the World Health Organization says is our birthright.

And then, out of the blue, came this letter, rejoicing that after 40 years of poor

health, he was a new man. He included complete documentation of symptoms, methods, results, and even confirmatory RAST tests from St Excellent's Hospital Allergy Clinic.

My first reaction is to shove all the neurotics back on Malvern water, a pure light of zeal in my eye, and start giving public lectures on the evils of Sugar Ricicles. I am restrained, however, by the certain knowledge that my results would be no less disappointing than before. The reason my correspondent's case was successful is, as I shall attempt to show, simply that he was so far away from me.

Why is it that there is such a discrepancy between the experience of them, the pundits of food allergy, and you and me, when we try it? They find allergy in every sore toe they look at. We find that our diet makes no difference to our patients' palpitations, flushes, depression after meals, irritable bowel syndrome, etc, but that it makes their stuffy nose worse. It is tempting to suppose that some enthusiasts are getting the results they want to get. But apart from casting aspersions on the integrity and good sense of our colleagues, this argument fails to appreciate, hiding behind the disparity, a Global Concept, just waiting to be realised.

As soon as one discards the idea that either oneself or others are falsifying the results, it becomes obvious that what is happening is that the truth varies, depending on where one is. Thus, in Chelmsford, food allergy is a rare, and usually obvious, diagnosis. But if, instead of mucking about oneself, one had sent all one's incurable patients to a London. allergy clinic, where the space-time continuum has got used to the idea of allergies, behold! They'd have all been cured as quick as a fast. That's why homoeopathy works for the doctor at the next surgery along the road from us, but has at best equivocal results when any of us tries it. It even explains why bran cures everything in Africa, but doesn't even help diverticular disease when somebody over here does a trial. It explains why you and I keep relying on tricyclics when all the rest of the world seems to be doing better with yoga, bee stings, vitamin E and progesterone. This rule of nature is, or will be, known as the "Principle of Universal Veracity", and will become of great importance in giving scientific flesh to the oft-quoted adage, "Well, of course, it's true for you".

It goes without saying that the Principle has far wider implications than medicine. It explains how South Africa can be a racist tyranny and the Last Outpost of Freedom in Africa at one and the same time. It explains how you can rescue the economy either by saving as much money as possible or spending as much as possible. In short, it solves all

health, he was a new man. He included arguments, because it means that all of us complete documentation of symptoms, are right all the time.

But if you are thinking at trying your hand with food allergy, don't be too upset if you get nowhere. You're just stuck in the wrong bit of space-time continuum.

## From WM 's correspondence pages

- June. 1989: "Jon Garvey's recent article, in which he described the practice of euthanasia as 'legalised murder', is typical of his bigoted views on such matters. What right does he have to impose his own views on his patients? Dr Garvey is presumably too young to remember the situation before the 1987 Act, when citizens wishing to be delivered from life had to resort to the back-street practitioners, such as Exit, with all the indignity of drug overdoses and asphyxiation with plastic bags. Does he really wish to see a return to such practices? If he himself is unwilling to perform the treatment, it is his duty to refer the patient to another practitioner who will, yours etc."
- June, 1999: "Jon Garvey's recent article, in which he described the practice of euthanasia at a relative's request as 'legalised murder', is typical of his bigoted views on such matters. What right does he have to impose his own views on his patients? Dr Garvey is presumably too young to remember the situation before the 1997 Act, when relatives of a patient too ill or confused to make up his own mind on selfdeliverance were forced to resort to deception and secrecy to end his life. This, on top of the strains already imposed on them from caring for elderly relatives caused untold suffering. Does he really wish to see a return to such practices? If he himself is unwilling to perform the treatment, it is his duty to refer the patient to another practitioner who will, yours etc.
- June 2009: "Jon Garvey's recent article, in which he described the practice of euthanasia for the physically or mentally handicapped as 'legalised murder', is typical of his bigoted views on such matters. He says he has never met a handicapped person who wished their life to be terminated, but he has forgotten the grief and pain, not to mention the financial burden, imposed on relatives who have to watch their loved ones' suffering, and the useless, unproductive lives they lead. One must remember that in all these cases, had the handicap been detected, the mother would have had grounds for abortion under the Abortion Act of 1967. All the 2007 Act does is to make medical practice more consistent with the spirit of the original Act. If he himself is unwilling to perform the treatment. . ."