Who Owns Diseases?

Source: No More Fake News

by <u>Jon Rappoport</u> July 24, 2018

—All right, look, here's what we'll do. We'll take a few general symptoms like fatigue, fever, and swelling, and we'll invent one new disease label that covers them. We'll say this is a specific new disease and we're looking for the cause. Of course, there is no single cause because this isn't a single disease. It's a vague generality. But since we control the disease label, the name, we can convince everyone that this is a specific and real disease. It's a total con, but we can sell it—

Over the years, my readers have seen how I attack disease labels and disorder labels; how I expose them as fictions.

Let me show you an example of the disease label game. The citation is: Blackman, JA. MD, MPH; Gurka, MJ, PhD, "Developmental and Behavioral Comorbidities of Asthma in Children", Journal of Developmental & Behavioral Pediatrics, 28(2):92-99, April 2007:

"Children with asthma have higher rates of attention-deficit/hyperactivity disorder; diagnoses of depression, behavioral disorders, learning disabilities; and missed school days (all p < .0001). The more severe the asthma is, the higher the rates are of these problems."

Let's start with asthma. We know that many cases of lung-airway obstruction are called asthma. Try to find a single known cause for asthma. You can't. The many instances of airway obstruction can have many different causes (e.g.,

allergies to different environmental substances). Therefore, "asthma" has never been proved to be one unique condition.

In the citation above, the researchers state that asthma in children is associated with higher rates of ADHD, depression, behavioral and learning disorders. But these conditions, too, don't have a single proven cause. Try to find one.

Go to the DSM, the Diagnostic and Statistical Manual of Mental Disorders, and look for a lab test that would confirm a diagnosis of any of these conditions (ADHD, depression, etc.)—you won't find one. No blood test, no urine test, no brain scan, no genetic assay.

What are we looking at here? We're looking at attempts to define, label, and own disorders and diseases which have never been proven to be singular and specific.

While treating, say, asthma with a drug might bring relief (along with adverse effects), long-term treatment that gets to the root cause and creates a cure—well, that's never going to happen unless the unique individual with the problem is addressed—rather than invoking generalities.

Modern medicine floats disease labels that are generalities, as if they were specific. Often, they're not.

Here's the rule: IF YOU CAN'T FIND A SINGLE CAUSE OF A DISEASE CONDITION, YOU HAVE NO RIGHT TO CALL IT A SPECIFIC DISEASE CONDITION IN THE FIRST PLACE.

IT MAY WELL BE A NUMBER OF DIFFERENT CONDITIONS COMING FROM A NUMBER OF DIFFERENT CAUSES.

FOR LONG-TERM RESULTS, WORK WITH THE INDIVIDUAL PATIENT, NOT THE GROUP.

"Children with asthma tend to have higher rates of depression." The first condition—asthma—for which a single cause has not been found, leads to the higher rate of a second condition—depression—for which a single cause has not been found.

Of what possible use is such gibberish? It's useful in marketing and selling gigantic amounts of drugs.