
This is an unusual book for many reasons. First and foremost, Chris Hedges and Joe Sacco present an in-depth picture of the economic and social decay in parts of the US, through detailed discussions of the exploitations of American capitalism. Second, there are microcosmic portrayals of the effects of these problems on people living in these areas, along with the broader pictures of how corporate greed and avarice have laid waste to the land, the cities and the people living there. And third, the human tragedies are presented through moving, personal stories and comic-book cartoon portrayals that bring much more life to them than their poignant words alone could do.

All of the human and environmental tragedies portrayed in diverse geographic locations are heartbreaking: The Native Americans on the Pine Ridge reservation in South Dakota; the human residue of urban decay in Camden New Jersey; the environmental rape of several centuries of coal mining and exploitation of miners in West Virginia; and the modern slavery of Latin American migrant farm workers in Immokalee, Florida.

The personal stories of the suffering of people in each of these situations raises serious questions about the inhumanity of governmental and corporate authorities whose obvious focus is on exploiting the human and natural resources, ignoring the welfare and health of the people and the land.

Surprisingly, Hedges and Sacco’s book is not just a sounding of alarms and grieving over tragedies. They round out this outstanding book on a note of hope, pointing out that people will tolerate oppression just for so long before they insist on healing changes. The Occupy Movement is taken as a model for how this can and is coming about.

Anyone interested in healing the modern social and environmental tragedies will find this book inspiring.

Review by Daniel J. Benor, MD, ABIHM
IJHC Editor-in-Chief
This is a fascinating book about pattern recognition – how we perceive what we expect to perceive but also misperceive or may even be blind to that which we do not expect to see. We tend to believe that what we see is what is out there in the world to be seen. This belief is often untrue.

The book explores what has become one of the best known illusions. If you are not familiar with this experiment, click here to experience it. The instructions are to count how many times the players wearing white pass the basketball. Don’t read further before doing this!

About half the people viewing this video do not see the gorilla. It is as yet unclear what the differences are between those who do and do not see this glaring intrusion.

What made the gorilla invisible? This error of perception results from a lack of attention to an unexpected object, so it goes by the scientific name “inattentional blindness.” This name distinguishes it from forms of blindness resulting from a damaged visual system; here, people can’t see the gorilla, but not because of a problem with their eyes. When people devote their attention to a particular area or aspect of their visual world, they tend not to notice unexpected objects, even when those unexpected objects are salient, potentially important, and appear right where they are looking. In other words, the subjects were concentrating so hard on counting the passes that they were “blind” to the gorilla right in front of their eyes. (p. 6-7)

What is in some ways even more important than a failure to notice changes is the mistaken belief that we should notice them. Daniel Levin cheekily named this misbelief change blindness, because people are blind to the extent of their own change blindness… Most people firmly believe that they will notice unexpected changes, when in fact almost nobody does. (p. 55)

Such experiences of selective perception and selective interpretations of our perceptions are very frequent in our lives. They are usually totally outside of our conscious awareness.

I was myself introduced in medical school to issues of these sorts, in a lecture on making the correct diagnosis. In the middle of the lecture, a man with a cast on his leg wandered into through the front door of the lecture hall. He paused and glanced up at the audience of 92 students, appearing disoriented. He then walked over to the lecturer and asked whether this was the discussion on fracture aftercare. The lecturer politely indicated that the room this man wanted was further on down the hall. The man apologized for intruding and walked out the door on the other side of the room, in the direction indicated.

The lecturer shrugged, paused and shuffled his notes as he picked up the mental threads of his presentation, and continued with his lecture. About ten minutes later, he set aside his lecture notes and invited our class to describe the man who had walked across the room in front of us. We were astounded to find that we disagreed on which leg had the cast; the color of the man’s hair, clothes and shoes; and numerous other details of what we had each seen!
Our misbeliefs in the accuracy of perceptions have broad implications in our lives. They may get us into serious troubles. Take, for instance, our western ways of dealing with health issues:

Patients trust doctors, perhaps more than they should, and that trust reinforces the confidence that doctors already have. As Keating puts it, “When people go to the doctor, they often believe that the doctor has an ability to make the right decisions for them. That goes beyond the scientific reality. They trust your decision-making more than their own. That’s a problem because it encourages doctors to not be honest about what they know and what they don’t know. It builds your ego to have people think that you know.”

In medicine, the confidence cycle is self-perpetuating. Doctors learn to speak with confidence as part of their training process (of course, there may also be a tendency for inherently confident people to become doctors). Then patients, mistaking confidence for competence, treat doctors more as priests with divine insight than as people who might not know as much as they profess to. This adulation in turn reinforces the behavior of doctors, leading them to be more confident. The danger comes when confidence gets too far ahead of knowledge and ability. [Jim Keating, MD, runs a diagnostic center for clarifying difficult medical problems at the St. Louis Children’s Hospital.] As Keating notes, “Equanimity is something we should aspire to, but we ought to get there by building skills, and it should always have a ‘not sure’ component to it so you can continue to learn. There’s still a lot of room for humility in our profession.” Doctors have to be able to listen to the evidence, admit when they don’t know, and learn from their patients. Not all of them are able to overcome their overconfidence. (p. 104-5)

Pattern recognition is an important but limited aspect in the full spectrum of intuition, which also includes psychic awarenesses and participation in the collective consciousness. See more on this in an editorial in IJHC on Intuition (Benor, 2002).

This engaging and informative book is highly recommended for anyone interested in how we perceive and interact with our world.


Review by Daniel J. Benor, MD, ABIHM
IJHC Editor-in-Chief


Larry Burk is a most unusual radiologist. He has developed a deep interest in wholistic healing and has made this a major focus in his academic career. This book chronicles his career path from imaging the physical body with CAT scans and MRI for diagnosing disease processes, to teaching people how to mentally image self-healing and to learn other methods for self-assessment and self-cure.

At the same time that he traces his career choices and experiences, Burk provides a scan of another sort: a broad spectrum of Complementary/Alternative Therapy practices and their benefits. This is a very engaging book. Through his personal lessons in using these methods for dealing with his own physical and
psychological problems, and his experiences in teaching them to patients and colleagues with their problems, we are given windows of awareness and understanding into the interconnectedness of body, emotions, mind, relationships and spirit.

Several of Burk’s achievements deserve particular mention. He was able to introduce imagery and other techniques in a conventional medical center through varieties of seminars and conferences. While the staff initially responded with skepticism and doubts, in time, the positive responses in using these approaches for dealing with their own problems and those of their patients led them to accept and value their benefits. His openness to personal spiritual awareness and his ability to include this aspect of healing in his practice and teaching invites a marked deepening of the benefits of wholistic healing.

You will probably find it helpful to use the index of this book if you come back to it for references or to refresh your memory about the various techniques, because in many cases neither the chapter names nor the page headers will guide you to your desired focus.

Review by Daniel J. Benor, MD, ABIHM
IJHC Editor-in-Chief


This is an outstanding, methodical review of the deceptive practices of pharmaceutical companies, researchers, doctors, journal publishers and regulatory agencies – many of whom grossly inflate and distort the research evidence for the benefits of medications.

Ben Goldacre carefully explains research procedures and how they are intended to guide caregivers and careseekers to the best possible treatments for their problems. He then methodically demonstrates how all of those who are assumed to be advising the public and protecting us from harm fail miserably in practice.

- Drug companies, researchers and journals publish research studies with positive results but have a strong history of withholding from publication studies with negative results.
- Many doctors, researchers, hospitals, medical schools, journals and media receive substantial financial support from pharmaceutical companies – which is clearly a conflict of interest when it comes to protecting the public from information that is unfavorable to the drug companies.
- Withholding negative results of research may lead to serious harm when drugs are given that not only are ineffective but that may also have harmful of lethal effects.
- Drugs are allowed to be prescribed for clinical uses which have not been approved by regulatory authorities, much less examined in research.

Goldacre suggests many fixes for these problems. Most prominent among these is to set stricter research reporting guidelines and to enforce them. Sadly, drug companies, regulatory agencies and doctors have claimed that such guidelines are in place and are working well. Goldacre amply demonstrates that this is untrue. Transparency and public auditing are essential to fixing these dangerous problems. This is difficult to achieve because of the vast financial resources of the drug companies (along with the complicit medical establishment and regulatory agencies) that are systematically working to continue the current dangerous practices.
Sadly, in his discussions of how people come to believe things that are not true, Goldacre uses the example of precognition. He disparages any belief in the ability to foretell the future, citing a single positive study of Daryl Bem with several replications that showed no positive findings. From this he concludes that there is no evidence to support claims of foreknowledge. In this instance, Goldacre himself demonstrates that which he decries: a selective presentation of evidence to support one’s claims. There is a substantial and robust body of parapsychology literature, including a meta-analysis with very robust results (p < 10 x 10^{-24} = odds against chance of 10 million billion billion to 1), confirming that people are able to predict the future accurately (Honorton & Ferrari, 1989).

This criticism aside, I cannot recommend this book highly enough for anyone seeking to understand how conventional medicine has become the third leading cause of death in the world today (US Food and Drug Administration website).

References:
US Food and Drug Administration.

Review by Daniel J. Benor, MD, ABIHM
IJHC Editor-in-Chief


*Cultivating Healthy Relationships* offers an interesting series of meanderings and explorations through diverse wholistic healing discussions. Many interesting ideas are proposed for understanding and appreciating the body (physical and energetic)-emotions-mind-relationships-spirit connections.

In reading this book, I am reminded of when I first struggled to learn the game of bridge. It was difficult to understand bidding when I had not yet understood the values of suits and the hints that are implied in responses of partners to previous bids. Suzann Panek Robins has much of value to share, and brings to the table a wide variety of sources to explain aspects of the holistic spectrum. Her basic focus is Freudian and Jungian, but her wide-ranging explorations cover numerous other psychological systems of psychology – both from conventional and complementary/alternative sources.

This rich feast will be best appreciated by those who have a fairly good basic understanding of what I call the wholistic spectrum of healing.

Review by Daniel J. Benor, MD, ABIHM
IJHC Editor-in-Chief
Homeopathic Educational Services 2012. 208 pp. 4 ½ pp Notes and References  $45

Janita Venema, a homeopath, has developed a brilliant theory from personal and clinical observations: children, through their emotions and behaviors, reflect their parents’ life issues. When children are upset or misbehave, parents can learn what their own issues are from observing and interpreting what is going on in their children and in the parents’ relationships with the children. By clearing their own issues, the parents then release the child from the misbehaviors that are inviting the parents – through the collective consciousness – to clear the parental issues.

For example, eight year-old Janice is afraid to go to school. Upon reflection, her mother realizes that she herself is struggling with issues in her own life about moving out in the world. When her mother resolved her own issues, Janice’s school phobia resolved.

While such an example may appear over-simplified, Venema’s numerous examples of similar experiences combine to produce convincing evidence that this approach really works. She has come to call this the *PresentChild® Method.*

This is an excellent book for anyone wanting to learn about the method and the many ways in which it can be helpful to children, parents and family units.

See also Janita Venema’s helpful article in this issue of IJHC for more details about her method.

Review by Daniel J. Benor, MD, ABIHM
IJHC Editor-in-Chief