

FLAWS IN MEDICAL SYSTEM

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In the cited article, I will show that the U.S. medical system has a large number of components to prevent medical inventions, dispel existing cures, and perpetuate the man-made-incurable era.

6.1 Introduction

We will show how the U.S. political system has influenced modern medicine and created a medical landscape that is unable to cure diseases but spread the incurable concept in the world. It impacts medicine through health care laws, tax law, medial research funding policies, rules and regulations for federal research agencies, national patent policies on medical inventions, and enforcement actions though FDA.

Many problems such as the unworkable practicing model and evidence-based approach are products of the political system. They are discussed here.

While we can show the nearly most medical wonders are created by people, often patients, outside of medical processions, the U.S. government has made an unwise assumption that all challenged medical problems would be addressed by established research institutions. The U.S. lawmakers do not understand that medical basic research has run far and far away from practicing skills. Most new findings in scaring, regenerating organs, non-scar healing, stem cell repairing function, and immune mechanisms have not been used in real world to treat patients.

Most medical cures the world is waiting do not require additional basic findings, but smart or surprising ways to treatments. This is not what established scientists can deliver by conducting controlled trials. If the U.S. has not destroyed its patent system so profoundly in the last half a century, most diseases might have been removed from the long incurable list. Now, most medical inventions are made on synthetic chemicals.

We will show how the political system has strangled the modern medicine.

6.2 Political System's Role

The U.S. political system still contains a great deal of common-law vestiges. One key feature of a common law system is that everything is handled by established channels and processes. It is assumed that such a system, which is designed well, is able to address all societal needs and human needs. Naturally, such a legal system is built without sufficient flexibility for accommodating changes, future needs, and improvements.

Under the heavy influences of common law thinking, the U.S. has built and developed its medical landscape in great sophistication.

When the medical landscape is built with loopholes and incentive to generate injurious drugs, genetically modified foods, and harmful products, it cannot do anything to fix population health problems. After the genetically modified corn and soybean have led to the current health crisis, very little can be done to stop it. When injuries are caused by drugs and other products, the sole remedy is to sue for damages. For injuries caused by genetically modified foods, no remedy can be found. Thus, naturally, the U.S. has become the largest nation for consuming genetically modified foods despite the bad population health status. It has reached to the point that even the richest people cannot avoid genetically modified foods. It is fair to say that the body compositions of each resident in the U.S. are influenced by genetically modified foods.

The U.S. political system does not support any treatment methods for curing unrealized diseases such as stroke. None understand that changes in physiological properties take place many years before the disease can be diagnosed. We believe that people have successfully prevented stroke tens of millions of times, and many people have successfully eliminated stroke risk without even knowing it. Cancer might have been cured millions of times (many people even do not know it). For many people, it can be as simple as running an hour a day, making a timely lifestyle adjustment, making a good food plan change, developing a little special skill.... All wonder cures are disregarded because they do no work like drugs. It is unfortunate that the medicine framework even prevents people from acquiring knowledge that could enable them to cure diseases. By enacting laws and policies, the political system, discredits true cures and wonder medicines, promotes junk medicine as sole legal medicine, and provides incentive for developing only fast fixes, pain killers, sedative pills and comfort medicine.

When modern medicine becomes a trade driven by money, it naturally becomes one without cures. Hidden stroke risk is real and can be eliminated, but there is no incentive for doing it. There are no disease signs, no diagnostic methods, and no drugs for addressing the problem. No body in the world has an incentive to support such a research program. Both the doctor visit model and the emergency room treatment model are not suitable for preventing stroke and eliminating stroke risk. So, the political system places their names in a blowing machine for statistical lottery.

The role of the U.S. political system on the health care landscape is well reflected in the story of President Ronald Reagan. When Reagan was elected in 1980, the nation was at a crossroads in health-care policy. An aging population was in need of more health services, while the government, faced with limited resources, had been moving toward rationing services. Costs must be held down in the short run; and promoting increased competition provided a hope for cost control. President Reagan had an opportunity to reshape the federal government and changed the health care landscape, but did nothing to fix any of the real problems in health care. He probably did not even see the problems of unworkable medical landscape. It was reported that the President wanted to find cure for cancer but failed. He did not understand that cures were everywhere. Even if hundreds of cancer cures were found, none could be used in practice.

After President Reagan left power, he was diagnosed with Alzheimer's disease. Stem cells repairing function would be viewed by medical experts as the most viable mechanism for replacing brain cells that have changed functions. Using the tissue stem cells is very difficult, and so one option is to use embryonic stem-cells to repair brain cells. However, embryonic stem-cell research was banned. The president died without

cure. After her husband diagnosis and death, Mrs. Nancy Reagan became a stem-cell research advocate, urging Congress and President George W. Bush to support federal funding for embryonic stem-cell research. However, President Bush opposed. No embryonic stem-cells research could be done until 2009, when President Barack Obama lifted restrictions on such a research. This story reveals the president alone has power to change the health care landscape.

Even in 1980s, anyone could have easily mapped out the contribution of Medicare and Medicaid to the future bankruptcy of the U.S. Subsequently, the nation has been run by five Presidents: George H. Bush, Bill Clinton, George W. Bush, Barack Obama, and now Donald Trump. None of them and their staff has seen real problems of federal health policies and the decisive roles of the political system in precluding cures. If any of the presidents had been advised of the problems in FDA drug approach standard, medical research models, peer review practices, the patent system, he would have made changes by using his executive power. Their staffs tended to be concerned with horizontal fairness, societal order, and smooth operation of the federal business. They all tried to maintain status quo. They could not see the importance of finding cures for the mankind relative to all trivial issues the system might need to address. They could not see the huge prices of hundreds of millions of premature deaths, the great pains and suffering that all people must endure in their final days of lives, and the massive spending of GDP in managing "incurable" diseases. The nation remains a nation without cures, the world is still a place filled with human miseries, and the U.S. still on the fast track to its pending bankruptcy. Nothing can change those courses unless the health industry can deliver real cures.

The political system creates this non-performing health landscape by following mechanisms:

(a) Federal government decides what is covered by the Medicare programs and Medicaid programs. It promotes only the western medicine and rejects other medical arts.

(b) Its tax policy determines what can be characterized as medical treatments for medical expense reduction in the U.S. tax law.

(c) Federal government, through publishing policies by its agencies such as FDA and NIH, determining junk medicine and legitimate medicine by a 180 degrees inversion. The scientific validity of its evaluation method is based on chemical reactor, machines, or physical objects in a binary system. So called scientific validity is the worst claim next to dueling and ordeal used in the prior-common time.

(d) By using criminal law and import control law, the federal government outlaws everything that is not approved by the U.S. It not only deprives its own citizens of right to seek cure, but jail its citizens for bringing cures containing banned ingredients overseas for personal medical use.

(e) By using a narrow patent system, the patent system only rewards drugs that are born in laboratories, but does not promote any cures that can be found by citizens outside laboratories or cures that exist on human minds. Its inventor-hostile patent system has long ago ended the vitality for national future prosperity. The recent patent law reform is a final fatal thrust to the backbone of U.S. technologies. Extremely few of the people among the entire population even want to bother U.S. patent.

(f) The U.S. provides no tax incentive to true health-promoting programs, non-con-

ventional healing methods, and healthy-promoting products and services even though those measures can cure their diseases. It favors fast fixes over real cures.

(g) Through influences of its medical regulations, insurance regulations, research standards, funding regulation, etc., the federal government has promoted its out-of-date flawed health care standards to all states. Now, all federal health care standards are incorporated in state laws, state health care regulations, state medical malpractice laws, state insurance policies, and state hospital and doctor regulations.

(h) Its policy is to further trade protection with no consideration for the humanity. Even if a person has a wonder cure to save tens of millions of lives a year, it would get nowhere. Even if a cure has been discovered in a million times, it will get no attention while people are still dying.

(i) Federal health care policies have been incorporated in all trade organizations to achieve the end result of making the world without cure. The licensing regulations and hospital regulations are all used to further monopoly. Finding true cures and getting patients out of drugs are no part of such regulations.

(j) The medical landscape has incidentally developed a perfect mechanisms to ignore, discredit, and reject miracle cures that have appeared anywhere in the world. No research institute, no federal agency, and no established channel exist to discover, verify, test, or introduce wonder cures that have been reported anywhere. Dr. Wu has contacted NIH (various institutes) concerning various matters such as high blood pressure, stress management, Qigong in various times, but always get boilerplate replies or no response. Some responses reflect federal government policy that prohibits its agencies from commenting or reviewing any works from outside sources. Similarly, Dr. Wu also contacted most of leading medical schools concerning a unified theory on stress and chronic diseases. They never responded or pretended never see his work. In this medical landscape, individual scholars and medical institutes are interested in anything but cures.

Dr. Ke Li created 28 herbal formulations and improved many existing ones. Medical institutes were able to repeat miraculous results of his heart-saving herbal formulations. Diseases treated by his methods include terminal cancer, heart failure, multiple organ failure, stroke recoveries, and various rare diseases. His success rate in treating emergency patients was very high. Due to limits set by the political system, no body has tried to repeat the result. One problem is that it is impossible for western professionals to understand the healing methods because they are used to widgets, statistical analysis, and large trials and do not know what to do without any of those junk science. To find cure, the political system needs to establish different staff to study such art.

After the stories of Dr. Ke Li were published in 2002, we see that no one in the U.S. medical community has paid much attention to the large number of miraculous cases and rethink the validity of labeling chronic diseases as incurable diseases. Such stories could challenge its incurable-disease labeling practices. After case records are gone, all patients die, and the memory of all people knowing all miracles fades, it would be convenient to make the same statement -- those successful cases could not be validated. When the medical landscape lacks even one single mechanism to investigate cures that have appeared elsewhere, it lacks credibility as a health care giver. Incurable is just a convenient legal label for putting Americans on the tracks of health destruction.

The medical community clearly lacks interest in finding cure. Nearly half of the U.S. population is sick with growing sick population while it still legally labels a vast ma-

majority of diseases as incurable. Yet, it does nothing to even just to repeat what was found long ago.

(k) The media plays a similar role in making the world without cure. The U.S. government does not have its own media. Journalists are trained in art and rarely try to understand research facts independently. Thus, they follow the rest world in selecting subjects. Publishers rely upon financial supports from products sponsors and patronage of their audience. They do not accept any article which affects the interest of their sponsors and audience. Their financial models determine that they will not do anything to expose the failure of national health and world health. We saw a large number of instances where the media played a role in initiating or promoting population health crisis. In the debate in the risks of using cellular phones or drugs, leading media keep publishing or republishing the same article to make sure that the conflicting voice will be suppressed. What they do is to achieve a result of putting millions of people in a future health peril and destroy national economy.

(l) Restraining effects of the political system on health care is well reflected in recent battles on health care reform. Virtually, everyone wants to have affordable and good health care. However, the biggest differences between the two parties are how to manage costs. It is like a flying shit with a huge momentum for unavoidable destruction. None of the two parties have seen the massive problems of the U.S. medical landscape. It is a medical landscape without hope. None of them see that all problems arise from the fact that modern medicine cannot cure chronic diseases and its research methodologies promote disease agents. Doctors are discouraged or even prohibited from doing anything that would cure diseases. The democrats use personal mandate to spread health care costs to the young and healthy persons, while the republic wants to limit the spending by reducing coverage. None of them could solve the health care financial problems.

When the political system chooses to make the world have no cure, it harms everyone including those who made such a choice. Subject to few exceptions, past presidents, current and past U.S. lawmakers, and retired and serving U.S. judges will all live with incurable diseases.

6.3 The World Makes Diseases

All people live in a world without cure but constant attacks of disease agents. Such a world has been created as a result of political choices made in more than a thousand years ago. We will show how the common law vestiges have shaped this health landscape in a profound way. We will show the U.S. political system carrying all common law vestiges is incapable of protecting its citizens from repeated health crises and provide strongest incentives for making quick fixes.

The U.S. is unable to control disease agents: Chinese Medicine regards emotion, toxins, and environment factors as the primary disease agents in the primitive society. We expand this concept to cover seven classes of disease agents: (1) emotions of all sorts (including stress), (2) disease-causing microorganisms, (3) all synthetic compounds including food additives, food contamination, industrial materials, and industrial chemicals, (4) heavy metals and harmful substances including harmful natural compounds in food, (5) harmful waves, radiation, etc., (6) ambient factors such as temperature, wind,

humidity, etc., and (7) imbalanced foods including all known nutrition imbalances and imbalances that have not found. Modified human genetics is important but not a variable for any person. All chronic diseases with few exceptions are caused by one or more disease agents in one of more of the seven classes of disease agents.

Weather has become the biggest disease agent in the U.S. Due to environmental impacts and changed climate, the weather patterns in the U.S. like those in other industrialized nations have become worse and worse. In the early time, weather had four distinctive seasons with a smooth transition from one to another. That weather pattern is one from which humans beings came from. Now, weather in industrial nations has lost smooth transitional characteristics. In Washington DC area, for example, daily temperature can differ by more than 20° F in very high frequency, and people often experience more than 30° F daily temperature differences. We see only a small number of days which are typical days of springs and falls. This poor weather pattern torments residents with extreme cold and extreme hot temperatures without giving human beings adaptive transitional times. Extreme hotness, extreme coldness, and a number of illnesses caused by extreme weather are responsible for a large number of consequential and indirect deaths.

Citizens in the U.S. are routinely exposed to the highest amount of disease agents: high job stress, synthetic chemicals/compounds, heavy metals, harmful waves and radiation, adverse ambient factors, imbalanced foods, highest genetically modified foods. Job stress is the highest in the U.S. Synthetic compounds for entering human bodies exist everywhere. In Asian nations, people have deep-seated aversion to chemical additives; Japan bans many food additives that are routinely found in American popular foods. On October 5, 2009, Japan's Ministry of Health notified local governments its plan to delete over 125 food additives from its list of 418 approved additives. Heavy metals are due to past pollution and inability to clean up. Imbalanced food like omega-6s to omega-3s ratio is a man-made national health crisis. Exposure to waves in cell phone use is another health crisis in its development stage. The extreme high levels exposure to disease agents are caused by the evidence-based food/drug approval policies and the flawed FDA approval methods which always approach poisoning additives and chemical compounds. Strongly enough, the U.S. cannot learn from the massive number of personal injury cases reported in court opinions and indisputable fact of the colossal failure of the FDA mission.

We see a definite trend that each adult in the U.S. would suffer major diseases by multiple unity probabilities in his life time (it sounds scientifically improbable, but think that one probability space is for a disease). By the time a child becomes an adult, he will have at least one major disease. It is now already close enough. Next public health crises will come from genetically modified foods, increased pollution, excessive use of cell phones, prevalent use of drugs for central nerve system, and dangerous commercial products.

The trend has been obvious a long time ago. The number of people suffering vascular diseases, cancer, autoimmune diseases, mental diseases and all kinds of chronic diseases are rapidly climbing due to a flooding of genetically modified foods, dangerous products, increased environment pollutants, and increased social conflicts. A large number of signs are obvious: more people will suffer obesity and type II diabetes from using robots; and more young people will suffer depression, central nerve disorders, tinnitus, and relationship disorders from excessive use of cell phones. With all of those expected health crises and pending bankruptcy of U.S. health care system, the federal govern-

ment is incapable of doing anything to change. It is unable to pass even a decent labeling law and implement effective public education programs. Its people are educated by corporations that sponsor products.

When the population of the U.S. is under constant attacks of a large number of disease agents, it is impossible to achieve personal health goal by curing diseases. Even if we can provide cure for every disease, most people still cannot achieve personal health goal. Thus, we believe that empowering our readers with preventive knowledge is much more important than teaching them how to cure diseases. We have to resort to the idea of curing future diseases, which was known more than 1700 years ago.

In order to cure future diseases, we need to know how we get diseases. It is an irrefutable assumption that nearly all diseases are caused by disease agents in our living environment. The biggest disease agents are bad foods, pollutants, infectious agents, and emotion triggers. At the first blush, one could think that people can avoid disease agents by making personal choices. In an ancient society, that would be achieved easily. However, in this world and this time, most disease agents can easily get into our bodies through food chains, the atmosphere, public drink water, and an overwhelming number of things we cannot avoid. Even lifestyle factors and emotional factors (e.g. job stress) are in some way regulated by the legal system. Thus, it is impossible to avoid most disease agents by making personal health decisions.

The government appears to do everything it could to protect citizens from the attacks of diseases agents. Naturally, policies and regulations give us a false impression that exposure to government-regulated disease agents is safe. Most people mistakenly believe that government-approved products such as foods, drugs, devices, and products are safe. We will show that this is the biggest mistake, and that reliance upon government regulations is the biggest reason for endless public health crises. In our view, in order to achieve personal health, one must reject the notion that the government is capable of protecting citizen health.

The failure of the government lies in a large number of common-law concepts that were developed more than a thousand years ago. Common law concepts were adopted in laws, regulations, and legal processes in the U.S. without proof of their validity. We can prove that all of common law concepts are junk science. Thus, the U.S. is unable to formulate sound laws, policies and legal processes. When the health landscape is defined by flawed laws, regulations, and legal processes, such a health landscape is incapable of protecting citizens. Therefore, those who want to prevent injury need to understand the failure of the government regulations.

6.4 Unworkable Treatment Models

Most hospitals now use doctor treatment models: each patient is allocated with a brief time and the doctor examines the patient in the allocated time.

The online medical resource Medscape released a 2016 Physician Compensation Report for more than 19,200 doctors in 26 specialties. All the data in the report is self-reported. One of the subjects in the report is the time doctors spend with each patient. They spend less than 25 minutes on 87% patients, with 13-16 minutes being the most common times.

This time windows would not be enough to fix any mechanical devices such as an

automobile, a boiler/furnace, a TV set, an air conditioner, a computer, a plane mechanical problem, and even a leak in a gas pipe or water pipe in a typical house. We wonder how medical problems can be addressed in such short times. The 9-25 minutes windows are not enough to allow a doctor to understand the patient general conditions.

The formation of this laser-speed doctor visit model was heavily influenced by commercial incentives, the deceptive nature of human health problems, and medical malpractice law. First, doctors charging fees by minutes and hours, when an appointment is too long, the labor fees would increase. This may affect the patient ability to pay. Second, the most important factor is that health problems cannot be addressed for sure. In repairing a mechanical problem, an attempted fix can be evaluated by naked eyes and a failed attempt would be obvious. Thus, a car repairman must find the cause and fix the problem. If the task is to fix a pipe leak, the repairman must stop the leak. Whatever done short of fixing the leak will not discharge the repairman duty. The repairman cannot discharge his duty by merely relying upon averaged data, normal standards, or general guidelines for the same device model, similar devices, or other brands of devices.

In dealing with human health problems, it is entirely a different thing. Even though most health problems are MAGNITUDES more complex than any mechanical devices, and finding real cures for non-acute diseases would take days, months, and even decades, there is no need to actually cure the disease in one doctor appointment. Most health problems are not disabling conditions so that the patient can go home. Thus, it is naturally expected that the patient goes home and keeps visiting doctors for months or his remaining life.

The treating model is heavily influenced by common law thinking. We can see it if we compare the treatment model used in ancient China and the current models used in the world. The ancient treatment model does not allocate time. It would require doctors to spend whatever necessary for caring for the patient. This ancient model is most useful in curing complex and terminal diseases, as it was used by Chinese Doctor Dr. Ke Li in China. When a hospital could do nothing for a near-death patient, the hospital gave the patient to Dr. Li. Dr. Li collected information, checked life signs, prepared an herb formulation, cooked herb immediately, and fed the patient with an herb extract periodically. He kept checking patient vital signs, and adjusted the formulation if necessary. He stayed by the patient for many hours and even for days until the patient was out of danger. In his 46 years, he always did so to save nearly a hundred near-death patients and cured tens of thousands chronic diseases. Under the modern doctor visit model, he would have saved zero of them.

This unworkable treating model has a lot to do with medical malpractice law. Under the influences of common law, each health property and each diagnostic criterion can be classified into two statuses such as normal and abnormal just like human behaviors expected in society. By such oversimplification, the legal system and the federal medical policy essentially set lowest standards for the duty of care in medical services. Such lowest standard of care gradually replaces higher standards of care. Doctors can meet such lowest standards of care in a time window that would be insufficient for checking a gas pipe. For virtually any health problem, a doctor needs to consider a few possible medical conditions. For each condition, the doctor needs to make a few inquiries according to medical practicing guidelines. While this model makes doctor tasks simpler, it could prevent the doctor from making more extensive diagnosis and inquiries into real problems that might less obvious. A doctor could be liable for doing more and could be punished for trying his best to revive a patient. Letting the patient die would be

safer than making a last try. This is a main reason for precluding discovering “future diseases” that would be found. On the other hands, the model causes hospitals to spend too much time for going through tests and inquires that are largely useless. The insufficient examination and wasteful tests are natural responses to bad malpractice law in the U.S. When doctors are under constant threat of lawsuit and disciplinary actions, patient dumping by using incurable labels are natural responses. This patient dumping practice eventually affects everyone including doctors, politicians, and all citizens.

It would be impossible for a doctor to do creative works. If patient condition is an acute medical problem such as a cold and infection, a quick fix can be provided. This is how modern medicine wins trust from patients. If the problem is more complex, the doctor may end the appointment with “let try the prescription” and with a follow-up. Within such a short time window, it is impossible to find a better and more definite treatment, the doctor actually makes a mini-drug trial. So, the drug trail that has won the drug approval does not mean anything. If the patient has a more complex or less obvious problem, there is no real chance for finding it. Most complex diseases, hidden risks such as stroke risk, and early stage cancer cannot be caught in such a short time window.

Such a doctor visit model is not designed to address medical problems at the earliest times, and it is largely useless for treating chronic diseases. This is precisely why people are added to the database of patients who are on life-time medication. For nearly a hundred million hypertension people, such doctor appointments provide no chance to cure. True cure is a challenging battle. For those who have succeeded know that it would take days to months to find cause problems and take a much longer time to fix them. In such a time window, what a doctor could do is prescribing drugs for controlling blood pressures. Using prescription drugs cannot cure the disease, but is a trade between patient present safety and future wellness. For other diseases such as chronic kidney failure, obesity, tinnitus and heart diseases, all doctors could do is to manage symptoms. This practice inevitably causes patients to miss time for early treatment and suffer side-effects of prescription drugs. This is why the national diseased population is rapidly rising.

Successful treatments of chronic and complex diseases such as stroke risk require great deals of time. Just designing exercise programs for an individual patient may require days of works. In the current medical landscape, there are no such services. Provisioning consulting services by doctors would require prohibitory time charges that few could afford. However, it is financially more sensible because such a program could help patients cure diseases and recover from the disabling disease. The treatment model does not allow for balancing short-term interest with long-term interest. When both patients and doctors can see only short-term interests, there is no hope for fixing health crisis. The system should be changed to provide incentives for curing diseases.

6.5 Wrong Evidence-Based Medicine

We see the emergence of evidence-based medicine (EBM) which imitates evidence-based concepts that are used in other fields. This sounds to be the best approach if evidence reliability is guaranteed.

This idea is again from common law thinking. In common law, a common practice is ignoring anything that cannot be provided by evidence. In common law court, judges

routinely assume that lack of evidence is same as non-existence of a matter proved by the evidence. This approach reflects the absolute power of the rulers. The rulers, kings of Britain, did not really care for outcomes in civil and criminal cases. Their paramount interest was not justice but an appearance of justice. What is important to the rulers is the least burden to the rulers. In dealing with business activities where uncertainty can be resolved at the costs of justice, this practice seems to be a reasonable approach. Influenced by common law courts, this practice is used as a golden standard in the U.S.

This evidence-based approach has harmed U.S. profoundly. If a nation ignores anything that could not be approved, it must come up with the worst policies for the nation because a large number of things cannot be proved by evidence. In economy, many phenomena cannot be proved, but their existence must be presumed to exist. Stealing, unlawful commercial activities, embezzlement, and virtually all criminal activities can never be accurately assessed in evidence. The government may catch only a fraction of them. If the government makes laws and regulations according to caught criminals as guidance, it will enact laws and regulations that cannot advance social interest. In economy, when the government ignores economic activities that are hidden or unverifiable, its economic policies formulated by ignoring their existence will not be able to optimize the economic system. In enacting national laws and policies, the sound approach is to use wisdom and exercise sound judgment.

The wide abuse of evidence-based approach has ruined the U.S. economy, the patent system, the immigration system, and now the Medicare system. For example, when the government fails to see the overwhelming mechanisms for stealing Medicare funds, it will not create effective measures for preventing stealing and fraud. A large number of fraud prosecution cases reveal how bad the Medicare system was designed, and the medical budget would be insufficient. When the government can see how patent owners abuse patent but fail to see how patent thieves steal inventions, it will enact laws to destroy the patent system. If politicians are obsessed to an evidence-based approach, they cannot run the nation to achieve the highest productivity. It is falling behind by a double-digit margin in production output, and now is rapidly falling behind in technologies advancement. This approach has caused serious problems in many other fields.

Now this approach is used in health care, and it inevitably puts national health in peril. It would be equivalent to a general rule that it is safe to consume or do anything that has not been proved to be harmful. If you spend time to study the large number of personal injury cases in court reports, you might be shocked by your own findings. The national health crisis is only one thing. A bigger national crisis is the rapid reduction of sperm counts in American males. If the trend is not stopped and reversed, the nation will lose population. No one can prove what causes the rapid reduction of sperm counts.

When the evidence based approach is used in health care, it means that health care givers use the best evidence in making health care decisions for individual patients. The approach stresses using clinical data and the best available research information in making health care decisions. Health decisions will directly affect people's wellness including their life and deaths. It is obvious that any mistakes in evidence can bring catastrophic impacts to individuals. The validity of the approach depends upon the assumption that evidence can be acquired reliably, is accurate in substance, and is complete in application. We will show that none of them are possibly true.

First, evidence is often unreliable. All personal diagnostic data is often unreliable due to inherent limitations. All objective references are simply wrong and meaningless. Currently, medical diagnostic methods are unable to correctly detect most chronic dis-

eases because they are always too late. A big mistake is to use the approach in diagnosis. In medicine, objective evidence must be the kind of evidence that can be found in chemical process, mechanical property and body structure. Thus, by extending this old thinking, it is natural to use chemical, functional and structural data (such as ECG, EKG, CT, and NMI). All of the three classes of evidence can prove existence of diseases, but most of them are too late. Chemical analysis provides one possible value from a large number of possible values. When chemical evidence, functional evidence and structural evidence are established, it is difficult to treat the disease. Besides, none of those types of evidence can reveal root causes that can be used to cure diseases. At least, it is a tough battle to cure the disease. Moreover, diagnostic data reliability would also depend upon technological development stage.

What is wrong is that modern medicine has extended simple approach in the law to the human life which is magnitudes more complex than all known legal phenomena. We assume that legal concepts do not have to be scientifically valid, and no body has ever proved their validity. All of them are wrong scientifically. Using evidence-based approach is worse than using the classical physical approach to interpreting a quantum mechanic phenomenon. The real root causes of diseases are changes in physiological properties in the body or relevant tissues. A large number of factors can cause a disease in random, unpredictable ways with different contributions. Thus, when modern medicine uses such a wrong approach, it can never find root cause factors and cannot cure diseases. Its two hundred years records speak powerfully about this colossal failure.

Moreover, relying upon any unreliable evidence would easily harm patients. Sometimes, delays in diagnosis are equivalent to killing them. Most evidence is also incorrect, flawed, or simply wrong. As influences of common law, nearly all researches are done using wrong research models with a battery of flaws. Population data is routinely used to individuals, health conclusions drawn from averaged data have routinely been applied to individuals; general conclusions cross a large number of variables with both negative and positive effects are either wrong or misleading; statistic analyses using abstract concepts are deemed to be wrong; and research findings based upon chemical reactor models are meaningless to human beings. We can challenge any findings of studies involving human subjects. This is not an incidental small problem. The medical research in the past has been based upon a flawed foundation. When the foundation must be pulled out and replaced, the entire building of modern medicine will collapse with only some basic facts surviving. We believe that only those studies without involving human subjects may survive our challenges.

Finally, evidence in health care can never be complete. Thus, application of evidence-based approach must be improper. Up to this point, very little about human health is really understood. It is improper to use such an assumption that was for the convenience of ancient rulers. Ancient rulers have paramount interests in exercising their absolute power. This interest no longer exists in a democratic society and modern society has no need to continue using such an obsolete concept. Instead, we need to assume that a large number of things that could not be proved may produce adverse and even deadly impacts to individuals. We need to use any possible indications. For example, if a patient has a sign of diminished liver functions, the health care giver must assume that the liver is unable to function well. In applying a treatment which can cause a deadly side effect if it interacts with other factors, the care giver cannot blindly assume non-existence of those factors.

The medical community actually follows common-law approach: treating anything as non-existent if it cannot be proved by evidence. There is no necessity to use this rule in health care. In court, judges must decide cases one way or the other. Relying upon best evidence rule is reasonable in deciding legal rights. There is no reason to apply this rule to personal health care because different options are available and doctors can make decisions in later times. Whenever a person is treated by an operation, a drug or a treatment, there is no way for undoing it.

The FDA drug approval protocols embody the evidence-based approach. FDA actually assumes that side effects of drugs do not exist unless someone can prove them. Since no body can prove latent side effects by using any of known frivolous drug trial methods, its protocols are like default green lights for drugs that can control symptoms. The protocols actually shift the duty of discovering side effects from drug sponsors to consumers who use them. Drugs side effects are always discovered in the use phrase with human beings as trial subjects. Still, a super majority of side effects could never be found if they do not cause distinctive injuries, or, can hide in the forest of the Nine Big Factors. The FDA bad approach is in main part responsible for seeing a largest number of drug-caused injuries, the largest personal health care spending, and the worst national health condition in the world. Therefore, we believe that evidence-based approach is directly responsible for the colossal failure of the FDA mission. Real price the flawed approach has cost the nation is gigantic.

Health care decisions must be made by wisdom and wise judgment. Many things must be presumed to exist without proof. Science progresses slowly with incremental findings on daily basis. Indeed, unknown knowledge is always more than known discoveries. This incomplete-evidence nature determines that scientific approach cannot be trusted blindly and evidence-based approach must be wrong. Drilling a small hole on the wall of a giant reservoir will result in water loss from the reservoir even if no evidence of water loss can be produced. It is not a right attitude to deny the existence of such an obvious draining effect. Stealing public funds is presumed to exist even if the government is unable to capture thieves. The government should be able to estimate number of such cases without solid proof. Inflammation in any part of the body must increase flow resistance, regardless of evidence. In studying a large number of problems, the best approach is using a theoretic approach. For things like a floor wears and tears, the best approach is conducting theoretical modeling. Now, human lifespan is so long, evidence-based approach would yield wrong results in most situations. Health decisions involving long-term effects have to be based upon wisdom rather than flawed, unreliable, and incomplete evidence. In addition, we note that many findings in health guidelines have flipped in the past.

Therefore, we believe that doctors should freely question evidence validity, reliability, and completeness. When a treatment decision could pose an immense danger or long term adverse impact, they should search and consider facts beyond available best evidence. They should use best judgment in making health decisions. Patients should provide input to their doctors when doctors are unaware of their specific risks.

Health care policies should not be formulated to advance government interest even though the government is free to consider things for its own needs. Modern doctors do not need to follow this approach. We believe that adopting this wrong approach has a lot to do with the common law influences and early politician training. Early politicians could not see the differences between a ruling philosophy and best philosophy for practicing sciences. Society fails to see conflicts between government needs and individ-

ual needs. Due to this confusion, virtually every legal principle has been imposed on substantive fields. Mountains of laws, policies and court opinions are based upon junk science practices such as comparing abstract concepts, aggregating population data, averaging data, and misusing statistics, which are only proper for tracking administrative tasks and allocating national resources. When laws, policies and opinions run the nation with compelling force on how truth should be found, they destroy merit of science, destroy national productivity, and hurt national competitiveness.

Another reason for the emergency of evidence-based medicine is the excessive liabilities that are imposed by courts against health care providers. Evidence-based approach can shield liabilities for doctors. When a doctor makes health decisions based upon available evidence, the doctor may be not responsible for bad consequences. To protect doctors from being sued, the medical community has to adopt practicing guidelines, reasonable person standard, incurable disease labels, and evidence-based approach. When the medical community has to concern about liability, it is unable to advance the common interest of the mankind. If Congress wants to change the world, the most effective measure is to abolish health care liabilities altogether and establish a national compensation fund for health care victims. Delivery of true care requires creative thinking and unrestrained dedication to the cause of cure. The liability laws prevent doctors from even thinking about anything that is inconsistent with practicing guidelines. As long as doctors are constantly threatened with malpractice liability, we will never see a world with cure.

If Congress does not know how to achieve a balance between the need to providing incentives for curing diseases and the need for preventing health-care abuses, it will quickly screw up a new health care system. We predict this will most likely happen based on how Congress ruined the patent system. Congress could not tolerate a small number of patent abuse cases and gradually ruin the patent system as a result of trying to stop isolated patent abuses. Based upon how federal lawmakers are elected and who they represent, a national compensation fund for health care victims will not last for long.

Serious health crisis incidentally caused by genetically modified soybean, corn, and canola shows how bad the evidence-based approach is. This rule is wrong if we accept the presumption that the mankind can understand only a fraction of mysteries about human body. One can imagine that there are tens to hundreds of possible mechanisms in genetically modified foods to harm the mankind. It is irrational to deny the existence of everything simply because no evidence of harm can be found. Most people might think that genetically modified foods have been tested like drugs. In reality, no test is done, thanks to this common law philosophy. Even if genetically modified foods were tested, most adverse effects could not been found. Under the current drug approval protocol, drug safety means no imminent harm to human beings. The protocol is not intended to find latent side-effects that take many years to realize.

Evidence-based medicine is even more irrational in situations where health risks are so obvious or should be reasonably predicted. Under such a flawed rule, a sponsor is not required to produce evidence to show how altered compound compositions and changed ratios of individual compounds in a genetically modified crop may affect human health in a long run. No one can prove adverse impacts by conducting "controlled" trials. Essentially, this rule shifts the duty from sponsors to the public that has to prove adverse impacts by producing evidence showing realized damages, health crises, and destruction of human population. The health crisis caused by wide availability of geneti-

cally modified corn, canola, and soybean is a good reason for revisiting this presumption.

When your doctors use evidence-based medicine, you should think about risks that would be expected and let your doctors understand those problems.

6.6 Improper Health Decision Makers

We also question the common practice that the medical care givers are charged with responsibility of making daily health decisions for patients.

World Health Organization identifies a list of determinant factors for personal health. The factors include the personal individual characteristics and behaviors, physical environment, and social and economic environment. They include income and social status, education, social support networks, genetics, health services, and gender. Moreover, persons can change those factors to some extent. It is fair to say that personal factor is far more important than all of other factors. Health service is considered only as a small factor.

Human beings cannot be treated as static closed chemical reactors. None of health problems can be addressed by using current treatment models. No chronic disease can be cured by matching a disease with a drug. Each person is a complex open system and thus cause factors for the disease must vary. We must treat personal health problems by using optimization methods for open complex systems. This system optimization method is not a proper task for doctors.

Life activities are highly dynamic. Personal health is constantly affected by a large number of factors such as foods, drinks, air, water, life activities, environmental agents, emotional problems, climates, activity timing, drug interactions, personal health conditions, disease histories, and drug use histories. It only takes one bad judgment and one mistake in one instance to ruin personal health. Personal health history is too complex, too incomplete and too confusing for doctors to understand.

Personal life activities are so dynamic and unpredictable that it is impossible for others to make health decisions. A person often has to deal with health uncertainty in all kinds of situations, and must try to beat odds by wisdom. Often, people have to make decisions concerning foods, physical activities, personal health, working loads, work stress and emotional issues in real time. Each time, they have only very little time to make decisions. It is impossible to get health advice from doctors. It is not wise to use general advice; and nor is it wise to follow what others have done. As we have shown that general advice based upon population data, averaged data, or guidelines can easily ruin individual health if your condition is sufficiently different from the abstract person.

To avoid personal injuries and attack of disease agents, people need to make their own health decisions. In stroke prevention and stroke risk elimination, we have shown that the tasks have to be managed by the person or a doctor who attends the patient on a full-time basis. Unless the medical practicing model is changed and doctors will have ample time to look into their patient life, they cannot assist their patients in designing stroke prevention programs and risk elimination programs.

6.7 Incompetent Medical Evaluation System

After the common law thinking and flawed statistical methods gain general acceptance, we find ourselves in a world, where people are unable to distinguish between fast-fixes and real cures. The government holds out to make a call in merit even though the foundation of modern medicine is totally flawed. Thus, treatment methods that can be designed to show statistic differences always win even if the methods are clearly wrong.

Due to common law influences on modern medicine, the world is losing the war of finding cures. Chinese Medicine can cure most complex diseases and most chronic diseases. Unfortunately, it has yielded to modern medicine that can attract people by quick fixes together with false “scientific valid” claim. Chinese Medicine has been disadvantaged commercially because it uses a personal approach, holistic principle, and slow-action cures. It loses because it is hard to make money in modern times! Moreover, Chinese doctors are not trained in sciences because the art was not directly based science (even though its methodology is even more complex than methodology used in complex system optimization). Thus, none of Chinese doctors tried to examine the foundation of modern medicine and exposed the overwhelming number of fundamental flaws. The worst thing is that it cannot show its curing effects like fast fixes in five minutes.

Due to the overwhelming flaws, modern medicine is not responsible for massive latent injuries and kidney failure caused by synthetic drugs. By using boilerplate statements, modern medicine escape from being blamed for massive number of mental diseases caused by using sedative drugs and comfort medicines. By showing the fast recovery times, modern medicine is not responsible for functional loss and lifetime pains caused by speedy operations. By showing magic power of controlling infection, modern medicine is not blamed for all serious consequences caused by antibiotics. Modern medicine has won trust from patients not because of treatment merit, but because of deceptive effects and a false claim of “scientific validity.” It fails to reveal truth that its fast results are achieved at long term side effects, serious body damages, and multiple organ failure. Few people know that blood pressure controlling drugs can reduce stroke risk only in a resting condition but cannot if patients are forced to increase heart outputs in various conditions.

Chinese Medicine is far too complex to master. It has set a system which is far too complex for ordinary people to understand. It requires doctors to consider all factors in the universe and for each factor and each internal organ, one must consider relative degrees. This would result in a system that few people can handle. It is far too complex than any system we can imagine. Even the Manhattan project would become a token. For any individual health condition, it is not easy to find a right treatment formulation for a patient in the first time. Even best doctors may be able to cure in less than 50% and some poor doctors may deliver less then 20%. A majority of attempts are deemed to fail. Even worse, when herbal formulations are not correctly matched with patient conditions, they can make patients condition worse. The power for cure and power of harm come together. Also, monitoring their patients is also a pain for them. Thus, some Chinese medical doctors want to use simpler approach like modern medicine. Moreover, when liability starts hitting them, they would rather prescribe fast-action drugs. In such a climate, the profession is losing its credibility with fewer and fewer doctors who can cure diseases. China is about to lose its medical wonders. If it is unable to revive this wonder medicine and follows the U.S., China will become a nation with the largest sick population.

To save medical wonders, one thing must be done is to establish a good merit system. Government is not a right body to judge the merit of medical treatments. A political system can impose junk science that was developed before the science age. However, if government does not regulate medicine, society may be full of medical scams and medical fraud. Most people do not know how to appraise treatment methods and how to select doctors. Government is never able to tell good medicine from junk medicine. By using FDA regulations, the government has precluded every treatment method that could deliver a cure. The insistence of proving results in a clinic trial naturally guides medical research into a dead end. By further influences of research funding, most research programs are motivated to stop pain, provide comfort, and control symptoms. This is how we find ourselves in a world without cure. Medical discoveries are dominated by pain killers, sedative drugs, correctional remedies, and kidney dialysis. This is why half of the population is added to the list of chronic diseases and the nation is deemed to bankrupt for unmanageable medical spending.

Most people do not understand statistics and probability theories and have to rely upon government regulations. When the government injects junk science into its laws and policies, its regulatory actions can greatly mislead people. For example, a stroke treatment drug, which can reduce patient death rate by 2% at a significant level of $p=0.01$, will get a governmental approval. An exercise program, which would cure 20% patients with 80% disappointing patients, could not pass governmental approval because the method is something that can be proved by double-blind trial. The stroke drug can only reduce 2% death rate. The probability means that this 2% reduction rate is true by a chance of 99% (assuming that statistical method is not abused). Use of probability is necessary in statistics because death rate is a random variable, which can have different values in different situations. However, drug effectiveness is trivial even if you assume that the claim is true by a 100.00% chance.

The exercise program appears to be very poor because it could cure only 20% of the patients. However, if you accept the presumption that it is to cure an "incurable disease," it is a wonder program that can actually cure the disease. Unfortunately, such a program cannot be studied like a chemical compound in a chemical reactor because it cannot meet the double-blind trial standard. The program would not win a government certificate, and nor financial sponsors. Human health cannot be separated from subjective feeling and mind, but the government standard insists that it must be treated as lifeless objects. When the standard is wrong, it naturally cannot distinguish between a good cure and a useless drug. Such a government regulation is failure.

A 20% successful rate for curing chronic diseases is a wonder. If all treatment methods can cure 20% patients, we would see much healthier world now. Those who have failed from using a first treatment method may try a second treatment method that also cures a 20% of the patients. Thus, the methods, even though very low in percent, can successively get rid of diseases. Within a decade or so, the patient population in the U.S. would dramatically reduce, and Medicare for all will be an affordable benefits. If we want to see a health world, the FDA regulations, federal health care laws and policies, and medical malpractice law must be changed so that they will provide strong incentive for finding medical methods that can actually cure diseases. All laws and regulations should be formulated to recognize slow curing speeds and discourage or even ban fast fixes with side effects. The government must abandon chemical reactor models and the controlled trial methodology.

True cures that cannot win governmental approval would invite mass attacks from

disappointing patients. This becomes a difficult problem in the internet age when merit can be decided by users in a democratic process. When merits of cures are judged by online voters who lack basic knowledge about medicine, a voting result can be a disaster. True cures for chronic diseases normally take months to years. It is impossible to show healing benefits in short clinic trials. Without some kind of government support, true cures can easily become subjects of condemnation. In contrast, pain killers, sedative drugs, and symptoms-controlling medications are immune from complaint because those claimed effects can be approved easily. If pain is reduced, patients feel better, and symptoms are controlled, claimed benefits must be real. Due to fast working mechanism, proof can meet the government requirements. So, the people will favor fast fixes over true cures. If a treatment method fails to cure 80% attempted patients, disappointing patients, government, and interest groups all will come together to condemn the best cures as scams.

Inability to appraise medical treatment merit forces modern medicine to advance into a dead end. Research is focused on methods for releasing symptoms. Medical researchers select treatment methods that can be applied to chemical reactors. This is how a culture has formed, where the world pays little attention to real cures, drug side-effects, and real benefits. There is also why medical treatments almost exclusively target symptoms. To make the objective clear, modern medicine just labels all chronic diseases as incurable.

Due to formation of the culture of expressing their critiques, great medical theories and best treatment methods may be condemned by government, bias interest groups, ignorant public members, and disappointing patients. Even Dr. Ke Li, who saved nearly a hundred near death patients and tens of thousands of people, was viciously attacked on the Internet. It is easy to attack doctors who dare to hold out to cure diseases. In contrast, those quick fixes are not the subjects of critiques. We find ourselves in a world without cure in part because the system is unable to judge the merits of medical treatments.

Fraudsters and cam artists also play a special role in ruining the perceived merit of cures. This has been a big problem in China. To deceive people, fraudsters always use renowned doctors and experts to promote their bogus products and services. They even publish books in the names of famous doctors including deceased doctors to promote their services and products. When victims get turnip chips for promised ginseng and get a once for promised a pound, they realize they have been defrauded. While fraudsters run away with profits, the world now starts condemning renowned doctors and experts, the formulations, and herbs used in bogus products.

To enable the world to find cure, we need to see a different merit evaluation system that is not run by elected government officials, be independent of all interest groups, and not be rated by ordinary people by a democratic process. As long as the merit system is not fixed, people will not know what is good and what is bad, the U.S. population health condition cannot be improved, and nothing can be done to save Medicare from bankruptcy. Noting can be done to stop junk medicine from destroying cure in the world.

6.8 Precluding Medical Inventions

The current medical system prevents patients from discovering miraculous cures.

When a patient survives a terminal disease, it must have both lucky factors and miraculous element. This was the primary method for finding cures in early human histories. However, the U.S. medical system counts on a few medical research programs, but does not provide any incentive to patients for discovering, collecting, and following up with successful treatment methods. It does not have any mechanism for ascertaining medical discoveries and passing their discoveries to the public. It simply rejects such cures for failing to pass validity tests. Thus, all cures that would be found by strikes of luck will never get into the public domain. Even if a cure has been found hundreds of times, it would be still a lost art.

When the medical system entrusts the mission for finding cures to only a tiny small number of institutional researchers, it forecloses cures for the mankind. If we look at the medical history, most cures were found by patients, often by strike of luck. If this kind of exclusionary system had been used in the human history, most ancient wonders would have been prevented. That is why the U.S. medical care performance in treating chronic diseases is much worse than the ancient performance more than 1700 years ago. Even at that time, no disease was labeled as incurable. Diseases are incurable only when their stages are so advanced that it has no time to reverse or only when treatment methods are wrong.

This view of relying upon medical experts is shared organizations in society. The American Heart Association States: "Robust NIH-funded heart and stroke research is our country's best hope to discover innovative ways to prevent, treat and ultimately develop cures for heart disease and stroke. This analysis acknowledges the enormous progress that has been made in the fight against cardiovascular diseases while recognizing the significant challenges that lie ahead." AHA did not understand that cardiovascular disease is not a disease that can be effectively addressed by drugs (except in very limited cases). It is a body state problem that must be addressed by the patients.

The U.S. has established a big medical research system which directly run or influenced by National Institutes of Health (NIH). The NIH supports more than 212,000 scientists at over 2,800 research universities, medical schools, teaching hospitals, independent research institutions, and businesses throughout the U.S. and abroad. This is equivalent to 7 persons per 1000 U.S. residents. The government must have assumed that this establishment with massive research funds can find cures for the mankind. This assumption is totally flawed: most great cures were discovered outside the system by people with no schooling and training. Miraculous achievements of Dr. Ke Li show another example how wonder cures are found. Dr. Li did not even receive formal medical education, but has created performance records to change Chinese Medicine. A large number of extraordinary medical achievements repeatedly show that talents for discoveries cannot be acquired in school training and most discoveries are found by luck. A luck component in Doctor Li career is that he was allowed to practice without being subject to meaningful regulations. A review of wonder medicine origins would completely repudiate the unrealistic expectation that established research programs can solve health problems. Such a research system has discovered a great number of basic facts, but also did a fair share of things to prevent or slow down basic discoveries from becoming useful cures.

Like the U.S. medical system, the Whole Health Organization also counts on establishment. It notes "inappropriate use of traditional medicines or practices can have negative or dangerous effects" and that "further research is needed to ascertain the efficacy and safety" of several of the practices and medicinal plants used by traditional medicine systems. It once again advances its cause by using flawed model, wrong

method, and meaningless experimental design to evaluate efficacy and safety of other treatments, despite the colossal failure of modern medicine for more than two hundred years.

U.S. exclusionary practice is also reflected in the patent policies. First, one should note how the U.S. has destroyed its own patent system. More than one hundred years ago, the U.S. patent system was able to make its population to invent and patent, which led to what that early politicians viewed as low quality inventions and patents. A large number of changes in patent law and judiciary abuses followed, resulting in an inventor-hostile patent system. Finally, the U.S. has a patent crisis that Congress still has not known. By enacting patent laws and policies that only corporations can work around, and by creating a large number of inventor-hostile cases, rules, and conventions, the U.S. patent system that primarily promotes foreign interest.

The U.S. patent office can show that it examines a large number of patent applications, and grants patents at "good" annual growth rate. Among the large number of federal officials, none even know the nightmare that the patent office can no longer advance interest for the nation. More than half of patent applications are owned by foreign corporations and more than 52% patents are granted to foreign owners. Even among those patents granted to the U.S. companies, most of them are used to protect products and services originated in foreign nations. It is safe to say that more than 70% of the U.S. patents are issued to further interest of anyone but the U.S. It is not strange that the U.S. suffered more than 700 billion a year trade deficits, and the U.S. started to fall behind in technology by relative double digit deficit. When 320 million citizens (100.00%) do not want to even bother their own inventor-hostile patent system, there is no hope for the U.S. to maintain its technological lead.

Use patent maintenance fee starting in 1980 sounds to be a creative idea to increase federal tax. Past lawmakers did not think how such a patent policy would deter future inventors from even applying for patent. While it is great to take the patent back from inventors, Congress probably could not see the next step: how the inventor experience with patent expiration will hurt future patent business. It should be expected that inventions from expired patents are used by the public as soon as the patent holders stop paying maintenance fees. This getting-patent-back policy increases the ratio of foreign-owned patents and most probably kills patents that are owned by U.S. independent inventors. In the end, the remaining patents mainly help foreign corporations and U.S. corporations to monopoly the U.S. market for foreign interests.

The judiciary keeps creating its own laws to overwrite the power of Congress. In the last one hundred years, it handed down a large number of inventor-hostile judiciary decisions that have sufficient impacts to wipe out everything that the early leaders had done to build public trust in patent in the first 130 years. It has become a common practice for this court to change the rule of law in the middle of game and breach the constitutional promise of patent reward. After the enactment of the America Invents Act, it could make inventors liable for patent lawsuits. No one would be stupid enough to invent and patent if he knows a patent is a sham promise of reward. Congress does not see gross inequity in any patent trade between an invention secured with a decade of hard work plus massive investment and a promised sham patent reward consisting of liabilities, harassment, and court costs. Congress actually turned a working patent system into a bizarre patent system, where the inventor may be treated as a wrong doer while infringing parties are given all kinds of rights and benefits. In such a patent system, few medical inventions will be disclosed for the public. Without real patent rewards, no body

would spend time even to think about problems in treating diseases. So, everyone knew modern medicine could not cure diseases, but no body thinks why.

The worse impact is caused by a court doctrine called mental step doctrine, which bars the Patent and Trademark Office from granting patent for inventions involving mental-steps. Per our theory, curing a chronic disease is like correcting a fault in the special memory in the brain. Per a computer model, there are only two ways to fix such a fault: correcting the fault in the memory or resetting the brain (like re-installing an operating system). For a large number of diseases, training the brain is the key or at least part of the cure. A large number of traditional medical methods, including meditation, circulating Qi, mind focus, and relaxation are all about special training involving mental steps. They all fall under the mental doctrine. Nothing can be patented under the U.S. patent law, and other national patent laws that imitate the U.S. patent law.

The reason for barring patent on invention involving mental steps provided in court opinions is that mental steps can be practiced by anyone and they should be free to anyone. This kind of thinking might be right as to very simple things that fall in ordinary knowledge like doing simple math or tabulating three columns of data. We hope to hear from the justice in their future opinions if they can use mental steps to get rid of tumors in the brain, get rid of fat liver, fix hormone disorder, stop brain convolution, stop tinnitus, and to step up the body metabolic state. We can safely bet that ordinary persons do not know how to do mental steps to achieve such extreme results. President Ronald Reagan did not know how to use mental steps to defeat his Alzheimer's disease; and former chief justice William Rehnquist probably did not know how to use mental steps to defeat his cancer; and none of the current justices know how to use mental steps to address a challenging health problem. This is another example to show how wrong the categorization method can be.

Preventing monopoly sounds a strong argument, but no body would contribute their life-time discoveries to the public for free, and no body would invest time and risk their own life to find ultimate cures for others. Many discovered formulations and practices revealed they had been held as secrets for several hundred years. Those who have power can provide an incentive to heroes to find cures in the shortest time OR we will never see a day with cure.

After the U.S. has ruined its patent system, we do not expect that ground-breaking medical inventions will come from this patent system. The utility of our disease theories in the U.S. will be severely limited.

6.9 Influences of Court Practices

The practices of common law courts have profoundly affected the medical landscape. Most Americans may never think about it because they get used to all those practices as if they should be. If you carefully study how civil code nations enforce their laws, then you can see what might have affected modern medicine. It affects medicine by its impacts on the U.S. patent system and the liability law. Dr. Wu has written many articles on the U.S. patent system. We will show that the judiciary is mainly responsible for precluding medical inventions and wonders in the last century.

The most important practices are adversarial proceeding, use common law doctrines (such as the well known mental step doctrine.), and a total lack of consideration of

party long-term interests. A full discussion of those problems could require volumes of analysis, and thus we can only point out a few things to show how the judiciary practices have precluded medical inventions and caused the medical community to create the “incurable” concept.

We show how the U.S. judiciary has ruined the U.S. patent system and thus precluded medical wonders. For the first 130 years, the U.S. patent system was not changed very much. The stable patent law gradually cultivated an innovation culture. When citizens had passion to invent and patent, the patent system was flooded with patent applications even though many inventions were poor. This innovation culture resulted in American technological supremacy. The system could just ignore poor inventions, but started trying to do things to raise patent quality. Since the early twenty century, the judiciary started handing down more and more inventor-hostile decisions. The early judges never had a clue for the worldwide technological competition and did not consider how their inventor-hostile decisions could gradually destroy the American innovation culture. National policy always influences both the national long-term interest in acquiring inventions and the short-term interest of the businesses that want to use free inventions. The Supreme Court never seriously considered the long-term interest of the nation in its opinions.

Due to the fluid of U.S. patent law and routine judicial meddling of the patent eligibility standard, the U.S. Patent and Trademark Office is unable to use consistent patent standard. No consistent standard can be put on the book. When the U.S. Supreme Court handed down *Alice Corp. v. CLS Bank International*, 573 U.S. __, 134 S. Ct. 2347 (2014), it was a worst “earth quick” with absolute force to wipe out the U.S. technological landscape. It resulted in massive patent invalidity (more than 70% of challenged patents). This kind of decision would result in a total loss of inventor population (except corporate product improvements). This decision is mainly responsible for price jumps in drugs.

If the court had studied what competitive nations such as China, Japan, Korea, India, etc. were doing to improve their technological competitiveness and the rapid loss of the U.S. technological advantages, the court should have seen that the Alice decision would have absolute force to destroy the U.S. technological future. With the justices still using common-law thinking, the court could not see what was extremely obvious. Naturally, it was persuaded by the court friends, multiple-national corporations, to deliver a truly deadly blow to the nation. The court could not have seen the conflicting interest now held by the court friends, which were different from those the once knew.

Congress has done nothing to stop continuous technological destruction. When patent protection is as fluid as running water, no investor can count on its money. So, it is natural to for drug sponsors to raise drug prices as much as they can. It is also natural for patent examiners to make repetitive frivolous rejections. Readers can easily find a large number of stories on how the patent office mistreated U.S. inventors on ipwatchdog.com. If a person has known this extremely bad examination culture, he would never bother patent in his life time. It is only a business for U.S. and foreign corporations with patent departments and unlimited funds. American inventors undertake patenting deals most probably because they were not well informed or mistakenly believe that patenting can make them rich.

The large number of inventor-hostile decisions handled down by the U.S. Supreme Court and the America Invents Act were like deadly thrusts into the backbone of the U.S. technologies. It will further reduce non-institutional medical inventions. Among federal

lawmakers and federal judges, very few might have noted that the U.S. is rapidly falling behind even in technologies such as high speed trains, mass public transportation, solar energy, quantum computing, production art, medical technologies, and even basic research. The problem is so serious that a retired U.S. Circuit Judge of the U.S. Court of Appeals for the Federal Circuit and a former Chief Judge of that court, Paul Michel, described the U.S. patent system state as “incarcerated state” in his testimony for Congress.

The U.S. patent system no longer advances the U.S. interest. Among all patents granted by the U.S. Patent Office, more than half (52%) are owned by foreign entities and most of the remaining patents are owned by the U.S. corporations. Among the patents owned by U.S. corporations, a super majority (perhaps more than 80%) is used to protect products and services in foreign nations. Now, only a tiny small number of U.S. patents are granted to U.S. independent inventors for advancing the U.S. interest. Most of the patents granted by the patent office will promote monopoly of U.S. market by foreign interests. Each new patent to non-U.S. entity will control the U.S. market for nearly 20 years. Since the U.S. market is controlled by foreign entities and foreign-owned patents, U.S. will not be able to maintain trade balance. This is how an inventor-hostile culture has destroyed the U.S. technological future.

In the last four decades, the U.S. has lost most of the technological supremacy that has been achieved in the prior a hundred years. What happened was self-inflicted technological suicide pushed by international corporations.

The inventor-hostile patent policies discourage inventions in medicine and treatment methods. Such policies actually affect everyone in the nation. Every death from lack of cure can be attributed in some degree to the hostile patent policies that have prevented cure that should have been found a long time ago.

The U.S. patent system also uses court doctrines to bar patent on inventions in medical discoveries directly. Early time, the court barred the patent office from granting patent on medical treatment methods. Now, it still has a mental step doctrine (e.g., the Alice Decision) to bar patent from being granted to mental process. As we say, mind training will be the only method for treating a large number of mental diseases involving the central nerve system. Mind training is also essential for reversing chronic diseases. The patent system provides no incentive to do research in this crucial area. Judicial activists are ignorant of advancement of neuro-science and still think that mental steps are what everyone can practice as a born skill and should be “free” to everyone. This kind of patent policies will stop the world from investing on such art. If we know a way to shut down earring or brain ring by practicing mental steps, we cannot get anyone to believe it. Without patents, no one will fund a research. Without doing a research, it cannot be validated, while early 50 million people cannot get a quite day except using sedative drugs.

We can show that U.S. judiciary, due to its inherited common law model, was primarily responsible for creation of a culture for the businesses to meddle national patent policy. The large number of decisions is to advance short-term interest of corporations without considering national long-term interest in maintaining technological lead. Each time when the judiciary gave a judgment to a corporation in meddling patent policy, it provided more incentive to corporations to further meddle patent law. The inability of the judiciary to weigh national long-term interest against the corporate short-term interest is responsible for technological destruction. International corporations do not represent U.S. interest. They would do anything to get present gain even at the cost of de-

stroying the nation. All inventor-hostile decisions are strongest discouragements to potential inventors. Each of inventor-hostile litigation outcomes works like a strong voice “do not bother patent.”

Now, inventors not only fail to get promised rewards for their inventions but would be liable to invention-users. So, financial liabilities can be constitution-promised rewards for a first invention in the world, secured by a decade of hard work together with a great sum of investment. Even worse, anyone can sue U.S. inventors by putting them on a trial, a second trial, and endless trails. After all trails are over, the patent may be invalidated. It is like giving bank robbers a first right to sue the bank on unlimited excuses and pretexts. If the patent is invalidated, the inventor now becomes a wrongdoer while the infringer becomes the victim. When the legal system has lost its ability to tell right and wrong, it can quickly destroy the nation.

The U.S. is now committing technological suicide when its law punishes inventors and rewards invention-thieves. Exceptionally few people of the 320 million U.S. citizens and residents would bother invention and patent. The number of U.S.-owned inventions in 2015 is fewer than the annual number of inventions made by people in South Korea, and that the U.S. is unable to balance trade against a nation of one state size. Compared with China, U.S. technological moving pace is falling behind in double digit deficit. There is no way for the U.S. to maintain technological lead if it continues letting the court meddle national patent policy.

Dr. Wu has found that U.S. Supreme Court philosophy is at least a thousand years behind the time. Formal Justice Scalia of the U.S. Supreme argued that court decision correctness is not important because wrong decisions can make citizens to comply. He states that “Once a law-abiding society has revised its laws and practices to comply with such an erroneous decision, the existence of a new “consensus” can be appealed to — or at least the existence of the pre-existing consensus to the contrary will no longer be evident — thus enabling the error to triumph by our very failure promptly to correct it.” *South Carolina v. Gathers*, 490 U.S. 805, 824-825 (1989) (Scalia, J., dissenting), majority opinion overruled by *Payne v. Tennessee*, 501 U.S. 808 (1991). He might be right if the U.S. is still in the old time. While the court precedent can make the right wrong and make the wrong right, it will destroy national productivity and ruin national competitiveness.

Justice Scalia held mere factual innocence is no reason not to carry out a death sentence properly reached in *Herrera v. Collins* (1993). (This is not a direct quote but has the same meaning of his statement). While some commentators defended his position as right, we can show in this book as well elsewhere “a full and fair trial” is nothing more than a defective process, run by flawed legal theory, meddled by flawed out-date doctrines or rules, with decision reached by relying upon unreliable evidence. The criminal law model was based common-law concepts that were never being validated scientifically; court procedures are based upon the model developed more than a thousand years ago, and written by people having no formal training in relevant sciences; procedural rules contain flawed concepts on face; a large number of judicial decisions reveal additional junk science on face and in their texts; and most justices kept relying upon knowledge that existed before 1788.

The judicial culture, as reflect by Justice Scalia statement, clashes with the passion of any person to find cures. When the judiciary lacked respect for human life, finding cures for diseases would never be valued. Due to the flaws in the common law model, refusing to entertain new evidence would naturally result in execution of inno-

cent people in unacceptable high frequencies. While Wikipedia lists a big table of wrongful convictions, the frequencies of wrong decisions in civil cases, pro se cases, family law case, and non-capital punishment cases are much higher. When a common law judge swaps right and wrong, their actions would result in miscarriage of justice. Swapping inventors and patent thieves has a huge impact on U.S. technological future. This Court cannot create national policies to encourage people to find wonder medicines and dedicate them to the public. This is one reason for modern people to live in a world without cure.

The impacts of judiciary practices on medicine are more than precluding medical wonders. It is also directly responsible for creating all “incurable” diseases. The adversarial process generates a strong incentive for patients to sue doctors. However, courts are unable to understand treatment merits and do not know how to balance patients short-term interest against their long-term benefits, they frequently handled down shocking judgments against doctors. In response to outrageous adverse judgment, it is natural for health care givers to use practice guidelines, standard of care, hospital regulations, professional guidelines, etc. as measures for protecting doctors. Without those devices, it is impossible to practice medicine in the U.S. Those things might be great if they are used to address widget quality but bind doctor hands. As we have shown, human health problems are full of unknown risks and unpredictable factors, and most medical mysteries have not been understood. When a patient is dying with nothing on the book to be tried, the only hope is that a doctor will do whatever he could try. Unfortunately, the standards and guidelines prevent doctors from even trying anything beyond what is approved or proscribed in the standards and guidelines. This is one reason that doctors cannot do much more than what is on the book.

In response to liability threats and the court inability to decide treatment merit, what doctors need is an “incurable” label by which they can legally give up. Now, we see patient dumping as a lawful practice. In reality, 60-70% of near death patients could be saved. This patient dumping practice is even more troublesome in light of our proof that all chronic diseases are curable as long as there are sufficient times remaining.

6.10 Dispelling Traditional Cures

Modern medicine has widely displaced traditional cures. The world quickly becomes a world without cure after it replaces cures by fast fixes.

Its impact to China is the most profound. Throughout its history as well as in the recent memory, Chinese was healthy, despite its poor and low income. Heart disease, stroke, diabetes, kidney failure, and liver failure were very rare just a few decades ago. After China opened its door, China experienced three major changes: food became abundant, environment was polluted, and lifestyle became more sedative. Its people are gradually addicted to fast fixes and ignore personal responsibility, occurrences of all diseases rise very rapidly. If the China does not take measures, China will top the world as the sickest nation.

The worse impact of modern medicine is to destroy Chinese Medicine. Since this art was developed by experience, its theories are not consistent with scientific knowledge and some theories are contrary to modern evidence on face. Modern medicine is built on a flawed foundation, and thus it is unable to evaluate what is good and bad. By

giving unwarranted scientific validity to its double blind controlled trial standard and statistical method, modern medicine holds itself as the only scientific medicine. By claiming scientific validity, it gradually establishes an impression that it is the only arbiter for traditional medicines. It routinely uses its self-grabbed power to evaluate merit of other traditional medicines. It frequently regards experience-based medicines as junk medicine. It attempts to arrive at a sweeping conclusion as to effectiveness of Chinese Medicine. As we have shown, even the question is improper.

The exclusionary practice of modern medicine has caused the worst damages to the world health landscape. It has made Chinese Medicine, the only medicine using the complex system approach, fall in disfavor. Most people do not understand and appreciate the validity of its theories.

We have seen a large number of articles attempted to study toxicity of herbs. For the reasons we have provided, they are largely wrong due to failure to understand working mechanisms, failure to consider interactions, and using extremely high concentrations. As shown by cases revealed by Dr. Li, toxicity could be the reason for wonder cures. However, those articles have misled people who are not trained in chemistry, biology and medical science to give trust to modern medicine. Some of them mislead people who have not the fatal flaws in modern medicine. We ask our readers to critically think about those articles in light of all exposed flaws in the foundation of medicine. Your personal health is a matter decided by truth according to law of nature. The merit of medical treatments cannot be changed by personal opinions, government interest or commercial interests. The bad health landscape of the U.S. will continue hurting everyone as long as the flaws in medical foundation are not rebuilt.

Misled by scientific validity, even new generations of Chinese doctors lack confidence in their own profession. They do not know that all medical theories have exactly matched theories in modern sciences. The yin-yang five forms theory is consistent with the approach used in complex system optimization. This yin-yang theory makes all problems magnitudes more complex than they are in common law models. Holistic view is a best approach to addressing human health problems because human beings are exposed to an unlimited number of life activities and environmental factors. Its diagnostic methods are much more sensitive for detecting a large number of root health problems in the earliest time.

The NIH publishes an article concerning the validity of Chinese Medicine:

“An assessment of the research found that 41 of 70 systematic reviews of the scientific evidence (including 19 of 26 reviews on acupuncture for a variety of conditions and 22 of 42 reviews on Chinese herbal medicine) were unable to reach conclusions about whether the technique worked for the condition under investigation because there **was not enough good-quality evidence**. The other 29 systematic reviews (including 7 of 26 reviews on acupuncture and 20 of 42 reviews on Chinese herbal medicine) suggested possible benefits but could not reach definite conclusions because of **the small quantity or poor quality** of the studies.”

This statement reflects that a quality standard comprises a large number of human subjects in controlled studies, use of statistical analysis, and a result of a yes-or-no conclusion. As we have shown, everything NIH has relied is junk science. All of the identified 22 fatal flaws can be found in this cited statement. The authors fail to realize that human beings can never become “uniformed widgets” simply because they share the

same identity of human beings, and that statistical analysis is completely flawed in nearly ALL studies involving human subjects. Small quantity data and poor quality are inherent in all studies for optimization of complex systems. There is no way to find two identical complex systems, which share same genetics, same health history, same emotional state, same sex, same age, same drug use history, same disease condition.... When the evaluation standard is junk-science, it naturally swaps between real cures and fast fixes. It would preclude any valid studies and swap between junk science and good science.

The authors fail to see another obvious flaw: current drug evaluation method is unable to discern slow latent side effects. Drugs primarily cause kidney failure, but the flawed standard does not enable anyone to find latent effects in the drug-approval phases. When the healing effect works at the same time scale as a drug latent effect, such a standard actually ignores drug side-effects, but improperly denies the existence of slow treatment effects. It gives benefits of doubt to ruining human health rather than curing diseases.

The same article also found that most acupuncture does not have pain stopping benefits. The article once again reflects the common law thinking that acupuncture either can stop pain or cannot stop pain for an ABSTRACT PERSON for an ABSTRACT DISEASE. The authors failed to realize that benefits would depend upon an extremely large number of other factors and complex interactions between human genetics, nature of diseases, operation skills, and other factors. Acupuncture is routinely used as a primary pain killer in surgery operations in some hospitals in China for decades. It can instantly stop certain pains. Its effects are slow for curing chronic diseases. It may or may not work for some conditions, depending upon the person, nature of disease and many unknown factors. For treating chronic diseases, it would take the same time scale of materializing a latent side effect. So, the attempt to reach a general conclusion has no real utility. When needle is used by people without real training and experience, it may inflict more pains rather than stopping the pain.

The authors clearly failed to appreciate that when a treatment method is based upon optimization of a super complex life system, many factors can have dual or conflicting roles. A wonder cure can become pain-inflicting nuisance or even a killer when any of one or more conditions are changed. We have described a large number of situations where differences between a cure and a killer are very small. It is like tipping an analytic balance by placing a tiny bit of weight. The differences in a long term are survival and death. We cannot see real utility for making such a general conclusion. The motivation for doing such a research is questionable because it cannot deliver any conceivable benefit to the mankind. If acupuncture is bad, the article cannot make it worse. If acupuncture is good, it cannot make it bad. It has worked for thousands of years, it works in some cases, and it works on some patients. It does not work in many other cases. The only motivation is to discourage people from considering it and reduce possible choices for patients so that Americans will be guided to choose prescription drugs, which is the worst among the worse. We question the motivation of doing the studies. Maybe, sponsors for the studies want to get more business in kidney dialysis centers and organ transform centers. If such a research is funded by the federal government, doing this kind of research is precisely why the federal fund cannot result in cure.

Constant attacks of modern medicine have misled the people to lose confidence in Chinese Medicine. China is promoting Chinese Medicine and modern medicine combination. Advocates for this combination do not understand that those two branches of

medicines are completely incompatible in all aspects. Disease cause characterizations and disease treatments are also different. Such a combination means that doctors have to downgrade their methodology from its complex methodology to a simplest methodology. They would have to rely upon belayed and often less useful objective diagnostic data rather than much sensitive and much useful diagnostic data, and use simple controlled variables approach to replace the holistic approach.

By using such a combination, they can make their tasks much simpler and easier. So, they can do their jobs like common law judges. Perhaps, they can just follow five-step protocols without doing thinking. By those changes, they can deliver faster, predictable, and verifiable results, but will never cure diseases. They can use probability numbers like 99% possibility to mislead ordinary people. They can easily boast their professional performance by delivering fast but useless fixes. By using the combination, they quickly create a unique branch of bogus medicine. If Chinese Medicine is replaced by junk medicine, China is about to lose the best medicine that is capable of curing diseases in thousands of years. China is becoming a nation, where every disease will be officially labeled as incurable.

Therefore, we must make a loud voice that Chinese Medicine and modern medicine cannot be combined. One is for delivering fast fixes and one is for delivering cure to get root causes. The only thing they can be mutually shared is diagnostic methods. Dr. Li correctly stated: if there is a conflict between symptom detected in modern medicine and a syndrome determined in Chinese Medicine, one must use the syndrome in treating the disease without hesitation. Dr. Li was a greatest modern doctor with extraordinary judgment and only he could make such a statement with an effect of rejecting modern medicine. Due to the massive flaws, modern medicine has no plausible basis for curing diseases. Some diagnostic methods can have some values to patients with advanced diseases.

6.11 Modern Medicine Fails the World

Modern medicine has brought great treatment methods in emergence medicine, surgery, antibiotics, vaccination, prenatal care, and comfort methods, but also has brought the “incurable” concept and ineffective prevention concept to the world. It also makes the world medicine a colossal failure.

Modern medicine not only has failed to deliver cures, but pushed medicine backward. After two hundred years, it still fails to find cures for chronic diseases. Due to flaws in the foundation, almost no one understands the extremely slow disease process and questions the foundation of modern medicine. It is so clear that the medical landscape cannot be changed by those trained within the system because they have gotten used to common law thinking. When all medical experts follow the common law thinking, it is impossible for them to see the large number of flaws. What they do seems to be natural, right and proper. It is also natural that after nearly two hundred years failure in treating chronic diseases, modern medicine still labels all chronic diseases as incurable. Its incurable claim clashes with mountains of success cures enjoyed by people throughout human history.

Although modern medicine has stressed preventive measure, both its diagnostic methods and fundamental theories have made its preventive measures fail in a global

scale. We do not say it is a complete failure in a relative scale for every disease. Indeed, in various instances, its preventive measure has saved a great number of lives. It fails on an absolute scale or a scale relative to what it should have achieved. Due to all of the reasons stated above, its failure in treating chronic diseases and preventing chronic diseases is due to influences of common law.

Medical basic research has achieved a great deal of new knowledge of human body. However, current medical system prevents new knowledge and new discoveries from being used in treating diseases. The liability law and substantive regulations also prevent doctors from doing anything to cure diseases. As long as the common law thinking continues influencing modern medicine, we have no hope to see cures in our time. Under control of such a wrong standard, few of basic discoveries in neuroscience, stem cells, genetics, etc. will become useful cures for the mankind.

Due to the fast effects of surgery and impressive results of fast fixes, modern medicine has influenced the world profoundly. Modern medicine (except the basic research) becomes junk science when it deals with diseases involving state changes. Its junk science component has spread into every nation in the world. The world uses the same flawed concept that treating the disease of a same cause by using the same method. When human life expectancy is dramatically improved, state diseases become dominant in the modern world. Health care by using modern medicine is deemed to be failure in a worldwide scope, with the U.S. failing the first.

Most of Western nations follow the U.S. model and have built similar medical landscapes. Those nations use similar medical regulations, accept the same flawed foundation, and use close medical systems for promoting trades as GDP sources. When a medical system is motivated with revenues, it lacks creativity and incentive to cure diseases. This inevitably results in national system capable of making diseases but incapable of reducing disease population. It is inevitable for the disease population to become bigger and bigger, and gradually eat up national or global GDP. Such a health system is deemed to fail in each of those nations. The health spending per person is \$9,451, \$5,267, \$4609, \$4407, \$4003, respectively for the U.S., Germany, Canada, France, and U.K (for 2015). Due to increased life expectancy, the health care system for each of the nations is under strain. Few politicians have paid attention to how diseases are created and why they fail to reduce the diseased population.

Japan is a nation with different health care landscape. While no nation is immune from adverse impacts of modern medicine, Japan is different in several aspects. It spent the equivalent of \$3,090 per person on health in 2013 and \$3,727 for 2015. This is only 9.8% of its GDP in 2013 (10.2% of GDP for 2014). Japanese is known for having a high life expectancy and good population health. Its health care system has a culture of stressing personal health. Japanese is more resistant to toxic products, harmful foods and bad life styles. Japan is less strongly influenced by common law philosophy, and thus does not use the assumption that no proof is equal to no harm. It can ban any products such genetically modified foods and all kinds of food additives. It could ban 125 food additives by one single action. Its health policies encourage people to maintain good personal health; and it has an open health system that is not controlled by any trade group so that it accepts traditional healing methods, including priest counseling. Priest counseling may be the best cure for certain mental problems. If Japan starts embracing the U.S. approach, its medical landscape will collapse.

We hope that our analyses will invite people to do critical thinking. Finding cures is a mission of all human beings in the world. Most nations do not have the common law

influences and have no need to follow obsolete common law concepts. Due to influences of vested interest, the U.S. is unable to make changes and cannot fix its Medicare problems despite its great economic power. Its health problem is now considered an epidemic with deteriorating population health. Delays in finding cures mean hundreds of millions premature deaths in the world each year.

We hope politicians in all nations will rethink their own medical research models, research standards, and medical practicing models. As we have shown, anything such exercise, lifestyles, diet and any of the old healing methods can prevent and cure chronic diseases if you establish an open platform.

6.12 Necessary Medical Reforms

A better world is one where people can prevent diseases in the first place, and can cure developed diseases, if they get them.

The abilities of people to prevent diseases depend on the availability of disease agents and the realistic possibilities for avoiding them. It highly depends upon national polices regulating risk products, drugs, foods, and pollution. In this aspect, the U.S. is the worse nation. It is much easy to ban genetically modified foods in other nations. The U.S. needs to revisit its policies in dealing with harmful products and labeling laws.

We have shown that most diseases have very long dormant periods (see Section 2.5-2.6). Atherosclerosis and fat plaques, nonalcoholic fat liver disease, and the large number of kidney failures MUST have started before or soon after birth. Nutritional alterations caused by excessively high omega-6 fatty acids, genetically modified foods, abusive nutritional supplements, and hormones start as soon as a person starts existing. Toxic substances such as synthetic drugs, food additives, food contaminants, and pollutants constantly attack each person before or soon after his birth. Changes in physiological properties in the liver and the kidneys must have started long before their structures are irreversibly damaged. The prevalence fat liver disease implies that a much bigger population (potentially four times of 80 million) is on the way of getting this disease. This is unstoppable catastrophic population destruction. Overwhelming evidence shows that health destruction of each U.S. resident starts before or at his birth.

Among suspect causes, most are self-inflicted population destructing practices. Excessively high omega-6 fatty acids, genetically modified foods, abusive nutritional supplements, animal hormones, and fashionable food additives are all introduced to human bodies intentionally. Most food contaminants can be eliminated. Most synthetic drugs could be spared, and some pollutants can be reduced or controlled. If all toxic substances are not dramatically reduced in human bodies, they will prevent the disease from being reversed.

The U.S. national health problem and the worldwide infertility problem will hit the mankind with unstoppable momentum. Congress has not paid attention to the two trends that would have an impact to end civilization starting with the U.S., Western nations, and nations that follow U.S. legal practices. Unless those treads are arrested or reversed, the U.S. is predicted to rapidly lose population with more people names being added to the disease database. Given this huge stake to the U.S., all nations, the world and the mankind, the U.S. government needs to completely reverse its past policies in addressing suspected disease agents. It should ban genetically modified foods, use of

hormones in animals, and all synthetic food additives. It should strictly control antibiotics in animals, enact strict food labeling law, and strictly control harmful products expected to enter human bodies. There is no time to argue on what might cause those problems. One cannot find single distinctive cause because all of them contribute to all health problems in different degrees. If Congress fails to ban population-destructing practices, the U.S. will become the first ruined land in the world.

We do not believe that U.S. Congress will ban population health-destructing practices. So, we want to make it clear that the U.S. government will see those problems becoming worse and worse. It simply does not have more time to ignore. Both trends as well as many other trends in mental diseases and other health problems had been obvious decades ago. The government should have banned most practices three decades ago. The steady sperm count reduction at yearly rate of 1.5% implies that serious problems might be carried in sperm quality, which simply could not be found by using flawed controlled study methods. Future babies will not be the normal human beings we once knew. If population sperm count continues declining at 1.5% per year for another three decades, the nation will become a ruined land. So, federal lawmakers and all state lawmakers should think those problems as the highest priorities. In addition, they should find many other practices that we have not discussed in this book.

We also urge all leaders from other nations to ban suspected disease agents which might enter human bodies from various routes. As we have proved in many different angles, most science practices in the U.S. are flawed. While common law practice once had a huge advantage over the older form of government, the current government practices used in the U.S. could not deliver productivity. The modern medicine has caused far too much adverse impacts to its citizens, the land and world environment, we hope all nations will not blindly imitate U.S. legal system models and legal practices. When the world starts rejecting junk sciences, the U.S. will slowly get rid of junk science that has clogged its political system.

To be able to cure diseases, the medical landscape must be changed. Modern medicine must treat the human body as a super complex system. It must abandon the notion that all persons are the same, each disease is the same, each treatment is for the same disease, every health question can be answered for an abstract human person, every compound has the same use for all human beings, and every drug is proved for all human beings. It is time to abandon the controlled study standard and should strongly disfavor use of statistical methods. Each of controlled studies is waste of federal resources with no useful data for personal health care.

To show our point, we will show two research designs for a population study. In the first study, it will design a control and a treatment. The population data collected is divided into two groups: Those who consume high cholesterol as a control and those who consume lower amount of cholesterol as treatment. Due to the fact that cholesterol can be synthesized and many factors such as exercise, total energy level, and other nutrients can affect cholesterol accumulation and removal, findings from the controlled study would have little utility to a specific person. Health properties cannot be averaged, but researchers will design strange study because this is the only way to meet the standard. In this kind of research environment, researchers treat the human body as a simple widget, control all variables, and then answer a single question for an abstract person under a hypothetical condition. Thus, such findings have no utility to all specific persons. Research findings procured at huge spending can never become real cure.

In another study, the researcher tries to understand how cholesterol plays its role

in different conditions such as exercise/sedative life, total calories, different pollutant levels, different vitamin intakes, and different inflammation conditions. The purpose is to see how cholesterol intake affects people health or vascular systems in different conditions. The study may lead to findings of many interaction patterns. For example, cholesterol accumulation may be associated with high calories intakes, low vitamin intakes, existing pollutants, and inflammation condition. The study may lead to a finding of tens of different patterns, which are far more useful than one-single factor analysis with a yes or no conclusion. Unfortunately, discovered patterns cannot be evaluated by using statistical analysis and thus cannot be accepted for publication. The research standard discourages researchers from conducting this really useful study.

It is pointless to require a study to address each research question affirmatively with a probability indicator. This practice starts with a wrong assumption and a wrong question, proceeds with a wrong statistical analysis, and ends with a wrong and improper conclusion. The standard should be changed so that study does not have to prove result reliability. It should allow findings to be confirmed by future studies by different groups. For example, the first study establishes 20 patterns, a second study confirms 10 of the 20 patterns, and a third study confirms 7 of the 20 patterns..... When more and more researches have been done, more and more complex interaction patterns will be found. When a large number of studies are done, we will know which one is reliable and which is questionable. By using a right model, it is even possible to discover different genetic types that might have different impacts on cholesterol accumulation. When all known patterns are confirmed, the data would provide more useful guidance because each individual person may be able to find one pattern which is most close to his. Each pattern may be defined by an exercise level, calories level, pollutant level, vitamin intake level, and inflammation level.

Studying patterns can be extremely complex. If the task is too complex, the researcher may focus a simplified pattern factors (for example, considering exercise, vitamin C, and cholesterol level interactions) to understand their interactions. For those who cannot find a matched pattern, factor-factor interaction rules that have been derived from discovered patterns may provide useful guidance. This approach essentially rejects the binary system in disease causes, but use multiple quantitative disease causes model with interactions being considered, where each of the main factors may be rated in several values (rather than just one value in the binary system).

The method for studying interaction patterns is only a discounted approach to the Yin-Yang theory. Literal use of this theory is improbable for the time being. For each factor, we may be able to examine only several values or degrees in a typical study. This would make research design and measurements possible. We have to accept this discounted approach. However, we point out that all kinds of balances in the body must be maintained. Since all physiological processes in the body must be maintained near-steady-state for certain time windows, days, months, years and entire personal life, any imbalance, if not corrected and adjusted, can lead to catastrophic health results. One with good science background can do simulations for various imbalances to see surprising results.

Currently, doctors follow one single rule using one single finding: reduce cholesterol intake regardless of differences in all other factors. This is clearly a wrong approach because we know people are greatly different: some individuals show high cholesterol levels in the blood even though they take little or no dietary cholesterol, while others do not show vascular problems even though they do not control cholesterol.

Similarly, we also question the practice of controlling glucose and salt as a blind measure for controlling blood pressures because those things are vital to life. We must warn that treating the human body as a static chemical reactor by using population data will not provide real benefits to real patients. Therefore, a large number of clean-up studies should be done to correct incomplete, improper, and even wrong practicing guidelines.

Due to the flaws of common law concepts, the political system has established a medical landscape that can deliver only fast fixes with overwhelming resistance to discovering true cure for chronic diseases. Finding cure is important to everyone. Do not assume that you will never need. Even people, who have extraordinary healing skills, may need cure in their lives. So, we ask you do your part to push the government to make a right medical reform that will provide real incentive to finding and delivering real cures. When the medical landscape is opened up, cures will arrive as a matter of course.