



## THE NEW MEDICINE

An Integrative Approach to Transforming Healthcare

*A speech given by Penny George, President of the George Family Foundation and the Bravewell Collaborative, on the occasion of the inauguration of - Georgia Institute of Technology's Health Systems Institute.*



*On a cold winter day almost exactly 10 years ago I received a phone call that changed my life. In a businesslike message left on my answering machine, my gynecologist explained that I had breast cancer and that I should see a surgeon immediately. My first reaction was that I would die. My husband Bill was in Switzerland on business and I felt very alone and afraid. I had no idea at the time that this illness would become a gift.*

I want to talk to you about three things: one is the transformative potential in illness – that positive things can emerge for people from illness, but that medicine as practiced today rarely calls forth. From my experience with breast cancer – and I had excellent conventional care – I learned firsthand what is wrong with American medicine. I also came to see how, by doing the right thing by patients, we can solve some of the problems in healthcare.

I will also tell you about a community with a shared vision that has come together to transform medicine through philanthropy. This group is the Bravewell Collaborative, and it is using its unique position to bring about systems change.

I will define and describe for you this new medicine, which right now is called integrative medicine, but which one day will simply be just “medicine”. And I will close by suggesting how Georgia Tech's Health Systems Institute can help create a healthcare system appropriate for the 21<sup>st</sup> century in one of the greatest nations on earth.

This is a condensed version of my story: Once I moved beyond shock and into decision-making, it was natural as a surgeon's daughter that I would follow conventional medical protocols. Mastectomy, chemotherapy and hormonal therapy were highly recommended, and I elected to do them all. My care was first-rate, but focused only on the disease itself and my body parts, not at all on empowering me.

My training as a psychologist and values deeply embedded in me led me to want to go deeper into the “why” questions about my illness. Spiritual issues loom large when you may be facing death, and meaning and purpose are

potent sources of hope and healing.

I also wanted to regain a sense of control over my life. One of the hardest things about cancer, growing as it does in secret until it emerges as a threat to life, is the sense of betrayal by one's own body. Being diagnosed with cancer told me not to trust my body anymore, when in fact I hadn't really been listening to it very hard in the first place.

I felt it was essential to do what I could to participate in my own healing. I experimented with a number of complementary and alternative therapies. I was fortunate not only to be able to sort through the options myself, but also to pay for these therapies out of pocket. From the work of researchers at Harvard Medical School, I learned that I was not alone: a survey had shown that  $\frac{1}{3}$  of all Americans were regularly using these approaches, seeing complementary practitioners more often than primary care physicians, and spending more than \$40 billion out of pocket for these therapies.

I used acupuncture to address the hot flashes that accompanied chemotherapy. When I could not imagine myself growing old, hypnotherapy helped me envision it in a positive way. When I was completely enervated from chemotherapy, the manipulation of the energy field surrounding my physical body gave me the endurance to go back to work.

My heart was helped by psychotherapy, my spirit by changing churches. All these things, and more, helped tremendously. A psychologist colleague functioned as my Healing Coach, a role so important that our family foundation subsequently created and funded such a position at the Twin Cities hospital where I had been treated.



I was making decisions about my healing from moment to moment, with no particular plan, but what I was actually doing was finding my own individual path to healing in body, mind and spirit, as a complement to – but unfortunately not in collaboration with – my conventional medical care.

What was most transformative was taking responsibility for myself, for returning myself to wellness, allowing me to feel a sense of control again. As a result, I became more whole than I had ever been, and the last 10 years have been the best of my life. That is the power of this new medicine: integrative medicine.

Integrative medicine is care that is centered on the patient's needs; that:

- makes use of the mind, body, spirit connection to promote wellness;
- values healing as much as curing;
- affirms the importance of relationship, collaboration and choice in medicine; and
- blends the best of Western medical approaches and complementary therapies.

Integrative medicine is not about putting more tools in the doctor's bag, but about a more fundamental shift in consciousness. In the new medicine the

patient is the responsible central agent, and self-care is the true primary care. From a systems standpoint, integrative medicine emphasizes personalized, yet comprehensive care. This new medicine goes beyond our current approach of treating symptoms and looks for the deeper sources of illness, intervening "upstream" in chronic illness to prevent or delay its onset.

Over time it became clear to me that I needed to take what I had learned as a psychologist and as a patient in order to actively guide the work of our family foundation, which Bill and I founded in 1994. So even my sense of vocation had been transformed by my experience of illness.

While I was asking myself how much more effective medicine might be if we truly engaged patients in their own healing, aligning their treatment not only with their individual values and beliefs, but their biochemical individuality as well, Bill was coming to the same position from a different vantage point. As CEO and Chairman of Medtronic, he had begun to think about the psychological and spiritual impact of cracking open people's chests to implant medical devices, and he was asking himself how much healing could be enhanced by seeing the patient as a whole human

being and not just their diseased heart valve.

Modern medicine is truly amazing. It is superior at treating trauma, and it has magic bullets for some acute diseases. But there aren't magic bullets for chronic illness. Today 80% of healthcare costs go to treat chronic illness, much of it associated with lifestyle choices, environmental influences and genetic factors in disease expression. As a result healing is as important a concept today as curing was at the dawn of modern medicine.

The heroic medicine of the early 20<sup>th</sup> century is inadequate to cure what ails us – or the healthcare system – today. **We can** do better. **We must** do better. But we have to approach healing in a fundamentally different way, starting by making sure we're asking the right questions.

Philanthropy has from the beginning been the engine of social change in America. Medicine came to be the scientific profession it is today largely because of John D. Rockefeller and Andrew Carnegie, who funded Abraham Flexner's work that established Johns Hopkins as the model for medical education. The Bravewell Collaborative is determined to be influential in improving medicine today as Flexner was almost a century ago.

The Bravewell Collaborative grew from seeds planted in April 2001, when the George Family Foundation convened a small group of committed philanthropists and medical pioneers for a two-day conversation on how to fast-forward healthcare toward integrative medicine.

Among many creative ideas, two strategies in particular emerged from that meeting: one was to support the newly formed Consortium of Academic Health Centers for Integrative Medicine. At the time this group consisted of only Harvard and Duke and four

other top schools. That group shared our vision and believed that if they could get to 25 members, or  $\frac{1}{5}$  of the total number of medical schools, it would be close to the tipping point for academic medicine to declare integrative medicine as the future. The other strategy was to create a collaboration of philanthropists who would agree to work together to leverage individual funding in this area.

More family foundations signed on to this vision, and the Bravewell Collaborative was officially formed in April of 2002. We are an operating foundation of 32 actively engaged philanthropists and family foundations from all across the country committed to working together to advance integrative medicine. We have four main strategies for leveraging systems change:

First, to support the infrastructure of the Consortium of Academic Health Centers for Integrative Medicine and underwrite their work to change how physicians are educated. The Consortium now numbers 31 of the nation's most important academic medical centers, and its leaders are collaborating on fundamental changes in the preparation of the next generation of physicians. Last year the Bravewell Collaborative funded and distributed to every medical school in the country a curriculum guide prepared by the Consortium. It describes how to educate physicians who possess the values, skills, beliefs and attitudes necessary for medicine in the 21<sup>st</sup> century.

Bravewell is also providing funding for experiential training in mind-body medicine at 25 of the Consortium member institutions. This is so that faculty can experience firsthand, and then share with their students and ultimately their patients, the power of such life-enhancing skills. The science behind the power of the mind-body connection is now so solid that if it were a drug it would be

considered malpractice not to prescribe it for every patient.

A second initiative is to sustain and grow the number of best practice clinics offering integrative medicine services. A major pro-bono study conducted for Bravewell by McKinsey & Co. was directed at how philanthropy can best leverage change in clinical care. McKinsey suggested that Bravewell create a Clinical Network to help these clinics share information and ideas with each other, and that we provide them each with a business plan to ensure their economic survival. These things we have done. We have also set up a clinical fellowship program for up-and-coming physicians through the Program in Integrative Medicine at the University of Arizona.

The National Institutes of Health recently informed Bravewell that it intends to partner with our Clinical Network. The National Cancer Institute, along with other NIH institutes, will collaborate with us to create a Practice-Based Research Network. The PBRN will study outcomes and cost savings from an integrative approach to such challenging and costly problems as chronic pain.

Third, we created the Bravewell Leadership Award to honor the medical leaders in integrative medicine and underwrite their work.



Dr. Ralph Snyderman, former Chancellor for Health Affairs and President and CEO of the Duke Health System, was the first Bravewell Leadership Award recipient. Dr. Brian Berman, Founder and Director of the Integrative Medicine program at the University of Maryland and recipient of more NIH grants in complementary and alternative medicine than any other researcher, was the second recipient. The \$100,000 Bravewell Leadership Award has been given every two years in New York.

Our fourth major strategy is to increase public awareness of the importance of integrative medicine. To do this we conceived and funded a public television special called *The New Medicine*. This two-hour special will air March 29<sup>th</sup> on PBS stations across the country. PBS estimates that a minimum of 20 million people will ultimately see it.

Our lead corporate sponsor for the program is WebMD. As you may know, WebMD is the largest online source of health information, as we are delighted it will begin providing information on integrative approaches to chronic health conditions, to the consumers and health care professionals they serve.

These strategies are important, but much more will be needed before integrative medicine can deliver its full potential. There are many efforts going on to solve the problems with healthcare, but there is no common perspective, language or agreed upon assumptions. Much inevitably centers on metrics, but we must remember that much of what matters can't be measured, and not all that counts can be counted.

Georgia Tech's Health Systems Institute is uniquely positioned to help find solutions to the problems in American healthcare. Georgia Tech has a history of thinking outside the box in an interdisciplinary way which is precisely what needs



to happen to get us out of our current predicament. We need to begin by asking the right questions and operating on correct assumptions.

One question we could begin with: what is the purpose of medicine? What if the purpose of medicine were to provide optimum health and healing for individuals and society? We already know how to help people live fuller, healthier lives, even in the face of incurable illness. We are on the verge of being able to tell them what diseases they will get, and when they will probably get them. What if we could work with them to head off or delay these illnesses? And what if, instead of just returning patients to their pre-illness physical condition, we addressed the underlying disease-causing factors and helped them lead richer, fuller lives?

Until now, we have been operating on the assumption that the purpose of medicine is to treat disease. As a result, we have a “sick-care system”. We wait for people to become so ill they can be diagnosed with a disease, at the point when disease burden is least reversible and costs for treating it are the highest. And then we treat those illnesses episodically, since recurring disease pays and prevention does not. It is wasteful, it does not work well, and it is

inequitable. It is a moral shame that in a country as great as America there are 45 million uninsured who receive their basic care in the most expensive place of all: the emergency room.

What would truly patient-centered care look like? What if we focused on identifying the most effective path for patients to return to health and then measured the costs of that? Healing is as important as curing, and more relevant for chronic illnesses. Quality of life counts, and it is a metric that matters.

What if we measured the impact of a healing environment, not only for patients but also for healthcare professionals? One small hospital in Connecticut known for superior patient care and a healing environment had 5,100 applications for 160 open positions and ranked 6th on last year’s *Fortune: 100 Best Companies to Work For*. What can metrics at a place like that tell us? What might we learn about how to do healthcare right?

I am convinced that integrative care is more effective care and that it costs less in the end. It is the **right** care. Only by patients taking responsibility for their health can the costs truly come down. Medicine’s heroic archetype has the shadow of keeping patients passive. In *The New Medicine* you’ll hear one physician sardonically say, “Just give me the drugs and pass the bacon and eggs.”

In conclusion, I believe that integrative medicine is the only sustainable medicine. To prove this, we need to do a few important things: one is to carefully study an integrative approach to care as it applies to one of the more costly chronic illnesses, comparing outcomes and costs to current care.

As a nation, we spend \$200 billion a year on medical and disability costs for low back ailments. If integrative care could improve outcomes and reduce that sum by even 10% - by reducing costs for drugs,

office visits, unnecessary tests - that would save \$20 billion for just this one common medical problem.

This amount would be enough to pay for integrative care facilities in most major hospitals and outpatient facilities. These, in turn, could become useful training facilities for training the next generation of healthcare providers, who can learn to work together across disciplines to find the best approaches to other chronic illnesses. With the outcomes proved and with the costs saved, we could then make these interventions available to everyone, regardless of socioeconomic background. Georgia Tech’s Health Systems Institute could help make this happen by setting up the measurement systems.

We need you to balance the goal of genuinely engaging patients in their care, on one hand, with the goal of helping physicians incorporate the best medical practices in their care of patients, on the other hand. We are at risk of practicing what a physician friend calls “informed coercion” by rating and rewarding physicians on how well they conform to performance measures - measures that are determined entirely by the logic and algorithms of Western medicine and make no allowances for the relative messiness of the patients’ values, beliefs and preference for integrative therapies and collaboration with their healthcare professionals.

We need the Health Systems Institute to identify new economic incentive systems in medicine, ones that incent wellness rather than disease. You know how to do the economic analysis necessary to create new models, and you have the stature and neutral voice to help convince the payor and hospital committees to testing these models.

The Health Systems Institute can help to properly define what personalized medicine is and then to create the systems to deliver it

both effectively and efficiently.

Not least in my wish list is for you to address the tremendous challenge of how to motivate people to take responsibility for their own health. Your nursing and public health partners have much to offer here.

The good news is that society's economic needs, patients' demands for improved care, and institutional receptivity to fundamental change are all converging. Major academic medical and scientific centers, like Emory and Georgia Tech, are seeing the potential in integrative medicine to become the standard of care for the future. The Health Systems Institute has the leadership and the position to make a real difference, and we are counting on you to do so.

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