Is medicine losing its greatest power, the power of touch? Pollution of a different type, light. The ongoing war between evidence gatherers and modelers. And was Transylvania Dracula’s home, or did he come from Ireland?

For some time, physicians have been moving away from the laying on of hands. An abdominal CT scan will provide the same information or more than that of an experienced practitioner in the now lost art of abdominal examination. One of the great attractions of vascular surgery is that it requires few, if any, diagnostic tests outside a good history and physical examination.

“But for many American health care providers, this time is unprecedented in terms of the ways in which our lives are threatened. Roughly 77,000 U.S. health care workers have tested positive for COVID-19, according to the Centers for Disease Control and Prevention. More than 400 have died.

These statistics trigger inevitable fear and uncertainty, an uncertainty that is masked by the call to duty that summons providers to carry on despite the novel coronavirus and its risks. This fear can lead doctors and nurses to keep their distance and deprive patients of a potentially comforting presence during this acutely vulnerable time.”
Perhaps it is because I am aging, but I often find myself turning on more lights as I move about my home. On the other hand, I am acutely aware of how much less light in my neighborhood pollutes the night sky and how many more stars I can see.

“In 1996, Yale economist William D. Nordhaus calculated that the average citizen of Babylon would have had to work a total of 41 hours to buy enough lamp oil to equal a 75-watt light bulb burning for one hour. At the time of the American Revolution, a colonial would have been able to purchase the same amount of light, in the form of candles, for about five hour’s worth of work. And by 1992, the average American, using compact fluorescents, could earn the same amount of light in less than one second. That sounds like a great deal.

Except for one thing: We treat light like a drug whose price is spiraling toward zero. In the words of sleep expert Charles A. Czeisler of Harvard Medical School, ‘every time we turn on a light, we are inadvertently taking a drug that affects how we will sleep and how we will be awake the next day.’”

COVID-19 has helped define the difference between models and evidence. One of evidence’s most prominent supporters, John Ioannidis, continues to be caught up in what seems to be a tribal war with the modelers.

“But the attacks on Ioannidis from the medical community and the popular press are different. They are tinged with partisanship, with each side appearing to embrace the math that serves their political allegiances. Ordinarily sober-minded researchers have attacked Ioannidis’ methods with hyperbolic and emotional arguments that suggest it’s not so much his science but his questions that they dislike.

In politicizing Ioannidis’ work, both the left and the right have failed to understand or acknowledge the critical questions he is raising. In doing so, they impede our ability as a nation to respond in a way that minimizes deaths, not just from the disease, but from our reaction to it.”
From Undark, Opinion: John Ioannidis and Medical Tribalism in the Era of Covid-19

And now for a bit of fun

“An afternoon wind funnels down deserted Old Market Street, past shuttered shops and darkened restaurants. The rowdy Irish student town of Sligo has been frozen. It is two months into a strict nationwide lockdown enforced by the Irish government to combat the novel coronavirus, which has killed more people per capita in Ireland than in the U.S.

The last time Sligo was this empty—this lifeless, this restricted—was 188 years ago. Cholera was the culprit. That epidemic spawned not just death, poverty, famine, chaos, and desertion but also a legendary vampire. Yet only in late 2018 did Irish researchers make this startling discovery: Dracula was born in Sligo.”

From Atlas Obscura, The Deadly Irish Epidemic That Helped Bring Dracula to Life

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