The Aching Man and the Sweaty Woman

While we can surely appreciate that some prescription drugs are necessary and life-saving, most are not-- and only cause more problems.

October 10, 2018 By Mike Barr

Fifty-ish young man comes in complaining of muscle pain every day for the past eight years. He'd seen neurologists and rheumatologists, had an MRI of his spine, was told he had spinal stenosis (pretty much by age 50 we all do! And I'm unconvinced it's responsible or needs to be responsible for any particular suffering.), had cortisone shots (helped temporarily, at first, or seemed to), and recently been scheduled for neurosurgery!!!!

Welcome to for-profit health care (and for-profit insurance company mediated health care) in the lovely U S of A.

If he were a woman, he'd likely be diagnosed with fibromyalgia and put on Cymbalta. But I digress.

A friend suggested he stop taking his statin drug.

When he mentioned to his doctor what the friend had said, doc chided him that this friend "was no doctor." Chiding aside, he screwed up his courage and stopped the statin.

Within a week the pain was gone.

A woman in her late 60s came in complaining of unexplained and nearly constant sweating. "Can't be menopause," she said. "That was almost 20 years ago. Can menopause come back?" Her MD apparently believed so and had put her on hormone replacement therapy (!!!) Without measuring any of her hormones first, I might add. That just caused her blood pressure to spike, so MD increased the dose of her blood pressure meds.

Her sweating worsened, seriously interrupting her sleep. She became exhausted and even more concerned because now new symptoms were emerging. Was this an autoimmune thing? Undiscovered cancer?? She became out of breath from the slightest physical exertion. Now she was really getting scared.

(I hope you're mentally adding up all the (inflated) health care costs we're racking up her, even as the patient continues to worsen as physician piles on more medication without taking the time to

investigate.)

Because it’s what we do with everyone, we combed through her medical history. Literally. Year by year. Turned out the sweating had begun a few months after she started the blood pressure medicine. And after her doctor increased the dose, the sweating got worse. That’s also when the other problems started. We looked up the possible side effects of her blood pressure medication, and low and behold what appeared on the screen almost magically was a concise summary of her exact clinical presentation:

- Fatigue
- Excessive sweating
- Shortness of breath

She took this information to her MD. They switched her to a different BP med. Her sweating, her dyspnea, her fatigue all went away.

(I personally would request a “dig deeper” work-up for the cause of her elevated blood pressure In men it’s often excess iron levels; in women (and men) it can be insufficient mineral levels, most commonly magnesium and/or potassium, or essential fatty acids.)

If at this moment you’re glaring suspiciously at that row of pill bottles on in your bathroom medicine cabinet or kitchen counter top, I also hope you’re feeling a tad queasy. Suspect everything. Suspect everyone. Until proven otherwise.

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