Taking (Preventive) Control Of One's Health, In 2021

In 1990 we wouldn't abide doctors who wouldn't work with us as a team. (Or even equals.) So why now?

November 21, 2020 By Mike Barr

Sometimes I've convinced I'm going mad.

Oftentimes I miss all the people who would appreciate the (medical) madness swirling around us and validate my sanity.

Chris, Stephen, Michael, Ken, Bob, Jon.

I guess Ken and Bob are still around, but how have we all atomized so?

It is my fault for deciding to enter the belly of the beast long ago. But then isn't that what saved my life? Or was it Mark Harrington? Who, channeling Joe Sonnabend, made it okay-- even thrilling and cool-- to say no to AZT and even early intervention entirely, back when all the messaging (especially in San Francisco-- who remembers that?) was "early, early, early."

Which brings me to today. Admittedly, we cannot dominate the epistemological landscape of cardiovascular disease and endocrinology (perhaps) as we once did infectious disease and immunology. But how did we (or so it seems) so quickly forget-- and cede-- the hard learned lessons of 1989 and 1991 and 1993 and 1996?

Taking "this for that" is leading us where exactly?

I too had been held together with anxiolytics and SSRIs, Two Buck Chuck and valacyclovir once upon a time. But that was 1997. Now we know, or think we do, the dementia risks of living better through chemistry this way. And discovered that there are better, smarter ways to keep herpes viruses at bay. We manage the terrain-- soil not seed. (Go ahead, think Rhone or Loire or Languedoc if that makes this all a bit dreamier.) There's even credible talk among PhD psychiatrists that SSRIs/SNRIs don't significantly affect serotonin levels-- or that serotonin is even the problem. (Certainly in me the effect was one of modulating cortisol, but I digress.) There's so much we don't ask. So much we don't know. And so we just keep popping pills.

It's almost as if we need a TAG or ACT UP for 21st century general medicine. Sure, there are large

nearly corporate in flavor generic organizations in the country that purport to specialize in such things, but I'm thinking something just for us. And there's no one really doing advocacy. Counter messaging! (That's what Mark and Joe were doing. That's what saved lives. They made it okay to ask questions, to say no.) Remember when CHP was a community health project? When Derek Hodel's buyer's club was like a pharmacy in DF or Sevilla, where you'd walk in and the pharmacist would try to help you-- on the spot? I miss all that.

And again I digress.

(Shall I wear the bottoms of my trousers rolled?)

All this brings me to vitamins and minerals. And to hormones. To hormone metabolites (especially how you well you're eliminating estrogens). To fungal and bacterial overgrowths. To mitochondrial function. To amino and fatty acids. I can't help myself. This is my world now. This is my reality. And I want it to be yours too.

Remember though, I may be mad.

If anyone has made it this far, first I thank you and secondly I propose that all I can do from the floor I am sitting on as I type this on a hideous, hand me down toylike HP keyboard (my b.f. slash husband gave me when he got something (OSX and) sleeker) is to perhaps share, over the coming weeks specific examples of the above. Evidence even, as it exists. And if you're ready, as I am, to start this new CHP 2.0, let's file the papers and find the requisite three officers to serve.

I humbly retreat now. (But check back throughout the next few days as I add hyperlinks as a kind of documentation to many of the things I've mentioned.)

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