

# Ann Arbor's Next Generation of Holistic Physicians —

The Crazy Wisdom Community Journal Interviews  
Four Idealistic and Dedicated Young Doctors  
about their Backgrounds, Practices, and Beliefs

Interviews by Bill Zirinsky  
Photography by Linda Lawson

The Ann Arbor holistic health scene has come a very long way over the last 35 years. Back then, the Ann Arbor Food Co-op was a small storefront, and the Free People's Clinic tried to bring egalitarian medicine to younger Ann Arborites. It was a profoundly different era, but it was at that time that ideas about alternative medicine first took root in this small city, and around the country.

Starting in the mid-1970's, a few holistic physicians appeared in the Ann Arbor area, combining traditional, allopathic training with interests in homeopathy, herbs, and acupuncture.

By the mid-1980's, Dennis Chernin, Edward Lev Linkner, and Pat Kelly were well established in this region. And U-M Sociology Professor Max Heirich helped to found the local Wholistic Health Council.

In the late 1980's, the Parkway Center on Huron Parkway was founded by Linkner and Chernin, and it became a home to non-traditional allopaths, as well as homeopaths, bodyworkers, holistic dentists, herbalists and acupuncturists, as well as to Castle Remedies.

The last 20 years have seen the sprouting forth of non-traditional healers of all kinds



(L to R) Doctors Paul Thielking, Amy Dean, Malcolm Sickels, and Debra Alspector

and stripes and colors. One only has to look at Crazy Wisdom's Guide to Health and Healing Resources in Ann Arbor (available on our website at [www.crazywisdom.net](http://www.crazywisdom.net), and in printed form at the bookstore) to find the names and areas of specialization of 200 local practitioners of various healing modalities. And Crazy Wisdom has seen its mailing list of holistic practitioners within a 20 mile radius of Ann Arbor grow from 125 in 1989 to over 750 currently.

Complementary and integrative medicine has entered the curricula of major medical schools, and wellness centers are associated with hospitals throughout the country. (And Andrew Weil can be seen on Larry King Live every few months!) The next generation of holistic physicians is coming of age – in a much more welcoming atmosphere than ever before. Americans spend billions of dollars a year of their own money visiting physicians and healers who incorporate

both traditional and alternative approaches to wellness.

What follows are interviews with four local physicians, each under the age of 40, each of whom is creatively combining a traditional medical education with complementary approaches.

## Interview with Dr. Paul Thielking

Bill Zirinsky: Please tell us about your training and credentials?

Paul Thielking: I attended both undergraduate and medical school at the University of Iowa. I then completed residency training in General Psychiatry at the University of Utah in Salt Lake City. During residency, I had a mentor who introduced me to some of the complementary approaches to healing that I use. I finished residency training in 2003 and am Board Certified by the American Board of Psychiatry and Neurology.

Bill Zirinsky: How old are you? Where were you raised? How long have you lived in the Ann Arbor area?

Paul Thielking: I was born and raised in Des Moines, Iowa. I am 35 years old, and have a wife and a three-month-old son. We moved to Ann Arbor in 2003 so that my wife, who is also a physician, could pursue additional training at the University of Michigan.

BZ: When did you realize you wanted to be a doctor? A psychiatrist? Were other family members of yours psychiatrists, psychologists, doctors or nurses or in the healing professions? Were there other things you wanted to be when you were growing up, and if so, what?

Thielking: I grew up in a suburban middle class family and developed an interest in Western psychology and the Eastern contemplative traditions as a teenager. Nobody in my family had any background in medicine, psychology, Eastern philosophy, or the healing arts, so I'm not really sure where my interest in these things originated. I remember being intuitively drawn to books on yoga and meditation during high school, but I didn't have anyone

around me to talk to or ask questions of, so I explored these topics through my own reading and by experimenting with meditation.

During my earlier years, I had little idea about what I wanted to do in life. I had some ideas about leading a genuine life and following my heart, but no clear sense of where I was headed. I felt quite lost and confused much of the time, even through college and part of medical school.

In college, I majored in Psychology, but became disillusioned and lost interest over the first couple years. I had a natural aptitude for the sciences, so decided to work towards medical school because it seemed like a good goal to work towards and it seemed like a good path towards helping others.

It wasn't until following my 3<sup>rd</sup> year of medical school that I started thinking seriously about Psychiatry. During my 2<sup>nd</sup> year of medical school, I went through a dark period of feeling lost and unsure about my direction in medicine. Following that 2<sup>nd</sup> year, I took an entire year away from medical school and went to Brazil to do infectious disease research. I really wasn't that interested in infectious diseases; I was primarily looking for a way to get as far away from medical school as possible without completely dropping out. In Brazil, I lived in a little room on the beach and started meditating on a daily basis for the first time. This was a life-changing year for me. I re-discovered my earlier interests in psychology and Eastern philosophy. I really became interested in Zen and decided I needed to commit myself to a dedicated meditation practice and find a teacher. I developed an



Paul Thielking, MD, is a Psychiatrist with an interest in Transpersonal Psychology and Zen Buddhism

interest in transpersonal psychology. During this year in Brazil, I realized that I needed to somehow integrate my interests in Buddhism and transpersonal psychology with my path towards becoming an allopathic physician.

*BZ: When did you set up your practice? I know it's not always that easy to set up a new practice, or maybe it has been for you? Tell us some about that aspect, please.*

Thielking: I began my private practice in the spring of 2004. Developing a practice has been a slow, gradual process. I am now doing private practice nearly full time. It has been a great challenge moving to a new community and trying to start a practice from the ground up. In medical training, I learned very little about the business aspects of maintaining a successful practice, so the learning curve has been steep. Through the process of starting a practice, I've realized the importance of developing relationships with other practitioners in the area including primary care physicians, psychotherapists, and other healing professionals. I have been fortunate to develop relationships with experienced holistic physicians in the area, particularly doctors in the Parkway Center such as Lev Linkner and Jack Scheerer.

*What are the main areas of your practice?*

I see three general areas of the work I do with people. First, medication treatment is often an important part of a

“My Zen practice has greatly influenced my view of Psychiatry and therapy. There is a great deal of emotional and mental suffering in our world... Psychiatry is helpful for developing a happier, stronger, more resilient self, but Psychiatry perpetuates the idea that we are limited selves, separate from each other and the rest of the world... The Buddhist disciplines that I am drawn to challenge this view that we are isolated, separate beings.”

comprehensive treatment approach. Second, psychotherapy is something I offer to nearly everyone I work with, unless they are already working with another therapist. Finally, I offer complementary, or alternative approaches to healing. These complementary modalities generally fall into the category of “Mind-Body” healing. The approaches I offer include meditation, working with the breath, and working with sound as a healing tool.

*In what ways do you practice “traditional” medicine? Give us some specific examples.*

For everybody I see, I do a “traditional” Psychiatric Evaluation, using standard diagnostic codes and following the standard of care in presenting people with treatment options. I prescribe medications when appropriate, most frequently for mood or anxiety problems. In addition to medication, I offer psychotherapy. In my therapy work, I offer a variety of approaches depending on the patient and their needs. For some people this may simply involve supportive listening. For others, this may involve a cognitive-behavioral or here-and-now based problem-solving approach. Other patients may benefit from focusing on the past to explore family dynamics, traumatic experiences, or negative patterns of thinking, feeling, and relating to others. All of these approaches fit well within a traditional psychiatric model of care.

For example, a patient may be feeling overwhelmed by stressors involving work and relationship issues. They may present with a variety of depressive or anxiety symptoms. Depending on the severity of their symptoms, I might prescribe an anti-depressant medication and start doing weekly psychotherapy to address the issues that they are struggling with in life. We may start by looking at the current situation and then look at the way that the current situation may be connected to earlier relationships and life experiences. As limiting patterns of thinking, feeling, behaving, and relating to others become more evident, we may develop strategies for changing these patterns and living a healthy, fulfilling life.

*In what ways do you practice holistic or integrative or complementary medicine? Please give some specific examples.*

There are three general approaches that I use that would be considered alternative or complementary. First, I have a lot of interest in working with the breath. I often teach people deep, diaphragmatic breathing as a relaxation or stress reduction technique. For those interested in meditation, I provide instruction of basic

meditation techniques involving following or counting the breath. The breath can also be used to facilitate healing by using techniques that I label as “breathwork”. Breathwork generally consists of a session involving sustained connected breathing for 45 minutes to one hour. This connecting breathing can open and release restricted breathing patterns. During this process, people can experience release of emotions and energy that are often stored in muscular tension and restricted breathing patterns. This can facilitate healing on physical, emotional, mental, and more subtle energetic levels.

Sound is another healing modality that I integrate with the more “traditional” work I do with people. The use of sound in healing is based on the idea that we are all vibrational beings and that the vibrational nature of sound can have a healing effect. Sound waves carry the intention of the healer to do their work. I am particularly interested in vocal toning. Toning typically involves the vocal expression of long, drawn out vowel sounds, such as “aaaaaa” or “oooooo”. The vocal sound can be a vehicle for releasing physical, emotional, mental, or energetic tension and restoring a sense of balance or harmony. Vocal toning can also offer a way of getting in touch with our “true voice” or essence. For people overwhelmed by anxiety or emotional turmoil, toning can be used as part of a meditation or deep breathing session. The sound of the voice can drown out the mental chatter that people have such a hard time freeing themselves from.

The other complementary approach that I use is “transpersonal” psychotherapy. Transpersonal therapy is for those that are exploring or integrating those aspects of themselves that transcend the limited “self” or ego. This type of therapy can help people that are trying to integrate opening or awakening experiences. The main approach I take utilizes the “Big Mind Process”, which was developed by my Zen teacher, Genpo Roshi. The Big Mind Process has its roots in Jungian and Gestalt therapy and it is an excellent technique for exploring ourselves, particularly our “shadow” aspects. Genpo Roshi has expanded the technique beyond self-exploration to help people become aware of their “transcendent” or transpersonal nature. This technique has been used to help people experience Big Mind, or the True Self. Opening up beyond identification with the limited self can be deeply healing.

*Tell us more, please, about your views about psychiatry, and about therapy, in general.*

My Zen practice has greatly influenced my view of Psychiatry and therapy. There is a great deal of emotional and mental suffering in our world. In Western Psychiatry and Psychology, we have developed a scientific biological understanding of the individual as well as a rich spectrum of individual psychological theories. These Western approaches that can make life more rewarding and meaningful, and can effectively relieve a great deal of pain and suffering. Psychiatry is helpful for developing a happier, stronger, more resilient self, but Psychiatry perpetuates the idea that we are limited selves, separate from each other and the rest of the world.

The Buddhist disciplines that I am drawn to challenge this view that we are isolated, separate beings. This separateness is only the “apparent” reality. The “real” reality is that we are all One. From this perspective, all the benefit from therapy and medication in the world still leaves us suffering in a fundamental way, due to our attachment to and identification with the limited self. Western Psychiatry eases suffering, but does not cut the root of suffering. Disciplines such as Zen offer true liberation, which involves letting go of our identification with the self.

Despite the value of these Eastern disciplines, they can be limited in their ability to assist those dealing with psychological problems or emotional distress. They can also be limited in their ability to facilitate awareness of our shadow side. People can spend years on a cushion avoiding their own personal psychological and emotional issues. Destructive emotional and behavioral patterns can persist even in very enlightened masters. I think that the Western and Eastern approaches can complement each other well, and that each has something important to offer the other. They both offer the relief of suffering and can facilitate the process — increasing awareness, consciousness, and awakening.

*How much use do you make of psychiatric drugs in your practice? There have been tremendous advances over the*

*last 30 years, in the understanding and treatment of bipolar disorder and schizophrenia, is that correct? Tell us a bit about that?*

By the time most people have made an appointment with a Psychiatrist, they have come to a point in their lives where they are seriously considering medication. I frequently see people in crisis, who aren't able to function, or who have severe mood, anxiety, or psychotic symptoms. Many of these people need medications in order to function or have the quality of life they desire, so I carefully prescribe medications to many of my patients. Medications have had a tremendous impact over the past 30-40 years for those struggling with severe mental illness, such as Schizophrenia or Bipolar Disorder. In the past, many of the severely mentally ill were institutionalized. Now, with progress in biological Psychiatry, many people with severe mental illness are able to maintain productive work lives and significant relationships, none of which would be possible without the medication advancements we have seen. I have seen medications have a tremendous positive impact on the well-being of many of my patients. Medications are often an important part of the comprehensive approach that I try to take with people.

*At the same time, I was reading in The New York Times, that some of the latest generation of psychiatric drugs have proven to have significant side effects, drugs such as Zyprexa...and in that article, it said that some studies were finding that the older generation of drugs may still be the better ones to use. So, it seems like it is three steps forward, and 2 steps back, and so on. Will you comment on that?*

With each new development in medication, there is initially a great deal of enthusiasm. With the atypical anti-psychotics like Zyprexa for example, it seemed that these medications offered all of the benefits of the older anti-psychotic medications without the side effects. Now that the atypical anti-psychotics have been in use for a while, we are discovering that they have problems that weren't initially apparent, such as increased weight, blood sugar or cholesterol levels. These side effects aren't as immediate and dramatic as some of the movement disorders, sedation and other side effects commonly encountered with the

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older medications, but the long-term impact on overall health may be more severe with some of the newer medications. I think the underlying lesson is that there are no “magic bullets”. There are many medications that offer a great deal of benefit, but they all have risks that need to be taken into account. I try to do my best to provide people with the information they need to make an informed choice, with full awareness of the potential side effects.

*What are the rewards, and what are the challenges of practicing in Ann Arbor, where so many people already have some familiarity with holistic modalities?*

Ann Arbor is a great place to have an integrative practice. There are many gifted practitioners of the healing arts, offering a broad array of alternative therapies. People in Ann Arbor are sophisticated and well informed when it comes to holistic medicine. The area is saturated with a large number of therapists and alternative practitioners, so there may be an over-abundance of choices for clients, and there is naturally competition amongst the professionals for those seeking services. In my experience, there are not many Psychiatrists in the area that are incorporating complementary approaches into their practices, so I have found a certain niche.

*Are you associated with one or more of the local hospitals? What is your relationship to the allopathic system, and the local allopathic establishment?*

I do not have a formal relationship with any of the area hospitals, though I may seek this out more in the future. I was heavily involved with the hospital-based allopathic institutions during my training and I was ready for a

## Interview with Dr. Paul Thielking (continued)

change coming out of residency, so I have really enjoyed the freedom to practice in my own way over these past couple years. I have good informal relationships with some local Psychiatrists and hospitals, and I may become more involved with local allopathic institutions in the future, but for now my private practice is very challenging and rewarding. I don't anticipate myself shifting course any time soon.

*What else might you care to tell me about, in terms of your views of medicine, psychiatry, and/or healing?*

Over the past several years, I have immersed myself in Zen Buddhism. Zen practice, along with my family, is the heart of my life, so I tend to see things through the lens of a Zen student. In Zen practice, we vow to save all sentient beings; to put off one's own ultimate liberation until all beings have been awakened. From this perspective, everything in our daily life becomes upaya, or "skillful means" for helping others awaken. All of the healing approaches that I use are skillful means for relieving suffering and facilitating the process of growth and expanding consciousness. Each approach has its own particular strengths and weaknesses. Biological Psychiatry is quite effective in providing symptom relief and stabilization, but is not necessarily helpful for facilitating deeper or more subtle levels of growth and healing. Complementary healing approaches that involve breathing, sound and meditation can facilitate healing in a deeper, more subtle way than simply taking a medication, but may not be very helpful for someone in acute distress or crisis. An important aspect of my work with people is using the most appropriate healing approach given the patient's individual circumstances. All of the approaches have something important to offer, and all can be healing in their own respective way. I try to be open and flexible when I am with patients and follow my intuition to best serve the person in front of me.

*Do you like practicing medicine? What aspect of your work are you most passionate about? What do you love about what you do?*

I really enjoy my private practice, where I can offer a comprehensive approach to working with people. I have been involved in clinics where my role is limited to "medication management". I find this quite limiting and constricting. The aspects of working with others that I enjoy most are psychotherapy and the "complementary" or "alternative" approaches that I use. The most rewarding part of my work is to facilitate growth and healing in others. Ultimately, my passion is for helping others see beyond their limited views of themselves, to appreciate the beauty and mystery of life, even with all of its pain and suffering.

*What aspect of your work do you find least interesting? And what is most burdensome?*

For me, the psychopharmacology is the least interesting. I recognize the importance of medication, and I make sure that I am up-to-date with the literature and use drugs wisely and safely, but I am much more interested in psychotherapy and the alternative healing approaches. The tasks involved with running the business side of a practice, including the billing and dealing with insurance companies, is the most burdensome. I have been working to develop a more positive attitude towards these aspects of private practice, but it can be difficult because of the time required. Dealing with the pharmaceutical industry can also feel burdensome. On one hand, I appreciate the medications and the information that the drug representatives provide. On the other hand, I recognize that their goal is to get me to prescribe more of their particular medication, and I have some aversion to listening to the frequent sales pitches day after day.

*Do you go to professional conferences? Which ones?*

I used to attend the annual meeting of the American Psychiatric Association, but haven't had an opportunity to attend for the past couple years. Most recently I attended a conference by the American Group Psychotherapy Association, which involved a two-day workshop on a Meditation-Based Psychotherapy Process Group.

*Are you raising a family? What are the gifts for you of family life?*

My wife and I have a 3 month-old son named Kai. This is our first child and it has been a wonderful experience. Having a child has been a life-changing event. Nothing else quite mimics the love you feel for a child- it's beyond what I could have imagined. He is such a joy and I am trying to spend as much time as possible at home with him.

*What do you like to do for fun?*

I really enjoy the outdoors. I like hiking. My wife and I like to travel, and sometimes go Scuba diving. I have an informal "toning group", where we explore the use of sound as a healing tool. This is a pleasure that I always look forward to. On weekends, I love walking our dog and spending quiet time with my family.

*What places have you been to that are "furthest away" from Ann Arbor, geographically? Are there some places you would love to travel to?*

I've done a lot of traveling in Central and South America, to places like Belize, Honduras and Brazil. I once spent a month in Spain, which remains one of my favorite trips. Following medical school, my wife and I did a three-week trek around the Annapurna circuit in Nepal. I probably wouldn't repeat this venture given the current political climate there. Last year, we went scuba diving in Palau, which is an amazing country in Micronesia.

*Anything else you'd like to impart, or express?*

Only that I am deeply appreciative of the professional opportunity I have encountered here in Ann Arbor. I feel fortunate to be part of such an open, vibrant community. I would also like to thank you and the *Crazy Wisdom Journal* for this opportunity to share a little about myself.

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# Interview with Dr. Amy L. Dean

*Bill Zirinsky: Please tell us about your training and credentials.*

Amy L. Dean: I'm board certified in Internal Medicine and board eligible in environmental medicine. I have a B.S. in Biology from University of Michigan and my Doctor of Osteopathy is from Kirksville College of Osteopathic Medicine in Kirksville, Missouri, the birthplace of osteopathy. My residency training was in inner city Detroit at St. John Detroit Riverview Hospital. I started attending holistic medical conferences over 11 years ago and have spent time training with some of the nationally and internationally known experts in holistic and osteopathic medicine.

*Bill Zirinsky: How old are you? Where were you raised? And how long have you lived in the Ann Arbor area?*

Amy L. Dean: I'm 32 years old and was raised in the Flint area. I moved to Ann Arbor for undergrad then left for medical school and residency. Now, I'm back for good.

*BZ: When did you realize you wanted to be a doctor? Were other family members of yours doctors or nurses or in the healing professions? Were there other things you wanted to be when you were growing up, and if so, what?*

Dean: My mom's got a picture of me in a makeshift surgical mask, hat and gown when I was about 4 years old - operating on my teddy bear. Growing up, I also considered law, very briefly, and psychology. It was not until high school that I began seriously thinking about becoming a doctor. I have an uncle who is a retired vascular surgeon and a cousin who is a radiologist.

"My mom's got a picture of me in a makeshift surgical mask, hat and gown when I was about 4 years old - operating on my teddy bear."

*BZ: When did you set up your practice? I know it's not always that easy to set up a new practice, or maybe it has been for you? Tell us some about that aspect, please.*

Dean: I opened my practice almost two years ago, on Ann Arbor's West Side. It was quite a challenge coming out of residency and opening a solo practice. Some of my peers thought I was crazy. The guidance of my physician and business mentors has been a real blessing and I was fortunate to have my sister design the clinic. Starting up a new medical clinic is much more difficult than entering a position at an established clinic. I think the beauty of this practice is that its mission has been to provide top-notch holistic care right from day one as opposed to practices that need to make the transition from traditional medicine into a holistic based model.

*What are the main areas of your practice?*

I primarily practice holistic Internal Medicine and osteopathic manipulative medicine. Environmental Medicine is also an important aspect of my approach. I find that this combination of care is very effective in restoring patient health because it addresses the function and structure of the patients' mind and body. I integrate osteopathic medicine in with holistic medicine often working on weak or stressed organs in the body. Directly working on organs such as the lungs, kidneys or brain with gentle manipulation restores blood flow, drainage and energetic balance to the body. From an environmental perspective, when I evaluate and treat patients it is important to see them as an open system of biochemistry and energy that is influenced by their environment, diet and lifestyle.

*In what ways do you practice "traditional" medicine? Please give some specific examples.*

Practicing holistic medicine, I still look at disease processes through the lens of traditional medicine. I often blend

traditional diagnostic tests with more advanced holistic blood work, imaging, and osteopathic diagnostic methods. With patients who are acutely ill, sometimes I find it necessary to stabilize their health with drug or surgical intervention while supporting the body with holistic and osteopathic treatment. I refer patients to specialists for traditional care when warranted.

*In what ways do you practice holistic or integrative or complementary medicine? Please give us some specific examples.*

Trained as an osteopath, I see the body as a whole and if given the right healing tools, it can heal itself. In my clinic, I tailor therapy to each individual patient. Intervening with diet changes and lifestyle changes can be helpful in restoring patients' health as well as educating them to be pro-active in making the necessary changes for better health. In addition, supplementing their diet with specific nutrients restores proper function of various organ systems and optimizes the biochemistry in their body. I also improve the structure of their physical and energy body with osteopathic manipulative medicine.

*Tell us more, please, about your views about medicine, in general.*

In general, traditional medicine can't be beat for acute medical care. However, many people these days, especially the patients I'm seeing, have chronic diseases that are minimally improved or not improved by traditional drug therapy alone. Blending the best of traditional and holistic medical care provides patients access to both worlds. Holistic medicine requires the patient to be more proactive. It's more than just giving the patient a drug or even a supplement. I am a guide on their journey to restore health. But, the patients on some level have to take charge of their life and it usually requires some degree of effort to re-establish wellness.

*What are the rewards, and what are the challenges of practicing in Ann Arbor, where so many people already have some familiarity with holistic modalities?*

The people in Ann Arbor are open-minded and savvy when it comes to holistic medicine. They are well read and often ask many questions, and although sometimes there are no answers yet, they keep me on my toes. I often attend conferences to stay current with the new developments and treatments in holistic medicine.

*Are you associated with one or more of the local hospitals? What is your relationship to the allopathic system, and the local allopathic establishment?*

Although D.O.s and M.D.s have equal licensing and practice privileges, I choose to focus on clinical medicine and do not admit patients to the hospital. However, I do refer to specialists at St. Joseph Hospital for patients who

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have needs for specialists or hospital care. The allopathic system seems to be open to holistic medicine in Ann Arbor. I have attended meetings of the Washtenaw County Medical Society and the physicians I met were interested and appeared to be supportive of the work that I do.

*Do you like practicing medicine? What aspect of your work are you most passionate about? What do you love about what you do?*



Amy L. Dean, D.O., is an Osteopath who is Board Certified in Internal Medicine, and she specializes in Holistic Medicine and Environmental Medicine.

I love practicing and studying medicine and I know it is what I was meant to do. I am passionate about working with patients to restore their health and I love to see their lives improve. Each journey on the path to better health is unique and I consider it an honor to share that journey.

*What aspect of your work do you find least interesting? And what is most burdensome?*

The least interesting aspect of my work is working with the insurance companies. They are still struggling to understand the benefits of holistic medicine for both the patient and the insurance industry. Change is slow, but I think inroads are being made. It is a bit of a burden trying to reach everyone who is interested in holistic care, regardless of income level. Because insurance does not cover many of the holistic services or allot enough time to spend with patients, there is a large segment of the population that does not have access to alternative medicine. Until services are covered, educating the public about their environment and health is at least a good place to start.

*Are you raising a family? What are the gifts for you, of family life?*

I'm not raising a family. However, while growing up, my family gave me several gifts including love, compassion and integrity. I'm very grateful for these gifts. They are and will always be a very positive influence in my life.

*What do you like to do for fun?*

For fun, I really enjoy playing my alto sax. Right now, I'm playing in a 70's jazz/funk band led by David Swain, who also leads the II V I orchestra. I also enjoy reading, listening to live music and watching movies.

*What places have you been to that are "furthest away" from Ann Arbor, geographically?*

At this time, most of my travel is to medical conferences. Seattle is the farthest place I've traveled. I enjoy vacationing around Traverse City and Petoskey. I'd love to travel to Paris, and hopefully will do so in the near future.

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# Interview with Dr. Malcolm Sickels

*Bill Zirinsky: Please tell us about your training and credentials?*

Malcolm Sickels: I did my undergrad at the University of Illinois, where I ended up as a psych major (long enough to know I didn't want to stay in the field, but versed in the foundations); then a few years later took the pre-requisites for med school at Washtenaw Community College, med school at the University of Michigan, and residency in family medicine at Flower Hospital in Sylvania, Ohio. That got me a BA and an MD and board certified in family medicine by the AAFP (American Academy of Family Physicians). I've also done additional training to become board certified in holistic medicine by the ABHM (American Board of Holistic Medicine) and in Chelation therapy by ACAM (the American College for the Advancement of Medicine).

*Bill Zirinsky: How old are you? Where were you raised? How long have you lived in the Ann Arbor area? I know that you and your wife are raising a family. How many kids do you have, and how old are they?*

Malcolm Sickels: Today, I'm 37 (I keep losing track). I was born and raised in the south side of Chicago, in Hyde Park. I've lived in Ann Arbor for 14 of the 15 years since I left college. Amy and I have three girls between us, ages 8 through 14. Having a family relatively early for a physician helped me keep my perspective about the training: medicine can suck all of the life, energy and time out of you- but I had a prior commitment and didn't let it take over my life (too much).

*BZ: When did you realize you wanted to be a doctor? Were other family members of yours doctors or nurses or in the healing professions? Were there other things you wanted to be when you were growing up, and if so, what?*

Malcolm Sickels: I never even considered medicine until I was working at the Rudolf Steiner school here in Ann Arbor. The combination of people there using natural medicines routinely and several of the parents' turning out to be physicians showed me two things: natural treatments are a viable alternative to conventional medicine and doctors are just regular people. There weren't any other medical people in my house: I'd never known any doctors or nurses outside of the exam room (which had been a rare place for me to be) until working at the Steiner school. My

"...Knowing all the additional therapies I know, I can't go back to just doing orthodox medicine. That would be like asking a conventional doc to treat everything without using antibiotics: they would say, "but that can be the best treatment!" If I joined a conventional practice they wouldn't want me to be introducing therapies they knew nothing about into the mix. Frankly, I wouldn't want to be dealing with their train-wrecks, either. I also feel that the 15 (or 10 or 8 or 6...) minute appointment is absurd and not sustainable: it simply isn't possible to convey the amount of information that will make a difference in someone's health in that kind of appointment."

parents both went to the University of Chicago where they had steeped in "human development" (a real major at the time), so I'd had plenty of exposure to the fallout of Freudianism and my mom was a social worker (in child placement), which is remotely health related. Looking back, it's possible to see things I used to do that would have set me up for medicine: my mom reminded me of how much I loved putting bandages on myself, I used to dispense health advice at the drop of a hat in college. But maybe everyone does this to some extent: it could well be a selection bias in my head. I never really had anything that I planned or wanted to be, just some vague ideas about wanting to help people.

*BZ: When did you set up your practice? I know it's not always that easy to set up a new practice, or maybe it has been for you? Tell us some about that aspect, please.*

Malcolm Sickels: Toward the end of residency, I knew I

wanted to have my own office here in Ann Arbor. I spent some time looking for part-time positions (as physicians, we don't have "jobs," we have "positions," weird, huh?), but they all fell through. So, a couple months out of residency I realized I'd have to go it alone, from scratch. Thankfully, my partner (and now wife) Amy was earning enough that we wouldn't go bankrupt right away and with the little equity we had in our house I bought my office and finally had it opened six months out of residency. Frankly, it was somewhat nerve-wracking to put everything on the line like that, but I didn't feel like I had a choice: knowing all the additional therapies I know, I can't go back to just doing orthodox medicine. That would be like asking a conventional doc to treat everything without using antibiotics: they would say, "but that can be the best treatment!" If I joined a conventional practice they wouldn't want me to be introducing therapies they knew nothing about into the mix. Frankly, I wouldn't want to be dealing with their train-wrecks, either. I also feel that the 15 (or 10 or 8 or 6...) minute appointment is absurd and not sustainable: it simply isn't possible to convey the amount of information that will make a difference in someone's health in that kind of appointment. I suppose if each person was reduced to a single symptom and only allowed to present that single symptom at the visit (to the exclusion of things that may or may not be related), it might be possible to accomplish in that kind of time frame, but that's not medicine: that's an assembly line. So, I see people for about an hour in my office. Sometimes it goes longer.

Starting up was a bit harrowing: how do I get people to know I'm here? It started slow and in April I started looking at not being able to cover the payments on my office. I got a call from Hurley in Flint looking for a doc to fill in for a couple days a week, which ended up working out perfectly. I was able to cover my expenses and serve some of the low-income population I'm not able to treat in my office here, all in the time I would be idle anyway, plus I'd get to sneak in some good education and nutritional therapies as well. It actually worked out much better than I'd imagined: I've been able to improve the health of quite a few people who'd been getting strung along by conventional medicine for a long time, and the volume up there lets me see some of the tests I use in a broader population. Stunningly, just about everyone I've tested vitamin D levels on this month has been below the limits of detection.

Now, just over a year out of opening my office, I'm booked up a month in advance and I'm going to have to hire front office staff and stop going up to Flint. Someday I hope to be able to pay myself.

*What are the main areas of your practice?*

There are a lot of names for the kind of stuff I do: holistic medicine, complementary medicine, integrative medicine, functional medicine, orthomolecular medicine, nutritional medicine, natural medicine, and innovative medicine. What it comes down to is improving health by addressing the causes of the disease with the least side effects. Often nutritional interventions and supplementation can do the job, sometimes other lifestyle or non-chemical interventions do it, and sometimes orthodox medical or surgical interventions are necessary. The patient guides quite a bit of the treatment: some people want to avoid medications completely, while others are perfectly happy with medications.

*In what ways do you practice "traditional" medicine?*

Orthodox medicine is great for some things, mostly acute illnesses: if your arm comes off, you need a surgeon; if you are having bacterial meningitis, go to the hospital and get antibiotics. Not to say there isn't anything we can do to optimize the treatment, but the conventional treatments are the foundation of those treatments. These were the things that made it the primary school of treatment. I'm conventionally trained as a physician and boarded in family medicine, so I can do all the regular stuff any other family doctor can do: regular prescriptions, minor



Malcolm Sickels, MD, is Board Certified in Family Medicine. He is also training to become board certified in Holistic Medicine and in Chelation Therapy.

procedures, referrals to specialists, EKGs, labs, radiology orders, etc. Since I'm not focusing on procedures (many conventional doctors emphasize them because they get reimbursed well), I don't have the equipment in my office.

*In what ways do you practice holistic or integrative or complementary medicine? Please give some specific examples.*

The conventional medicine model starts to break down with many of the chronic diseases, and the refusal to acknowledge nutrition as crucial doesn't help. Besides nutritional support for most conditions, there are many things I've had some good success with. Amino acid therapy for mood disorders, bioidentical hormones, removal of toxic heavy metals, reducing cardiovascular risk and improving heart function with nutrition are some of the examples, but the key is finding and treating the root of the problem.

*Tell us more, please, about your views about medicine, in general.*

Since I got into this to improve people's health, it's important to get to the root of the problem and fix it as close to that point as possible rather than just treating and covering up the symptoms. Often the symptoms we have, such as a fever, are part of our body's way of fighting the disease. So, suppressing a fever just because it is there deprives the body of its benefits: decreased replication of the bacteria or virus, increase in immune molecules, etc. This isn't to say that we have to suffer with the symptoms: if the fever is getting too unpleasant, then by all means, go ahead and bring it down a bit, just understand the tradeoff you're making.

Using medicine or nutrients for therapy is another interesting contrast. When we use medicines, we are (usually) using single, unique molecules that have never been seen on the planet before (they have to be new and unique to be patentable). When we give medicines, we have to watch for side effects and the long term use typically has some potential for hurting other parts of the body: we're supporting one part but stressing another part and the trade-off should justify the therapy. Additionally, these unique molecules are fairly persistent in the environment since there isn't an established way to break them down completely. We're able to measure Prozac in the water in some areas already. With nutritional therapies, we're supporting the normal function of the body: while I may give something to help one area the same deficiency is affecting other

areas and so it ends up helping in multiple areas.

*What are the rewards, and what are the challenges, of practicing in Ann Arbor, where so many people already have some familiarity with holistic modalities?*

Some of the nice things are that there's a community of holistic physicians here who are supportive of each other. Despite having a fairly high concentration of holistic physicians, many of them are full. So, we're able to root for each other without feeling competitive.

Among the public, there's a higher level of understanding of holistic approaches. This is nice because often people already have a good foundation, but can be challenging since I then have to find the higher level therapies once the basic things have already been done.

*Are you associated with one or more of the local hospitals? What is your relationship to the allopathic system, and the local allopathic establishment?*

Inpatient medicine is a different beast than outpatient. I'm trained in hospital (inpatient) medicine, but I had to make a decision about how to spend my time. I'm spending my time on keeping up on office-based integrative medicine, so I let the hospitalists take care of anyone that needs to go to the hospital. My job is to help keep them from needing to go there.

*What else might you care to tell me about, in terms of your views of medicine and/or healing?*

During residency, where only orthodox medicine was done, we were following the pronouncements in the journals and it felt a little inane: the target blood pressures were changing all the time, this week, beta-blockers are first-line agents, last week a diuretic was the first thing to use. The patient was getting lost and we were treating numbers: blood pressure, cholesterol, etc. While the numbers certainly are useful, the numbers are not the patient and we can't lose sight of the patient.

With integrative medicine, we have the advantage of a much larger pool of possible therapies. Beyond the conventional medications, there are the nutritional, herbal, mind-body and various other modalities. We can keep trying until we find the best treatment for the patient.

*Do you like practicing medicine? What aspects of your work are you most passionate about?*

I love doing the kind of medicine I do. Making a positive difference in people's lives is always a wonderful thing and anyone who's done it loves it.

Bringing innovative therapies to people who didn't know of the alternatives is one of my favorite aspects: expanding someone's horizons and helping them to see the greater possibilities.

*What aspect of your work do you find least interesting? And what is most burdensome?*

Always, dealing with billing and insurance is the most loathsome complication. No one knows what the insurance companies will actually pay for. A has a contract that is between them and the insurance company and I have no idea what the terms of the contract are, yet I need to minimize the patient's out-of-pocket expenses. Sometimes, the insurance throws up additional roadblocks to the patient's therapy and requires the physician to justify the treatment. This can be somewhat insulting to the clinician, since it implies that we aren't ordering the tests for any good reason. I can understand the motivation behind this, since sometimes tests can be ordered unnecessarily, but if the true costs of the extra work were added up (right now much of that cost is born by the physician who has to fill out the paperwork without any reimbursement) there wouldn't be significant cost savings.

*Do you go to professional conferences? Which ones?*

When I started going to "alternative medicine" conferences, they were long on promise but short on useful therapies. Eventually, I got to the conferences of doctors who were actually doing the integrative treatments and getting results. ACAM, the American College for the Advancement of Medicine, has been fantastic for learning about interesting therapies. Many of the foundations of my practice I learned there. They've been around for over 30

"Now, just over a year out of opening my office, I'm booked up a month in advance and I'm going to have to hire front office staff and stop going up to Flint. Someday I hope to be able to pay myself."

years now and have some great educational programs. I've also gone to the Bio-identical Hormone Society conference and the American Board of Holistic Medicine, as well as a few other conferences here and there. Conferences are important since it is where we get to compare notes on how therapies work for our patients. Without deep pockets to do vast research studies, we have to rely on our clinical experience and what research there is. Surprisingly, there is some research, but it isn't always in the most obvious places.

*As a young college student, you worked for a time at Crazy Wisdom Bookstore, when it was in its former location on North Fourth Avenue. In terms of the store's content, was working at the store in any way useful to you, and if so, in what way?*

Fresh out of college with little money, I didn't have the resources to get lots of books, and working at CW didn't allow much downtime for checking out the books. However, I was able to browse the titles and get an idea of what was out there. It's nice to have that kind of concentration of books in one store: it makes drawing connections between the different subjects much easier.

In order to be open to alternatives to the orthodox treatments, it helps to have a good foundation in metaphysics and the philosophy that there is more going on than what can be measured. Crazy Wisdom is that gateway that holds the seeds for opening the mind. I still reflect back on the ideas I gleaned from issues of *The Sun* that I got while I was there, as well as the ideas from NLP, Louise Hay, and several others. The fact that I was exposed to these before medical school (even before I considered medical school) made a huge difference in my retaining my sanity and perspective during the rigors of medical training.

*What are the gifts for you of family life?*

Family has certainly helped me keep my sanity as well as threatened it. Having kids before medical school gave me a perspective few med students have. My oldest daughter was entering kindergarten when I started med school: we had been spending a lot of time together before that and I knew it was all coming to an end since my time with her would be much more limited. However, that loss helped me to be determined to keep my humanity during medical school. These days my family gives me a reason to come home from the office (where I might otherwise spend all my time). It seems so easy to let taking care of others take over your own life, so this certainly helps me keep my feet on the ground. My wife has also been incredibly supportive of my starting my own practice both financially and emotionally.

*What do you like to do for fun?*

I ask my patients that on their first visit: a good thing that I should get asked it, too. What I like to do is spend time with my family, especially things where we're snuggled up together like watching a movie on the couch; also riding my bike, playing frisbee, skiing, cooking... Many of these are things that don't happen very often (I think I've gone skiing twice in the past 14 years), but still, there they are. Living in a cohousing community brings some unique pleasures: cooking a meal for 30+ people each month, playing four square with the neighbors (adults and kids), chatting and joking when we run into each other around the community (which can sometimes make it take a long time to get somewhere).

*What places have you been to that are "furthest away" from Ann Arbor, geographically?*

I spent my last semester of undergrad in Vienna, Austria, a wonderful way to get those last credits and a different perspective on life. Buying most of my food at the central market and bringing it home on the streetcars was a new experience for me, and being a vegetarian in Central Europe was a challenge. I spent nearly a month in Greece while I was there, as well as some time in Prague, Berlin and Budapest... Recently, however, the furthest I've been is California and Washington for alternative medicine conferences, but the stuff is so interesting that I hardly leave the building, so I don't get to see the area much.

*Anything else you'd like to impart, or express?*

There's a lot to say and a lot to learn. It would be great if I had unlimited time to gather all the information and more time to talk about it. Part of the reason I'm giving talks every month is to broaden people's horizons. Teaching is intrinsic to medicine: people need to understand their disease and what the treatment does or they won't take good care of themselves. The word "doctor" comes from the Latin word "docere," to teach, and I think a lot of that has been lost in medicine.

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# Interview with Dr. Debra Alspector



Debra Alspector, MD, is Board Certified in Family Practice and in Holistic Medicine. She divides her time between a family medicine practice and raising her three young children.

*Bill Zirinsky: Please tell us about your training and credentials?*

Debra Alspector: I received a BA in Neuroscience from Oberlin College in Ohio in 1991. Then I earned my MD at Wayne State University School of Medicine in Detroit in 1996. In 1999, I completed the Family Practice three-year residency program at the University of California in San Francisco. I have been licensed to practice medicine in the state of Michigan since 1999, board-certified in Family Practice since 2000, and board-certified in holistic medicine since 2003. I'm a member of the American Academy of Family Practice and the American Holistic Medical Association.

*Bill Zirinsky: How old are you? Where were you raised? And how long have you lived in the Ann Arbor area?*

Debra Alspector: I am 36 years old. I grew up in Bloomfield Hills (NW suburb of Detroit). I lived in Ann Arbor after college in 1990 for a couple years before medical school—when I met my husband; now we've lived in Ann Arbor continuously since 2000.

*BZ: When did you realize you wanted to be a doctor? Were other family members of yours doctors or nurses or in the healing professions? Were there other things you wanted to be when you were growing up, and if so, what?*

Alspector: I've wanted to be a doctor since I was about 11 years old; but I got REALLY inspired, after I was myself a patient in the hospital when I was 14, and felt that I was not always treated respectfully, and so I wanted to work in the profession to make it better for patients. I didn't have any doctors in my family. I wanted to be a potter and cellist.

*BZ: When did you set up your practice? I know it's not always that easy to set up a new practice, or maybe it has been for you? Tell us some about that aspect, please? Also, Malcolm Sickels mentioned to me that you are juggling your practice with being a mom. Please describe for our readers what that is like for you?*

Alspector: I started private practice in 2003, with help and encouragement from Dr. Jack Scheerer and Dr. Edward Lev

Linkner, both holistic family MDs at the Parkway Center (purple castle). I see patients very part-time (10-15 hrs/week) and some odd hours, so I am home w/ our kids a lot, and so that my husband could be home w/ them when I was working evenings & weekends. Sometimes my kids visit me at my office.

Now, I have an additional office on the Westside of Ann Arbor (sublet from Malcolm Sickels), closer to my home, so I can go back and forth more quickly to have more time w/ my family.

I have a small, solo practice, with a relaxed atmosphere, where I can build strong relationships with patients. I personally manage all aspects of patient care—from scheduling appointments, to taking questions by phone or email, to making referrals. My patient visits are usually 30-90 minutes.

*What are the main areas of your practice?*

Primary care family practice, adults & kids, men & women. Focus on prevention and optimizing wellness/vitality. Holistic approach—mind, body, spirit connections.

Emphasis on trying to get to the underlying cause of the problem, not just treating symptoms. Collaborative approach, working very closely w/ patients to decide course of action together; we might do research together, I often recommend a book or speaking to another healthcare practitioner. My areas of special interest are chronic fatigue, chronic sinusitis, migraines, candida, mood disorders, menstrual disorders, autism-spectrum, homebirth support, attachment parenting, breastfeeding support, immunization decisions.

*In what ways do you practice "traditional" medicine? Give me some specific examples.*

I generally take an allopathic/mainstream/western medicine approach to history taking, physical exam, ordering tests, & recommending prescription medications or other therapies. For example, a patient comes in with sore throat, I ask about fever, cough, exposure to others who are ill; I look at their throat, listen to lungs w/ a stethoscope, and may do a rapid strep test of the throat. I might recommend antibiotics, but with a detailed discussion of the pros & cons of antibiotics, and the alternatives, or treatments to do along w/ antibiotics (see below).

*In what ways do you practice holistic or integrative or complementary medicine? Please give us some specific examples.*

I have a big focus on multifactorial cause of illness or loss of well-being, w/ focus on nutrition, & I use some herbs, supplements & homeopathy, some bodywork & guided imagery. I refer to acupuncturist or massage therapist, just as I may refer to dermatologist or cardiologist. Functional testing may include neurotransmitters, hormones, toxins, food sensitivities, leaky gut.

Sore throat example—I might recommend (in addition to or instead of antibiotics, depending on the situation & the patient's interest/feelings) garlic, Echinacea, astragalus, goldenseal, mushroom extract, propolis, elderberry, slippery elm, or licorice root; avoiding dairy and sugar; and a homeopathic remedy; steam w/ eucalyptus essential oil; relaxation/deep breathing.

*Tell us more, please, about your views about medicine, in general.*

In US, we waste lots of money on late-stage treatment of disease, instead of prevention—much of which needs to be

done at public health level (nutrition in schools for example), public policies (like incentives for people to drive less, watch less TV, take yoga classes, etc)

People need more time w/ their healthcare practitioner to really get to know each other, not to feel rushed. There are usually multiple factors causing symptoms/unwellness, such as stress, diet, physical activity, environmental toxins/pollutants in food, water, air, etc; hormone or neurotransmitter imbalances; improper breathing or posture; gastrointestinal imbalance, etc.

*What are the rewards, and what are the challenges of practicing in Ann Arbor, where so many people already have some familiarity with holistic modalities?*

It's really fun to work with people who are motivated and are already using some natural remedies. I learn a lot from patients who bring their supplements or a book or website that I may not be familiar with. Often patients get more motivated when they understand the inter-connectedness of health issues.

Often I can help guide people through an overabundance of often conflicting info, especially from the Internet. Because many people are so knowledgeable, they ask detailed questions and we may take quite a bit of time discussing pro & cons of using a particular herb, of example, and its mechanism of action, adverse effects, etc.

*Are you associated with one or more of the local hospitals? What is your relationship to the allopathic system, and the local allopathic establishment?*

I have hospital privileges at St Joseph, but I choose not to practice inpatient medicine, because I prefer to focus my attention/time on keeping people healthy and out of the hospital.

I occasionally consult by phone with, or refer patients to, allopathic specialists, such as dermatologists or cardiologists. I try to know which specialists have a holistic outlook, or at least an open mind, to hopefully increase the comfort level for my patients and get the best care.

*What else might you care to tell me about, in terms of your views of medicine and/or healing?*

It's hard for me to distinguish the practice of holistic medicine from the practice of medicine, because it's always seemed to me that holistic practice is what medicine is supposed to be.

Before I went to medical school, I considered going to a naturopathic school or studying acupuncture. I resolved that I would not allow medical school to make me cynical about approaches to medicine other than what I would be taught there; I decided to study these other approaches after I emerged from my training with MD in hand. As it happened, I was utterly exhausted by the process of medical school and residency, and it's taken me a long time to recover.

“... I got REALLY inspired, after I was myself a patient in the hospital when I was 14, and felt that I was not always treated respectfully, and so I wanted to work in the profession to make it better for patients. I didn't have any doctors in my family. I wanted to be a potter and cellist.”

Why had I become a doctor in the first place? My experiences as a patient when I was fourteen insured that I had a pretty good idea of what it's like to be on the other side of the stethoscope. In the hospital, enduring an extensive workup with lots of testing and surgery, I learned the hard way to empathize with what many of my patients have gone through. Although the way I was treated was never abusive, it was traumatic, and part of that could have been alleviated by an approach to patient care that I did not receive.

Much of the difficulty for me at the time involved long periods of waiting during which what was happening to me or going to happen to me was either explained or left unexplained in ways that made me feel more like a number

than a person. Ironically, one of the most upsetting moments was when a social worker came and told me that most people in my situation had so much difficulty they couldn't finish out the school year. This was supposed to be comforting; instead it made the weight of the experience come crashing down on me. I know well how vulnerable we feel when we are sick and not on our home turf.

Through a lack of emotional support perhaps, I came to know that the practice of medicine ought to be interpersonal and emotional, not purely clinical; that a physician can make a bond and feel for and with patients, even do some physical touch. The standard training I received in medical school was counterintuitive to me — it said, keep detached, don't get too involved. I tried hard not to buy into that.

Nevertheless, after med school, it took a long time for me to move away from the idea that emotional involvement should be avoided, back to the idea that had seemed so natural to me before: that the emotions — of both patient and doctor — are at the core of healing.

“... the practice of medicine ought to be interpersonal and emotional, not purely clinical; that a physician can make a bond and feel for and with patients, even do some physical touch. The standard training I received in medical school was counterintuitive to me — it said, keep detached, don't get too involved. I tried hard not to buy into that.”

I was so effectively indoctrinated by the experience of medical school and residency that a huge part of my journey as a physician has been to heal myself from that process. I've found the structure I need to do this within holistic practice and the holistic community. Working with other such practitioners has enabled me to recover from how jaded I'd become. I wasn't even receptive to learning new things for quite some time because my training had been so demoralizing. More recently, I've been particularly inspired by the debunking of several received notions in standard Western medicine beliefs, such as the idea that fevers must be treated, that aren't really based on fact. Such assumptions often die hard, but if no one ever questions them, they plague us indefinitely.

There seems to be a high comfort level among holistic practitioners and researchers in challenging accepted ideas; within conventional Western medicine, I think there's more hesitancy. Open-minded, holistic thinkers realize that just because doctors have been doing something for a hundred years doesn't mean it's right. The discovery of the benefits of hand-washing and antibiotic resistance were changes that happened slowly in part because of the fear of questioning what we thought we know, a fear that's been embedded in Western medicine throughout its history. Instead, evidence-based medicine (and the idea that if something has worked somewhere else, why not look into it) inspires me and guides my practice.

After medical school, one of the most exciting parts of my training was in the use of acupuncture for de-toxing. At that time, there wasn't really much that Western medicine had to offer in the treatment of addiction, and it was exciting to see Chinese medicine help where Western medicine could not. In 1996, I went to China and trained in the use of Traditional Chinese Medicine with acupuncture and massage for many disorders, including chronic back pain, an example of a highly debilitating problem for which Western medicine provides little help, and sometimes offers risky surgeries of questionable benefit. That knowledge and approaches with real benefit existed outside the mainstream invigorated my spirit and my practice.

It's almost hard for me to believe that so many people see holistic medicine as an alternative practice because it doesn't seem unusual to me. As a family practice doctor, I feel an important part of medicine is that good patient care is not just a matter of addressing a specific issue that has come up, but looking at the larger context; each patient is not merely an individual but a member of a family and a member of a community. For me, the distance between good family practice and holistic practice hasn't been such a big leap.

*Do you like practicing medicine? What aspect of your work are you most passionate about? What do you love about what you do?*

I love broadening options for patients who may have thought drugs or surgery, for example, were their only option. I find it especially challenging, when there are so many options, to help patients prioritize what they'd like to start with, and how to help motivate people who strive for better health but find some of the steps to get there particularly difficult.

*What aspect of your work do you find least interesting? And what is most burdensome?*

There's a lot of paperwork, insurance issues.

*Do you go to professional conferences? Which ones?*

Yes. American Holistic Medical Association (AHMA), Institute for Functional Medicine, American Academy of Family Practice. When my kids are a bit older, I'd like to go to more holistic conferences/

*What are the gifts for you of family life?*

Never boring! A joy to see my kids play and grow.

*What do you like to do for fun?*

Hiking in the woods. Biking. Dancing. Play cello. Ceramics. Sewing.

*What places have you been to that are "furthest away" from Ann Arbor, geographically? Are there some places you would love to travel to?*

Hangzhou, China 1996 for 6 weeks—introduction to acupuncture and massage for 4 weeks in a hospital, and visited a rural village.

Thailand — beach on island.

Italy—saw doc's office & hospital.

I would like to go back to China; to New Zealand; and I'd like to see the medical systems in Cuba, Great Britain, and Canada.

*Anything else you'd like to impart, or express?*

I'd like to get to know all the holistic practitioners in the AA area, and that we all know each other, to work together to improve wellbeing of people in our area, refer to each other & learn from each other. For this purpose, I volunteer as the AHMA holistic area resource person, and I arranged a dinner for holistic practitioners and their friends/family (50 people came) in June 2005, and I'm planning another for April or May 2006.

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