

## Why the lack of research?

Good question. On July 23rd, 2003 Sky News reported ‘**Glaxo Boosts Profits**’ with the following figures: “The profits of £3.55 billion, equivalent to £242 per second, came despite seeing generic versions of its antibiotic Augmentin hit US sales of the drug by almost £300 million over the six-month period. **But its asthma drug Seretide boosted earnings with sales worth more than £1 billion in the first half [of the year] – an increase of thirty-nine per cent.**” [Author’s emphasis.]

One model of this inhaler (Seretide 250mcg) is now widely prescribed in Ireland and costs €120 per monthly unit. One billion pounds is an enormous amount of money, but who is paying over this huge sum to Glaxo? People with asthma; in other words people like you, that's who.

Most medical research is either conducted or funded by the pharmaceutical industry. A successful research programme will result in a product that generates a substantial income stream for the company in question. The pharmaceutical industry, like any other industry, is driven by the need to increase shareholder value; in other words, this is the need to generate more and more profit every year. If expensive research verifies the validity of reversal of hyperventilation, no multi-million product results. In fact the outcome is quite the reverse: a lot of very expensive asthma treatment products become obsolete, income is reduced, and profits take what would probably be a very big hit. No pharmaceutical company is going to go down that road.

The prevailing wisdom is that turkeys won't vote for Christmas. Pharmaceutical companies are even smarter than turkeys.

It is an unfortunate business fact that the pharmaceutical industry has a vested interest in an increasing asthma population, and the resultant increasing demand for increasingly expensive asthma medication. This is true of any medical problem: the bigger the problem the bigger the profit.

Back in the peace and love days of the ‘60s, Tom Paxton wrote a line in a song: “*Peace hurts business and that ain't right*”. Good health hurts business too and it still ain't right, but it is seen as the natural order of things.

The lack of establishment support for, or even interest in trials was highlighted during the 1998 BBC

television programme *QED*, which by way of conclusion posed the question: “Will anyone give this treatment a proper trial?”<sup>3</sup>

The pharmaceutical industry is not a collection of monsters and ogres; it largely consists of men and women, some of them very dedicated scientists with honourable motives, doing the best they can for their employers, just as most of us do every day. They do a very good job in many respects, so much so that the bigger companies in the industry are extremely successful and, as a result, financially very strong. As a consequence of good stewardship resulting in company strength, they have also become very, very powerful. Many, including myself, would argue that pharmaceutical companies have become too powerful. asthma books

I hope I have explained why these companies are unlikely to support objective research into the area of hypoventilation (reduced breathing).

### **And the doctors?**

I have a certain amount of sympathy for doctors in all this. Most doctors that I know work long hours dealing with huge numbers of patients, all of whom are concerned about their health, and at least some of whom are very demanding. Most patients want quick and easy solutions.

One result of the long hours is that many doctors have insufficient time to upgrade their own knowledge or research developments. Pharmaceutical companies subject them to a veritable bombardment of information about new and improved drugs. They are told how these drugs have performed in trials and tests, about the research that has gone into them, and they receive free samples of the drugs. There has even been a suggestion that some asthma nurses who provide clinics at doctors' surgeries in Ireland may be the direct employees of drug companies. Doctors prescribe these drugs if they feel they can help their patients. By and large the system seems to work and people's health does improve – even if they frequently find that they depend on a drug to maintain the improvement.

One result of this virtual indoctrination is that, as with most skillfully targeted marketing campaigns, after a while you believe the claims being made in spite of yourself.

Doctors can only rely on the research results they are given or that they read about. In the circumstances perhaps it is understandable that they are wary of suggesting the Buteyko approach to their patients. There is also the problem that many people will not be prepared to accept the discipline that it requires, and should the method prove unsuccessful for this reason they would blame the doctor; Ireland being such a litigious country they may also sue.

However it is my opinion that doctors owe it to their patients at least to enquire into something like the Buteyko Breathing Method which has such a well-documented history of success and such a medically valid basis. Where they are confident that a particular patient will undertake the discipline, they should at least tell him or her about it. asthma books

### **The role of Government**

In my view, our Government in general and the Department of Health in particular, are where the real problem lies, and also the only solution. The pharmaceutical industry isn't going to change, and doctors still need research data that they feel they can trust. The old regime in Russia could make the sort of radical change that was needed because of the political system, and also because they couldn't afford the Western approach. Remember that Russia is where the method has been most widely and most successfully used.

What is needed is **independent, Government-funded research** into the Buteyko Method. By Government-funded research, I mean research not funded even indirectly by pharmaceutical companies, and not influenced in any way by them either.

There is an enormous potential saving here for the national finances of hundreds of millions of euro, and that's your money and mine. There is potentially the same saving again for asthma sufferers individually. There would be a further saving for industry in terms of less absenteeism, a development that would improve the Irish economy generally.

How much would such a research programme cost? I don't know, but when you look at the potential savings in terms of money alone, never mind the substantial improvement in people's basic health and quality of life, the

case for research funding seems unanswerable.

I am asking people with asthma to tackle their TD and ask him or her to take it up with the Minister for Health and, equally importantly, with the Minister for Finance. Governments understand money much better than they understand health issues.

However, I predict that there will be huge resistance to the idea of allocating scarce resources to the research of hyperventilation. That resistance will come primarily from pharmaceutical companies that have large manufacturing facilities in Ireland. These companies give very good employment to substantial numbers of people and therefore have a lot of influence at Government level. They also have big PR budgets to ensure they get their message across. Multinational companies are powerful, and sometimes ruthless, entities. Asthma medication is a huge money-spinner for them and nobody likes a threat to their income. TDs with pharmaceutical plants in their constituencies will be especially vulnerable to the threat of job losses.

That being said, it's our health and increasingly our children's health we're talking about. Do we really want to condemn our own children to a life of drug dependency? That is what the medication route means. Will we continue to accept the hugely expensive and spectacularly unsuccessful drug-based approach? I hope not, but I fear so.

And yet if the will is there it's amazing what can be achieved.

### **The role of the individual**

Even if we don't persuade those in power to back Government-funded and independent research, what else can be done? To be more specific, what can you do? Yes, I do mean **you**, the individual asthma sufferer who is reading this book. asthma books

My suggestion is that when you have finished reading this book, talk to your doctor and give it a go. If you have found this book to be heavy going or if you want more information, I suggest that you contact Asthma Care and your doctor. Either way give it a try; remember, you've nothing to lose except your asthma problem.

However, you must be prepared to change your ways. There is a certain amount of discipline involved: you

will have to do the breathing exercises, take the modest amount of physical exercise that is required, and you may have to change to a more sensible diet.

Believe me, the rewards more than justify the effort. Nothing worthwhile ever comes easy.

## **Conclusion**

By reading this book, you have taken the first step towards changing your asthma condition forever. It will take time so be patient; it will take determination so persevere; it will take observation so be aware.

Remember, it doesn't matter what new therapies, vaccinations, gene discoveries, medications or other treatments are developed. As long as overbreathing is not addressed, a fundamental and crucial part of the management of asthma is ignored. In my opinion it is now time to educate the Western world to the detrimental effects of overbreathing.

Breathing is the only function of critical importance over which we can exercise control. We cannot voluntarily increase oxygen and blood flow to tissues and organs; we cannot voluntarily reduce our blood pressure; we cannot voluntarily order the airways to open, but we can influence all these vital functions by addressing an incorrect breathing pattern.

The general belief is that big breathing is a result of asthma. In this book, I have demonstrated that the opposite is the case. Big breathing causes loss of carbon dioxide. The body's main defence mechanism against this is to narrow the airways to prevent further loss of carbon dioxide. We struggle to draw in even more air. The cycle begins.

In this book, I have tried to encourage you to become more aware of your breathing. I also have drawn your attention to the well-established relationship between incorrect breathing and your asthma. Normally we do not have to remember to breathe in and out; it happens naturally. So it is probable that this will be the first time in your life that you will be so observant of and aware of your breathing. At the same time however, it is possible to exercise a measure of control over our breathing: we can change the volume, and we can also influence the rate, within certain parameters.

I have included here many exercises that can be self taught. However some of the exercises are a simplified version of those that would be taught at Asthma Care Clinics workshops. This is because it is important that they are done properly, and without feedback it can be difficult to know whether or not the technique is correct. In other cases exercises have only been included in part because it is difficult to communicate them solely by the written word, and misinterpretation may only exacerbate your symptoms.

Ideally, the best way to guarantee a permanent improvement in your asthma is to avail of the services of a qualified and experienced practitioner, preferably one who has an indepth knowledge and understanding of asthma. Your practitioner will give you the tools, the motivation and the follow-up support necessary to make this life-long change. In addition, a well qualified practitioner will tailor exercises to your condition, ensure that you are able to practice them correctly and get you to your destination via the shortest route possible. Having said that, when applied correctly much of the information contained throughout this book will bring about a noticeable improvement in your condition.

If you are a parent reading this book and you have an asthmatic child in the family, you can start applying the basics of this therapy immediately. I truly believe that there is no greater gift that you can give an asthmatic child. Encourage nasal breathing, do not over-clothe them, don't let them overeat – indeed, try to encourage them to eat sensibly – and instill the importance of breathing ‘as if they are not breathing’. All this is easier said than done, I know, but if you can convey the facts to children simply and honestly, they should appreciate that this approach will help their asthma problem.

If you complete the exercises in this book and there is no improvement, or even a deterioration, in your asthma then you may not be doing the exercises correctly. In this situation it would be better to stop doing the exercises and contact Asthma Care for advice. Asthma Care is not about taking risks with your asthma, so don't take any risks and don't cause yourself distress. Always take your preventer medication as prescribed and carry a reliever inhaler in case you need it. All too often, asthmatics deny the true extent of their condition and as a result leave themselves prone to a very serious attack. Each year, many hundreds and thousands of people around the world die unnecessarily from asthma attacks.

You now have the tools to take control of your asthma naturally, safely and effectively. Start applying them. Do what you can to help your condition. It is your life and your health, and the power rests within you.

Now I have a final request to make. When your asthma symptoms decrease and you are finally able to take control of your condition by reversing your hyperventilation, I ask you to tell your doctor, your local branch of the Asthma Society, the Minister for Health and anyone else who comes to mind about the improvement in your asthma and how it was achieved. If enough people do this, it may encourage more medical professionals to begin taking an interest in what is being achieved by breath retraining. I feel that we have an obligation to our children to minimise the amount of unnecessary medication we allow them to be given. Adult asthma sufferers deserve no less too, but adults are in a position to make their own choices.

I want to close by wishing you every success in using this approach to help you and your children with breath retraining, and I hope that this book will help as many people as possible to gain control of their asthma with minimal or no medication.

Naturally.

*“To tell the truth is not only a responsibility to yourself and others.*

*It is an honour, a duty and your legacy to the generations to come.*

*It is part of their rightful inheritance.”*

– **Unknown**