

A change of paradigm

All too often, we look for a drug-based solution for the slightest health problem, rather than considering other forms of support or help. “A pill for every ill” is a reflex already well ingrained in society, reinforced during healthcare professionals’ training, and then maintained by an array of vested interests pushing for an ever more medicated society.

Do we really need to be faced with a situation, such as Alzheimer’s disease, where we have no viable drug treatments to offer, for us to realise that other types of care exist? For example, care based on spending time with others, through leisure activities such as dance, music, gardening or contact with animals. Shared moments that elevate these social activities to the level of actual care, providing support and sometimes even benefit. Patients with dementia in particular can be helped by this approach (see our French edition for topics related to non-drug treatments).

Must we always demand more in-depth harm-benefit analysis of these activities before incorporating them into the range of care options offered to patients? Their tangible benefits probably outweigh any potential risks in most situations. It is mainly a matter of simply recognising that it is worth the effort when it comes to the best interests of older people, and then a matter of allocating whatever human resources are necessary to provide these activities.

Is it time to rethink how we help older people? For example, by organising services that help them to remain in their own homes, close to their family and friends, and giving more attention to the difficulties this entails. Is it time to rethink how we support older adults, with their various levels of dependency? Is support different from care? In what ways might healthcare professionals be better placed than other professionals to provide support to older people?

Regardless of the clinical situation, the role that society assigns to medicines and products that are deemed to be medicinal ought to be called into greater question. Even for drugs with proven efficacy, it is often simplistic to consider pharmacological treatment the only useful form of health care. It is time to extricate ourselves from the paradigm in which drugs are the mainstay of our response to health problems, and to embrace one in which they are just one option rather than an automatic reflex.

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