



# NEWSLETTER

## PRESIDENT'S MESSAGE

### This Wonderful Organization

Happy summer to each of you. It was wonderful to see so many of you in San Diego, and I look forward to our next annual gathering in Albuquerque NM next April. I am honored and challenged to serve this year as President of this wonderful organization. In this first presidential column, "this wonderful organization" and its continued relevant mission is exactly what I'd like to address.



I was recently in D.C. for a meeting of representatives from institutions who have received CAM curriculum development grants from NIH. Several other active AHMA members were also in attendance. Over dinner one evening, a colleague who had attended our San Diego meeting sincerely asked me if there was any continued reason for our organization to exist. He cited the advent of the following: medical schools courses on integrated medicine, growing numbers of physician continuing education courses in CAM across the nation, research studies in a widening expanse of non-mainstream medical approaches funded by the government, and reimbursement for complementary services by many insurance companies. There are other groups who focus on chelation therapy and functional medicine, on anti-aging and environmental healing. So, he asked, hadn't the country caught up with us? Why do we need a Holistic Medicine Association?

After recovering from the initial shock, I gave deep and immediate attention to the importance of this question, because if one person asked it, many others had thought it. How and what was different about the AHMA from the other "games in town?"

There is much energy being expended right now to "integrate" complementary and alternative medical practices into mainstream medicine. Codes for billing for CAM services are being standardized. Everywhere from inner city hospitals to small town clinics are offering massage, acupuncture, aromatherapy, healing touch, and guided imagery. Chiropractic practices are numerous and mainstream. Homeopathic remedies are being sold in corner drug stores. Community colleges offer classes on Reiki, Feng Shui, and herbology. That's the good news. These approaches have entered the collective consciousness-both consumers and physicians are much more aware.

On the other hand, has anything deeper really changed? Consumers and physicians more often than not still think in terms of broken mechanical systems and diagnostically driven allopathic interventions. It is, I believe, an improvement to use an herb or vitamin, instead of a pharmaceutical, but that certainly isn't holistic medicine! Holism is based on the deeper recognition of health within each of us. It seeks healing and growth, not only repair or maintenance. Illness is a manifestation of a dysfunction of the entire person or system, and can be a teacher or guide to growth or healing. Suppression of symptoms alone is not healing. Optimal health is a conscious pursuit of the highest level of functioning and balance-not just the absence of sickness. Given these beliefs, I think we are a long way from a holistic transformation of

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## Editorial

### Syndromes vs Causes

John A. Green III MD

Yesterday I solved a medical mystery. Actually, "penetrated" a medical mystery might be a more accurate, less immodest statement. It wasn't that hard; I simply consulted the most read textbook of practicing physicians: the PDR!

The focus of this mystery was an unfortunate 40 year old man with chronic musculoskeletal pains and progressive stiffness of his back and neck. His X-Rays had shown changes suggestive of ankylosing spondylitis, but HLA B-27 status was negative. He was given the diagnosis of DISH (diffuse idiopathic skeletal hyperostosis) syndrome. So, like a good modern patient, he went to the internet to see what he could learn, and learned very little. As his son with autistic syndrome had received help from my treatment, he decided to bring his whole family 1000 miles to my office for consultation about their various problems. Though my focus is on the autistic syndrome, I was happy to learn more about the family of this boy and to work with each of them, as they had proven to

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The American Holistic Medical Association is a 501 (c)(3) non-profit organization.

The AHMA mission is to support physicians in their evolving personal and professional development as healers and practitioners of holistic medicine. To serve as the national voice of physician leaders in the integration of holistic medicine into health care.

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Debra Glasser Green, MD  
John Green, MD

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12101 Menaul Boulevard NE, Suite C  
Albuquerque, NM 87112  
Phone: 505-292-7788  
Fax: 505-293-7582  
Email: info@holisticmedicine.org  
Website: www.holisticmedicine.org

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## Update from Management

As you read this it will be almost one year since we began working with the AHMA. The time has passed swiftly as tasks of building a strong organizational foundation were many. With this foundation mostly complete, we hope to support the passion and desire to advance holistic medicine shared by our members, all the volunteers, HARPS and Board. With the majority of the historic challenges, overcome you will see a consistent expansion of our efforts. From the professional development of the Board, to a beautiful and engaging broadcast video segment, the next year promises to reflect just the beginnings of what the AHMA is capable of doing. We give our thanks to all the members and in particular Mark Hoch MD and the Board for agreeing to work with us in learning to manage the AHMA holistically. A truly holistic perspective invites us to expand our decision-making capabilities and carry this forth into our association, our practices, our institutions and our personal lives.

With the San Diego conference completed, we are fully engaged with planning the next event in 2004. Before we started, however, we made sure to read every single piece of feedback we received. We plan to improve the event every year! For those of you who have feedback and did not share it with the office, we always are open to hear your input. Moving ahead, the call for submissions is underway and we are already receiving workshop proposals. All the information is on the AHMA web site at [www.holisticmedicine.org](http://www.holisticmedicine.org). MARK YOUR CALENDARS NOW for a great event in 2004. Pre-conference workshops are on April 28 and the main conference is April 29th to May 1st, 2004. For more information see the conference update in this newsletter.

This newsletter will also coincide with the new AHMA web site coming on line. We are fortunate to have a great design team working with us on the project and look forward to this new site being another platform for our growth. Our goal is to create an attractive, easy to navigate site loaded with accessible and relevant information plus add new interactive features to help you manage your membership, submit proposals and register for the conference in a safe and secure way. After the initial launch we hope to quickly add on access for members to get the latest in AHMA clothing, goods and educational material from past conferences right on the AHMA site. For those of you preferring not to use the web, the next newsletter will have a full listing of what is available. If there are items you want us to provide we are eager to hear your suggestions.

This first year has flown by and we are just beginning to spread our wings.

Sincerely,  
Ken Jacobson, Amy Driggs, and Kathleen Sunderland

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medicine or of the greater entity--the system of healthcare.

It comes down to the ultimate question. Will the integration of CAM transform our healthcare system, or will our medical system warp the nature of these other healing approaches? Until that question has been resolved, I think we, as individuals and as an organization, have our work cut out for us! So please join me as we recommit to our shared vision and mission, working to expand the hearts, as well as the minds of our medical system.

Karen Lawson, MD

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be so bright and indefatigable in collaborating with me and caring for their autistic son.

After listening to the dad's story and filling in the details, I told him that DISH syndrome was not in my medical vocabulary, as I'd never seen a case, nor read about a case. I asked him to tell me what he knew, and to do further research into details of the syndrome, to be sent on to me for review. I also explained that all illness is caused by an injury of some sort: physical, toxic, immune, infectious, etc., and that it often proves helpful to look for sources of injury to be alleviated. In addition, we would conduct a search for weaknesses in his system, such as nutrient deficiencies, allergies, digestive dysfunction, etc., in order to enhance his healing capacities.

Several things stood out in his history. In the late 1980's he'd gotten hepatitis when serving as a missionary in the Philippines. He'd also been treated with numerous antibiotics. He'd developed swallowing discomfort and been placed on acid blockers. He subsequently developed severe adult acne, received more antibiotics, and

then was placed on Accutane, which he took for around 8 years. After he'd been on this drug for a few years, he noticed that his feet hurt when he walked, and that his ability to throw a softball was impaired. His dermatologist in incidental follow-ups, dismissed these symptoms and reassured him. Three months ago, he discontinued the drug, as his skin had been clear for quite some time. He also eliminated coffee and several acidic foods, which he'd found upset his esophagus, and was able to stop the ranitidine. Over these three months, there's been a considerable reduction in his pain and stiffness, occurring gradually, so that he was not able to sort out the cause of his improvement.

Through hazy memories of vitamin A toxicity and diffuse achiness, some possible connection with activation of vitamin D, and a recollection of some of the potential toxicities of Accutane, I read through the PDR with my patient. We found that Accutane has caused skeletal hyperostosis, in addition to the myalgias and arthralgias he's experienced.

I believe that his DISH syndrome will stop progressing and improve further, as we provide liver, digestive, nutritional, and detoxification supports to help him overcome the adverse effects of his medications.

I remember as a medical student beginning to study syndromes. I was interested in word roots, and thought about the roots of this word: syn=together, with, and drom=running. So the word somehow relates to things running together. This was a hard concept to grasp; it wasn't clear to us students how a syndrome was distinguished from a disease. In studying a particular syndrome, we would learn about the symptoms and signs, abnormal findings in lab tests, exclusion criteria, therapeutic possibilities and prognostic aspects. And after the whole package of information was mastered, it could be filed along with diseases we'd

studied, to be downloaded when tested, or when a patient came in who satisfied the appropriate criteria for the syndrome into which she could be filed.

When we do this, we stop thinking about a critical question in the effort to solve a problem experienced by the patient sitting in front of us: what is the cause of this person's illness? So much of our medical training and the current computer coding systems require us to fit patients into diagnostic categories. A syndrome is a pattern of symptoms and findings which lead us to an address on the internet, a chat room for similarly afflicted individuals, therapeutic trials, and research projects to explore the unanswered questions of causation. But it is a pattern of things "running together," which don't necessarily have the same cause, treatment, or prognosis.

In holistic medicine, we seek to evaluate and treat the whole person, not the disease. Nowhere is this more important than in the management of "syndromes," such as IBS, CFIDS, FMS, migraine syndrome, ADD, autistic syndromes, etc. There is a whole set of other conditions which are more tightly categorized (the collagen vascular disorders, coronary disease, asthma, etc.), but whose causes continue to evolve and mutate, illustrating the many layered process involved in true diagnosis. (dia=through, gnosis=knowing) of a disease. Let us continue to ask the simpler, and deeper, questions about why our patient is ill, what are the harmful influences we can alleviate, and what are the weaknesses we can support to restore the person to equilibrium and homeostasis.

Dear Editor,

In response to Jana Moll's article in the last AHMA newsletter on energy medicine in surgery I would suggest a simpler mechanism for evaluating patients that I have used for over twenty years. People can lie in response to questions or respond intellectually but when you ask them to draw a picture of themselves in the operating room, or receiving any form of therapy from a vegetarian diet to chemotherapy, the unconscious presents the truth symbolically. What people decide to do and what the unconscious knows is right for them are not always in agreement.

At times patients do not want surgery but draw a beautiful scene and at other times they say yes and the O.R. looks like hell with no one there to care for them. I help people make decisions and change their concepts through guided imagery and auto-hypnotic techniques. Remember Carl Jung interpreted a dream and made a correct physical diagnosis decades ago, which no one is ever told in med school. You will also see in the drawings more information related to the diagnosis, awareness of the future and more. I have had children draw themselves in the O.R. preop and draw exactly what the room, which they had never seen, looked like. It changed the attitude of the O.R. staff.

Victor Sierpina's article 'Wounded Child Wounded Healer' also brought back memories. I cared for a child who was severely burned and yelled I hate you at me every day. She felt ugly due to the scars and always hid her body with turtleneck sweaters, even in the summer time. I ultimately got her to see she was beautiful when she was giving love by getting her to work in a nursing home where she had to wear a uniform, which did not cover her scars. As she said, "No one noticed my scars." Many years later, after her Dad died, Madelyn asked me to be her Father at her wedding. We danced to Kenny Rogers

singing, "Through the years you never let me down. You turned my life around, through the years." That is what being a doctor is about and yet many med students when asked to draw themselves working as a doctor do not show any human beings in the drawings, just books, computers and instruments.

Peace Be With You,  
Bernie Siegel

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(Note from the editor: This is in response to our Resident Representative, Jodi Sherman and the article she submitted to the Spring 2003 newsletter.)

In response to the Resident Trustee Report Spring 2003

Il physicians suffer PTSD  
there are no how does it feel conferences  
only what do you think  
many are going into medicine now because the human body interests them  
not the people who bring the body in

for the people who are driving you nuts  
kill with kindness  
torment with tenderness  
love thine enemies and you will kill them I guarantee it  
they are used to conflict but not love  
the opposite of love is indifference  
and they avoid that with hostility and projection of their crap onto you  
ego, inflation, inability to seek or see goodness are all a part of it

your thoughts are what you control  
so don't waste your life time by giving it over to those who wound you

"like the seasons there are reasons for the path we take  
there are no mistakes  
just lessons to be learned"

if you are treated with disrespect you are entitled to appropriate anger  
but then it is done and not buried within you  
love yourself and they can't hurt you  
they can only polish your mirror  
with criticism  
so say thanks and I love you and watch what happens

peace  
Bernie Siegel

## HARPS REPORT

Todd Bezilla, DO, DABHM –  
Chairperson, Council of HARPs

The San Diego conference has come and gone. It was very good and many HARPs were present. Certificates of appreciation and recognition were distributed to HARPs from 2002-2003, and a nice meeting and dinner was enjoyed. For those of you that were not there, or even for those of you that were, here is a summary of the issues discussed at our formal HARP meeting.

1. Explore the potential of AHMA providing an umbrella CME package to cover appropriate HARP-related activities and meetings.
2. Explore and enhance collaborative efforts with other like-minded organizations and establish a wider-based pool of participants so that AHMA awareness and membership will grow. (Henri Roca, III, MD will be exploring elements of this and will be communicating his findings with Todd Bezilla, DO)
3. Pursue computer database (how to make e-mail listserves, etc...) from HQ or other source to help technology naïve HARPs be better able to communicate amongst their regional contacts.
4. HARPs would like to be able to receive multiple copies of the AHMA newsletter to distribute at meetings to non-AHMA attendees, and for AHMA promotion.
5. HARPs would like an efficient and timely notification of new AHMA members so that any in their region or local vicinity may be contacted in a timely fashion.
6. How may the HARPs make use of the AHMA's non-profit standing to gain advantages in public and professional promotion?

7. AMSA/HuMED student list to the HARPs for mentoring collaboration and support of AHMA chapters in medical schools.

These are the current issues being dealt with. If anyone has any input, please contact me.

And now some HARP-reported news:

### COLORADO

**Gretchen Frey, MD** reports they had a discussion regarding medical malpractice and OB/GYN along with a call for action to get involved with political activism via contacting their senators at 1-800-366-0102 and supporting the pending Healthcare Reform Act. Additionally, the TOMATIS method of evaluation and treatment was presented. This is reportedly useful in patients with ADD, dyslexia, depression and anxiety, musical performance ability, traumatic brain injury, and sometimes autism. It was also proposed by **Rob Ivker, DO** that some nearby land be evaluated as a potential future site for a wellness center.

At another meeting it was noted that **Pam Curley** gave a very informative and enjoyable presentation on Brain Gym. Pam is on the international faculty of the Educational Kinesiology foundation and travels around the world teaching Brain Gym and Touch for Health.

Additionally, **Stuart Tessler, OD** gave a fascinating presentation on his use of syntonics optometry to interrupt a chronic state of "fight or flight" in the nervous system, thus helping with all sorts of disorders from chronic depression to head trauma sequelae.

### FLORIDA

**Carol Roberts, MD** reports that the AHMA Chapter from West Central Florida initiated a monthly Holistic Grand Rounds on April 25, 2003. The

first meeting was at the University of South Florida's College of Public Health. The first case report was on Parkinsonism, and the patient and his wife were kind enough to come. Discussion was initiated by **William Hammesfahr, MD**, a neurologist who has been nominated for the Nobel Prize in his field, and **Shem Altman, MD**, holistic physician and clinical pathologist. Refreshments were underwritten by Metagenics. Carol noted that other vendors have expressed an interest in financial support of such learning opportunities. CME accreditation will be sought through USF. Member **Karen Mutter, DO**, has offered to organize future Rounds, and has agreed to take over the function of the HARP. Carol Roberts will step down as HARP to attend to her new duties as President-elect of the AHMA.

The following month's Grand Rounds was well attended and our new HARP, **Karen Mutter, DO**, did an excellent presentation on adrenal fatigue. **Christine Gallegos, AP** gave the Chinese medicine view of the syndrome.

### MINNESOTA & WISCONSIN

**Bill Manahan, MD** reports that **Pat Hart** presented information on Anthroposophic Medicine, which was followed by about 90 minutes of individual storytelling by everyone present regarding their individual journeys taken, along with plans for the future. Then **Diane Miller**, presented the following topic: *Legal Issues for Consumer Access to Healing Choices and The Rights of Licensed Practitioners in Minnesota to Provide Healing Therapies.*

### NEW YORK

**Mary Scanlon O'Kelley, MD** reports that **Ed Shalts** repeated his full day workshop on Homeopathy, which was originally presented at the 2003 San Diego AHMA conference. For more information about Ed and what he does please go to [www.HomeopathyNewYork.com](http://www.HomeopathyNewYork.com)

Please note that to officially be a recognized HARP, the following must first be confirmed: Your AHMA dues must be paid in full, and I must know that you wish to be a HARP, meaning I need your information. To contact me please e-mail me at [drbezilla@netzero.net](mailto:drbezilla@netzero.net) or phone me at 1-302-529-8790.

Please note the listing of currently recognized HARPs and let HQ as well as me know if there are any incorrect listings, or if you are not on the list!

Holistically yours,  
Todd Bezilla, DO, DABHM

### AHMA Resident Trustee Report

By Jodi Sherman, LMT, MD

Post-Graduate Medical Education is uniquely challenging in the Present Era. We as a society hold/behold/uphold Board Certification in the internationally recognized specialties such as Obstetrics and Gynecology, Internal Medicine, Pediatrics, Family Practice, and Surgery. Each discipline encompasses highly successful-effective means of diagnosis and treatment, and we respect them for it. And each discipline has great potential for intuitive, visceral, spiritual, energetic connection-by virtue of its human participants. Our Medical Culture lacks awareness and therefore value for these humanistic cores, but consciousness is raised and raising and the Holistic Medicine Movement is evolving. AHMA residents should know that there is now board certification in Holistic Medicine. To learn more about it and the fantastic intensive review course, check out the American Board of Holistic Medicine through the AHMA website at [www.holisticmedicine.org](http://www.holisticmedicine.org).

Residency Work-Hour Restriction is now the written rule and quickly becoming the reality. More and more PAs and NPs are supplementing junior resident labor. With the 80-

hour workweek, residents now only have to work two full-time jobs instead of three. Thankfully our pay hasn't been cut, which still works out to less than minimum wage per hour, while the current cost of medical education is at an all-time high and insurance reimbursement is simultaneously at an all-time low. Now that we residents are only working two full-time jobs, we might actually find time to moonlight! Sarcasm aside, Graduate Medical Education is moving in the right direction. The idea of resident well-being is becoming more than an inkling in the consciousness of Graduate Medical Education. The AHMA is working on a number of resident projects and volunteers are needed. The Resident Mentor/Mentee Guidelines are complete and the Resident Well-being Guidelines are under construction. Both require program development, including distribution plans to GME governing bodies. If interested in becoming involved, please contact me.

I am pleased to announce the first AHMA National Resident Retreat is scheduled for October 10-12, 2003 in Jemez Springs, New Mexico. Non-resident partners are welcome. This retreat will create much needed space for us to explore the journey of becoming a physician/healer and will concentrate on increasing wellness and methods of self-care. All weekend events will be facilitated by participants, and emphasize experiential learning and community building that nurtures our hearts, relationships and spirits. The cost is \$65. Space is limited so RSVP Mara Merritt at [tmerritt@salud.unm.edu](mailto:tmerritt@salud.unm.edu) or email me.

For more information about AHMA resident issues, contact Jodi at [resident@holisticmedicine.org](mailto:resident@holisticmedicine.org). Jodi is a surgery resident, currently in the Wound Healing Laboratory at UCSF, exploring alternative approaches to wound healing.



### The Science & Spirit of an AHMA Holistic Conference: San Diego 2003

by Bhaswati Bhattacharya,  
Conference Co-Chair

For May 27, in the daily meditations book, *365 Tao*, the author Deng Ming-Dao states, "It is supposed to be hot summer, yet it is a day like midwinter. What is there to do but to accept it? Following cycles does not mean that you can then expect things to occur with precision and regularity.... The follower of Tao is always flexible and adaptable to circumstance..."



Sometimes we just have to accept things as they are, and THEN the magic will flow. And so it was at the 25th anniversary Scientific Conference of the AHMA. San Diego was not sunny but rather a cool midwinter's day in southern California. Despite the weather, or maybe because of it, the attendees spent more time at the conference center in sessions weaving the magic that is annually woven at the conference.

As (conference co-chairs) Valerie and I watched first-time attendees revel in the conversation of discovery, we marveled how planning is only the basic step, and that the attendee's interactions make the conference.



The conference was a success on many levels. Considering the war climate during the registration period, we were fortunate to have the number of attendees that came. Our exhibit hall was completely booked, and we had a healthy array of displays, publications, and information. We stayed within budget and sustained a healthy profit to help us through the year for the referrals and new website as part of our basic functional expenses.

This is the first year we dared to have 5 keynote speakers, as well as our usual breakout workshop sessions, pre-conference intensives, morning Daily Practice sessions, and our evening sessions. We personally read each and every evaluation form, and the comments have been compiled and sent to the 2004 conference planning committee for their efforts in Albuquerque, New Mexico. We are grateful for the time you took in providing feedback, both written and verbal, because it means that you care enough to see a better conference as each year passes.

This year, we had 305 attendees, 50 exhibitors, and managed to provide complimentary benefits for the many pioneers who attended. We are deeply grateful to all the exhibitors who took time to be present, to be there for us during and after the sessions, and to provide us with feedback to make all of our experience as meaningful and holistic as it can be.

As the efforts to include holistic medicine in medical schools become more and more successful, we find more medical students and residents attending our conference. This year, we had a medical student retreat and a resident retreat on the pre-conference sessions day. We hope to make this a tradition and look forward to our healing and positive efforts drawing in more physicians-in-training. Thanks to Mara, Jodi, Kjersten, Rachel and all those involved in bringing those activities together.

Thanks also to the several NIH/NCCAM researchers and awardees present for the first time, to learn the difference and the similarities, between CAM and holistic medicine and why they are not the same.

A special thanks to the new management company, Orbus International, and our team of holistically-minded guides who dreamed us and dared to hold the string to the ground while we flew. Ken Jacobson, our new ED, even took out time to do a workshop on holistic management. Thanks to the host San Diego HARPs, and to those at the hotel who made the effort to help us logistically at the conference. Thanks to the conference committee, a strong dozen people whom micromanaged and planned each detail with Kathleen Sunderland and Veronique Cimpson-Zuniga, our in-house meeting planners.

As many of you know, we took feedback from Toronto to make the San Diego conference and experimented with some holistic principles in practice. We had miso soup for breakfast and a special meal plan oriented to holistic nutrition designed by Dawn Stranges and the Hilton chef, massage therapists at \$60/hour available from 6am to midnight, and several off-site experiences and sessions. We had complimentary admission to Bikram Yoga - San Diego for the week, Qi Gong with Steven Aung, meditation with Amy Saltzman, and Continuum Dance Movement with Kathy Jennings. The HARPs coalition is stronger than ever and the sharing circles were a place to connect. Our keynote speeches include legal issues, core modality lectures in homeopathy, functional medicine, acupuncture and yoga, and we had two AHMA pioneers. The banquet was attended by 10 pioneers and their family members, as well as many of our supporters, including our host medical journal, *Alternative Therapies*.

The evening session of drumming welcomed new beginnings and ongoing rhythms as we drafted a wedding couple to the center of our circle, tempted away from their own wedding reception held down the hall from our event at the hotel!! The wedding party came in trail grooving in their tuxedos to the bongos and beat instruments, a bit bewildered and asking if we are really doctors. Of course, several speakers and first-timers were heart-open, mind-shocked, and brain-dead, as all of this reminded them that HOLISTIC DOCTORS DO IT WITH MIND, BODY, AND SPIRIT.

As an attendee, the most special part of the conference for me is Relationship. And this year, it was also Service. It was especially meaningful for me to have so many students there and to have so many of our elders present. They reminded us of the road less traveled, that of the difficult journey of being different, of daring to be a holistic medical doctor, when the world challenges you keep your heart full, your mind empty, and your hands open. The pioneers reminded us of the pain we suffer in daring to stand out, and the conviction with which we must stand out, because it is all we can do. We humbly thank each of the pioneers for their lifetime achievements in paving the road for us, and in taking the time to be present at our conference.

Finally, a word from my mom, who called to check in and make sure I had some wisdom from the sages to carry through the conference: There is a Sanskrit proverb that states *sreyan sva-dharmo para-dharmo bhgyavahah* - It is far better to do your own duties and follow your own path truly, for you are safer from danger and betrayal when you do what is meant for you. We know we were meant to be holistic medical doctors and we are blessed to have such good company. Thank you all for attending the conference and for teaching those around you with your example and your presence.

## Student Trustee Report

By Rachel Busse

As your new student trustee (following the oh-so-capable and inspired footsteps of Mara Merritt), I'd like to take a few lines to introduce myself. My name is Rachel Busse, and I am currently a third-year student at University of Louisville's School of Medicine. I come to this position from experience as co-coordinator of the 2003 Circle of Healers Retreat, working on the Humanistic Medicine Action Committee of the American Medical Student Association (AMSA). I also come to this position with a love of red curries, mountain vistas, unaccompanied cello, coffee shop conversations, and medical student connectedness and activism.

The circle of impassioned and sincere medical students I have been blessed to encounter is what has allowed my experience as a medical student to be a very positive one. I have personally been much transformed by real discussion of what it means to be a healer and how the current model of medical education can be nurtured. In turn, I feel very strongly that students can improve the world around them - I have seen it happen - so I see my role as student trustee as supportive for all student initiatives.

Perhaps you know of some of the medical student projects I'm about to describe - if not, I hope it brings you excitement to see the energy coursing through the student community. As I mentioned above, students have planned and are currently creating medical student and resident retreats, which give voice to the healer and time to share in a community with a common vision. Additional student projects include compiling information for fourth-year rotations with holistically minded preceptors as well as evaluations of residency programs. Students have also worked to develop a mentoring guide for AHMA physician-student relationships, and enormous effort has been dedicated

to collecting information on CAM courses and resources. 2004 will also be the first student-run month-long clerkship for fourth-years called HEART (Humanistic Elective in alternative-medicine, Activism, and Reflective Transformation). Offered by AMSA, this residential elective will be held in California this coming April and has a fast approaching deadline. Visit the website for more information: [www.amsa.org/humed/heart](http://www.amsa.org/humed/heart). This list of student initiatives is far from complete - there are many other projects in progress; there are many other five-minute encounters which are changing medicine every day.

I think that the philosophies of holistic and humanistic medicine draw in students who are curious, students who are aching, and students who are resolute that medicine should encompass all aspects of being human. In contrast to the field of medicine and society in general which both focus on dissection and criticism, I am grateful to see people building things up as a response to an imperfect world. Through this, our community can bring about positive change. If you - you being students, residents, physicians, alternative healer, friends - would like to share your vision or your talents with any of these projects, please email me at [student@holisticmedicine.org](mailto:student@holisticmedicine.org).

## Education Committee Update

By Susan Gerik MD

The Education committee has the following activities underway for the coming year.

We plan to work with the student Trustee and Resident Trustee to support projects as they arise.

We are developing a collaborative relationship with Consortium of Academic Health Centers on Integrative Medicine, to mutually

support and distribute educational guidelines, and developing a resource guide for web sites and publications. We are partnering with HARPS (e.g. speakers bureau to address medical students and residents, list of holistic preceptors, compile listings of courses and resources in each region...) and developing a presentation on AHMA and the holistic medical movement available to members for use in public speaking engagements. We are planning to communicate via a schedule of monthly conference calls that will begin next month. Members of the committee will be notified by email of the schedule.

## Website Committee Report

By Dan Zacharias

The due date for the birth of the new website is later than we imagined. However, in order to have an interactive database-driven website, the database that had been maintained by the previous management company needed restoration and it has been very time consuming. Our new management team, Amy Driggs and Ken Jacobson, will be putting up the site and maintaining it.

The site design has been established and the content is being added. Hopefully it will be up and running in August by the time you receive this newsletter. In the meantime, the old site remains functional. The address will remain:

[www.holisticmedicine.org](http://www.holisticmedicine.org).

We are still looking for any input you may have for the content of the new site. Are there any links to other sites that you think are useful? Please email us with any comments or suggestions at [webmaster@holisticmedicine.org](mailto:webmaster@holisticmedicine.org)

## Abundance, Money, and Numbers

by Bhaswati Bhattacharya, MPH, MD

As Treasurer I have the opportunity to do some math this year, while exercising holistic financial management principles alongside our new management team. While it will continue to be a transition year, we are budgeting more holistically, looking at abundance issues with and without monetary tags.

We will be designing the financial workplan and template to better serve the changing goals and expanded needs of the organization. This includes itemizing student and resident budgets to include more active members, membership benefits like the Alternative Therapies journal, allowing for local and regional conference expenses, properly itemizing communications expenses, and budgeting for a website that serves our members more fully. All this with positive numbers, no debts, and a solid bottom line.

Another example of accounting abundance is our 2003 conference. While the numbers did not show large profits, I am happy to report that we did yield a profit of approximately 15% when most holistic conferences are sorely losing money. This is in spite of lower numbers in attendance due to the springtime war on Iraq for "neutralizing weapons of mass destruction"; and our own membership's issues with financial crises in the current economy.

One of the keys to abundance at the AHMA is the attitude of service. By giving we receive. And so, many speakers and attendees gave what they could at the conference, as volunteers, by donating their time to do workshops, and by serving on the conference committee. In return, they received the gifts of feedback, connection with other doctors,

referrals and awareness of opportunities in their practice area.

Another space for abundance came from the material gifts the conference received: the Norm Shealy scholarship fund which raised \$1000; the flowers for the banquet which were deeply discounted in price but laden with love, dedication and support; the artwork display from San Diego artists; and the holistically-minded food we negotiated at discount prices.

Non-material abundance came from the time and dedication of

discounted and free bodywork from local area massage therapists; time and planning by the conference committee; media coverage; and various hugs, kisses, and tête-a-têtes that provided more than money could.

Following the Laws of Abundance, on behalf of the Board of Trustees, we give gratitude to each of our members and invite you to join us on a journey of demonstrating that the AHMA is an excellent model for the practice of Good Medicine with Soul, while maintaining abundance and wealth to do our work.

## AHMA Newsletter Schedule & Guidelines

The AHMA newsletter is designed to keep members abreast of the activities of the association, and, space permitting, it will serve as a vehicle to share creative thoughts and ideas of the members.

The newsletter is published four times per year; the mail date is the middle of the month. (FEB, APR, AUG, and OCT)

Deadlines for information to be received for each publication date are one month prior to the mail date. (January 15 for the February issue; March 15 for April issue; July 15 for August issue; September 15 for October issue.)

Reports from each AHMA committee chairperson are to be included in the newsletter.

All reports, articles and items of information should be sent via e-mail to [info@holisticmedicine.org](mailto:info@holisticmedicine.org)

Photos and artwork should be sent by e-mail to [info@holisticmedicine.org](mailto:info@holisticmedicine.org) or the originals should be mailed to AHMA, 12101 Menaul Blvd., NE, Ste C., Albuquerque, NM 87112.

When sending photos, please identify individuals, events, locations, etc. on a separate sheet of paper to accompany the photo.

## Building Healthy Businesses

Nancy Schulman

For this issue, we will focus on three areas to make your practice more streamlined and successful.



### Increasing Revenues

Looking for a way to increase your bottom line? Consider adding retail. Retail refers to offering patients certain products and services in addition to health care services from a practitioner. Retail offerings can also be targeted to non-patients. A few examples include supplement and herbal formulary, natural products, women's boutique items, pharmacy and educational items.

The major components of retail success are place, products and referrals. A location with heavy foot traffic and good practitioner buy-in is ideal for increased sales and referrals. However, finding the balance for your particular situation is key. Some retail centers with terrible locations are financially viable because the internal practitioner referral rate is high. In other situations, the revenue from the high foot traffic visibility makes it financially viable.

Research is also key. What are people willing to buy? What price are they willing to pay? What will be covered by your local third party payers?

There is a science to the set-up and ongoing processes of retail. It adds a different aspect to health care that can be very beneficial for patients, while adding to the bottom line of the clinic.

### Implementing Operational Efficiencies

Both the front and back offices are inundated with paper, forms and periodicals of all sorts. It can be maddening to keep it all organized while also providing quality patient care. To help cut the clutter, consider the following:

1. Analyze existing forms. Thoroughly review your forms to ensure the information you are requesting from your patients is necessary. You may be amazed at how outdated the information requests can be. Many practices have bootlegged forms from other practices, which have been photocopied so many times they are barely legible.
2. Color-code forms. This allows for easy recognition of important forms and can brighten up the front desk. It also assists with potential legal issues. For example, CAM practitioners in most states are not allowed to use ICD-9 codes without a physician referral. Color-coding the encounter forms for services without ICD-9 codes could prevent serious compliance issues. Also, to ensure all paperwork is included in a patient's chart, it is much faster to notice colors rather than flipping through numerous pieces of paper.
3. Computerize when possible. One clinic was completing double work by hand-writing many items on paper and then entering the information into the computer. To streamline the process, the clinic now enters new patient information and insurance information directly into the computer the first time around.
4. Combine encounter forms. If applicable, try to combine encounter forms/superbills with like modalities. Combining massage, acupuncture and dietician services is more efficient than dealing with three separate pieces of paper.

### Decreasing Expenses

An often-overlooked but vitally important expense seen in a clinic setting is administrative wages. Personnel costs can range from 50%-80% of the total clinic costs, so

giving it the necessary attention is important.

Administrative staff are generally the lowest paid and at times, the least appreciated. Yet they have a huge responsibility in the clinic. This situation can translate into poor service and high turnover.

*Administrative turnover causes financial and patient service damage. First, the inevitable mistakes and problems during the training period can negatively affect patient satisfaction and even patient volume. Second, the trainer's unproductive time could be spent on more valuable tasks such as marketing and managing internal controls.*

The following suggestions may improve staff satisfaction and decrease potential turnover:

- > Give your administrative staff a monthly confidential survey to collect feedback on how well the clinic is operating, potential improvements and overall employee satisfaction.
- > Make sure job descriptions include specific knowledge, skills and abilities (KSA) so that employees are clear on what is expected of them. Good descriptions also assist in the review and promotion processes to ensure staff are meeting their tasks appropriately.
- > Conduct monthly or bi-monthly meetings to discuss procedures and potential problem areas and iron out any issues.
- > Create reasonable and attainable benchmarks such as number of re-schedules after a no-show or number of accounts collected. Giving awards for hitting these benchmarks can increase staff morale and be a motivator for more efficient work.
- > Implement some fun awards for staff such as birthday celebrations, clinical "on-time" for the most punctual clinician or best joke of the month.

Good management is key to keep staff happy. A good manager will be able to see both sides of an issue and work on smoothing out any problems. The manager should also be skilled at celebrating achievements and accomplishments.

Hope this helps! Together let us seek the heights.

Comments and Ask-an-Expert questions are always welcome. Nancy Schulman is President of Integrative Health Solutions, LLC, a Boulder-based integrative and holistic management and strategy company. She has over 18 years' experience in financial operations, revenue enhancement, and best practices in business. She received her Master's in Business Degree from The Johns Hopkins University. E-mail: nancy@ihsolutions.info, Phone: 303-871-0111

## The Philosopher's Corner

### The Whale, The War, Ahab, and Medicine

by Rob Wickeiwicz?, MD

"I'll chase him round Good Hope, and round the Horn... and round perdition's flames before I give him up"

Melville, Moby Dick

So speaks Ahab, captain of the whaling ship, Pequod, in Melville's classic story of a quest for meaning and vengeance. It is an eternal theme: "Why did this happen to me?" and "Someone is going to pay for this." Moby Dick had bitten off Ahab's leg, and Ahab is obsessed with killing the whale and getting an answer.



In the Book of Job, after God has allowed Satan to torment poor Job,

Job seeks to ask these questions of God and gets an answer, but a snotty one: "Where were you when I laid the earth's foundation...can you draw Leviathan out with a fishhook?" Over 2000 years later, Ahab answers: "You bet I can! I'll catch him, kill him, render his blubber for oil, and sell it on the New Bedford market!" Ahab gets himself and his crew killed; Job sees God's majesty and "repents in dust and ashes".

In Ahab's day (Melville wrote Moby Dick in 1851), whaling was a dangerous business; today it is simply a harvest, which we have had to cease because there are no more whales. "What Leviathan, Lord? We killed them off years ago. Oh, we have also measured the foundations of the earth and the distance to Sirius. What's the next question?" But to the answer to Job's and Ahab's question, "why did this happen to me?" we are further away than ever.

When the Book of Job was written in the fourth or fifth century BCE, the wonders of the natural world were still wonders. By Melville's time, the sense of the Sacred, in the West, was rapidly receding. Melville's contemporaries include Marx and Nietzsche, Darwin and Dostoyevsky. The question was no longer just why bad things happen, but was there any source of order in the universe beyond blind materialism. Ahab's quest was not just for revenge but to force God or the universe to yield its secrets. "All visible objects, man, are but pasteboard masks...some unknown but still reasoning thing puts forth the mouldings of its features from behind the unreasoning mask. If man will strike, strike through the mask!... Sometimes I think there's naught beyond. But 'tis enough." Ahab thought the quest was still possible. Today Moby Dick is just so many tons of meat and blubber and nothing more. There seems to be nothing behind the mask, which adds desperation to our search.

Our country has just undertaken a great whale hunt in Iraq. Moby Dick (Saddam Hussein) has been blown to atoms or is in hiding, but the world does not feel much safer nor are we any closer to understanding the forces which assail us. "The inscrutable part is chiefly what I hate; and be the white whale agent, or be the white whale principal, I will wreak my hate upon him."

We are an aggressive culture, with an aggressive foreign policy and aggressive medicine; a stance which befits a people whose founding myth includes living in the Western Paradise, the New Jerusalem, where perfection in all things is finally attainable. When some sort of ill fortune overtakes us, our first reaction is that something has gone wrong and needs to be fixed, rather than that tragedy is part of life. In international affairs, since we are the new chosen people, to strike at us is to strike at God Himself. We tend to turn all conflicts into struggles between Good and Evil. (Thar she blows, captain, two points off the lee bow!) But another weapons system or a better scanner is not going to improve things. Life is messy and will always remain so.

America is all about getting away from the mess. People did not just come here, they came away from "there"; they came to get away from the poverty, oppression and turmoil of the "Old World". This idea that America is different is called American exceptionalism and is tied to the religious idea known as "immanetizing the Eschaton". That is, bringing about today the perfection which Judeo-Christian myth had projected to the end of the world. The irony is that this religious idea gains strength as the idea of the Sacred becomes more and more distant. Indeed it is because the sense of the Sacred is so distant that we become more aggressive in advancing this agenda.

There are two themes here which seem contradictory but which are

both integral to our understanding of ourselves. Along with the idea of our chosenness, is the idea of our responsibility for our own fate. "We the People" are the foundation of our government; it reflects our own will and desire, not some sacred order in the cosmos. And as the idea of a Divine plan fades from our awareness, the great temptation to do all this ourselves grows. Perhaps evil and misfortune can be eliminated. If God is not sending a Messiah at some future time to build a paradise for us, perhaps we can do the job. If we try hard enough someday we will get it perfect. And so we pursue the white whale, or the green light on Daisy's dock, or a "new world order", or a cure for cancer. I am not advocating a retreat to the past, to some outmoded vision or to a state of passivity in the face of misfortune, but rather an awareness of the cultural forces that drive us.



For the first time in history, we human beings have freed ourselves from many of the constraints nature has placed upon us. We can have breakfast in London and dinner in New York; famine no longer haunts us (where people are starving today, it is due to structural injustice or political upheaval, not an inadequate food supply), many of the diseases which killed our ancestors have been banished. We want more. Maybe 150

years of life are possible. Maybe we can get rid of all the bad guys. We do not see that our technically oriented culture itself conjures up its own demons.

You can't have penicillin without crack cocaine or television without cancer.

Modern society extrudes these things as its byproducts because of the stresses, conflicts or pollution it produces. In the same way our need for oil and foreign markets calls up tyrants like Saddam because of the dislocation, corruption and exploitation it causes.

We need to live more gently and try to heal more gently, aware that our lives and our time are part of a much larger, ongoing story, and will soon be over. Maybe our grandchildren will learn from our mistakes; they will certainly make plenty of their own.

*Gatsby believed in the green light,  
the orgiastic future  
that year by year recedes before us.  
It eluded us then, but that's no matter  
- tomorrow we will run faster,  
stretch out our arms farther....  
And one fine morning -  
So we beat on, boats against the current,  
borne back ceaselessly into the past.*

*Fitzgerald, The Great Gatsby*

## "Just Say No" to the Standard American Diet (S.A.D.)!

*When it comes to creating optimal health, proper nutrition and exercise are at the top of the list of things that you can do that will have a dramatic, positive impact on your well being. There is accumulating evidence that the main killer diseases of Western Civilization (Heart Attacks, Cancer and Diabetes) are related to diet. Americans are subliminally seduced into eating unhealthy processed foods, including dangerous trans-fats (partially hydrogenated oils), refined carbohydrates with high glycemic indices (boxed and bagged foods), sugars (Americans eat 120-150 pounds of sugar per person per year), and fried foods (lipid peroxides). Overeating processed foods leads to Metabolic Syndrome, or later to Diabetes. Some people follow a "See-Food" Diet and dig their graves with a*

*fork. The soon to be released new USDA Food Pyramid will have at its base "regular exercise" as the foundation of a healthy lifestyle and diet.*

So what kind of a diet is right for you? I tailor the diet for each person. The *Mediterranean Diet* is a healthy choice with its emphasis on whole grains, fruits, vegetables, olive oil (as the main fat), moderate dairy products, with some fish, poultry, nuts, eggs, and occasional red meat. A *Dysglycemic Diet* emphasizes low amylose (green, non-root) vegetables, low glycemic fruits, nuts, fish, lean meats, and largely eliminates starchy vegetables (corn, potatoes, beets, carrots, etc), refined grains, fruit juices and dried fruits, sugars, and packaged foods. The *D.A.S.H. Diet* has been shown to work for hypertension. It is a diet high in fruits, vegetables, whole grains, poultry, fish, nuts, and low fat dairy. If you make it low sodium (*D.A.S.H.-2*), it is even more effective, especially for salt-sensitive hypertensives. A *Vegan Diet* might be useful for certain inflammatory conditions such as severe asthma, or rheumatoid arthritis. But vegans should definitely take a multivitamin to prevent certain deficiencies such as vitamin B12.

One diet that I am seeing tremendous success with is the *Eat Right For Your Type*, blood-type diet. This diet is dramatically effective for patients who are "Non-secretors". Non-secretors make up about 20% of any blood type and in non-secretors, the blood type antigen is not found in saliva or body fluids other than blood. The blood type diet works not only because sugar and processed foods are avoided, but also because some people do better avoiding certain foods (lectins, delayed food allergies). Also, some people (fast oxidizers) burn fats better than carbohydrates and feel more vitality on animal protein diets. Others (slow oxidizers) burn carbohydrates better and do well on more of a vegetarian diet. Although Alan Gaby wrote a satirical piece in the Townsend Letter recently on *Eat Right for Your Social Security Number*, there is

nonetheless something to the Blood type diet.

Part of the power of any healthy diet is eating food in its unprocessed state (food that looks like something that was alive, or like something that grew out of the ground). I also recommend eating a lot of different colors: "something red, blue, green, yellow, orange, purple" at some point during each week. Just imagine those Crayola crayons that you drew pictures with as a child. Eat those colors, and not white foods (Wonder bread, instant rice or mashed potatoes, etc.). Fruits and vegetables lower blood pressure and decrease cancer risk. The bran in oats and the pectin in apples lower cholesterol. Spinach and collards contain lutein and zeaxanthin and help prevent macular degeneration. Green tea contains bioflavonoids (anthocyanidins) which help prevent prostate, breast and colon cancers. These are just a few examples. And don't forget to eat organic whenever possible, take a multivitamin-multimineral supplement, take fish or flax oil, and exercise regularly!

Will Mora, M.D. ABHM, ABMA, ABFP  
H.A.R.P., Northern California

## A Tour de Force: AHMA and ABHM Working Together!

*Rob Ivker, DO  
President, ABHM  
Past President, AHMA ('96-'99)*

On Tuesday, May 27, at the 25th Annual AHMA Conference, a momentous meeting took place. The executive committees of both the AHMA and ABHM met to discuss how we might better collaborate to attain our common goals. During the seven years that the ABHM has been in existence there has been an implicit synergy and a spirit of cooperation, but until now there has never been a discussion among the leadership of both organizations nor a formal agreement for collaboration.



The immediate outcome of this first meeting is that the ABHM will present a mini-review course (16 hours) within the program of the 2004 AHMA Annual Conference in Albuquerque next April. The first 8 hours will be presented within a full-day workshop on Wednesday, April 28, while the remainder of the topics will be included within the body of the conference throughout the next three days. This format will allow many AHMA members regularly attend the conference and who have not yet taken the ABHM certification examination the option of preparing for the exam without taking additional CME time away from their practices. It will also attract to Albuquerque a number of physicians (both AHMA members and non-members) who have not previously attended an annual AHMA conference.

Interestingly enough there is a compelling precedent. In Kansas City, in March of '98, the theme of the annual conference was "The Art, Science, and Practice of Holistic Medicine" (the same title as our annual ABHM Review Course). Prior to 1998, average attendance at the annual AHMA conference had been under 200 for the preceding ten years. At KC, the energy was electric and the attendance topped 300 (half or more were first-time attendees). Since then we have not only maintained that 300+ average, but

AHMA membership has doubled to more than 1000 during the same 5-year period.

During my 15 years as an AHMA member I have always strongly felt that attendance at the annual conference is the greatest membership benefit. I look forward to this event as a highlight of the year and I know this feeling is shared by many of you who are in the habit of taking this annual "educational retreat." Before the ABHM began holding stand-alone workshops and courses in 1997 (between '93 and '97 they were always either pre- or post-conference workshops), the annual AHMA conference was the only opportunity for physicians and healthcare practitioners to receive *holistic* medical training. But aside from the CMEs and the educational value, it also provides us with a great chance to renew old and establish new friendships, to network, and to be a part of a fantastic support group. And for an organization based on "unconditional love as life's most powerful healer," and one in which hugs have almost totally replaced the handshake, it's like celebrating an annual *family reunion*. I believe the new AHMA/ABHM collaboration will serve to both enlarge our group while strengthening our sense of family.

This 25th Anniversary marks a milestone for the AHMA and holistic medicine. Our progress over this past quarter century is truly remarkable. It can be best measured neither by the number of members nor the average attendance at the conference, but by the level of awareness, acceptance, and respect we currently enjoy from our medical colleagues, the public, the insurance industry, and even the media. The word "holistic" is rapidly becoming commonplace in our culture. Earlier this year, Mark Hoch, AHMA president at the time, was featured in a PBS special on holistic medicine. In March, the Wall Street Journal printed a feature article on "holistic hospitals." The interest among many medical students in finding a holistic

medical residency borders on desperation, while a growing number of aspiring physician undergraduates would love to attend a holistic medical school.

Within the next decade the model for 21st century health care will be



established. The foundation for that system is presently under construction. Just as I emphasized when I began my term as AHMA president in '96, the primary limiting factor in the growth of holistic medicine and its inclusion as an essential component of the new medicine, lies in the misperception of what *holistic* medicine is. During the past decade the AHMA board has created a definition and a set of 12 principles of holistic medical practice, while the ABHM has established an evidence-based curriculum, a certification exam, and a standard of holistic medical care. During this same period we have seen the progression of terms from "alternative," "complementary," "CAM," "integrative (integrated, integral)," and an assortment of other equally ambiguous words, none of which, to my knowledge, has a clear definition. Yet in spite of our quest for identity, we have not yet effectively distinguished ourselves from among the many brands of

medicine being practiced by our colleagues. Although the word is being used with increasing frequency, I find it most disappointing that the vast majority of those who use it (including some AHMA members and ABHM diplomates), mistakenly believe that holistic is synonymous with CAM or integrative medicine. Why? Simply because we haven't done an adequate job in clarifying our identity. I'm suggesting that a primary objective of the collaborative AHMA/ABHM effort be to jointly teach and promote the following:

*Holistic medicine is the art and science of healing that addresses the whole person – body, mind, and spirit. The practice of holistic medicine is focused on optimal health, the prevention and treatment of disease by mitigating causes, and is based on the belief that unconditional love is life's most powerful healer.*

This statement captures our essence – both the definition and key principles. It's clear, concise, and easy to remember. And if we speak in unison, then our collective voice will surely be heard with unmistakable clarity.

As I write this article, the Tour de France is underway. For me, this most challenging of all athletic events has forever changed my perception of human potential - physical, mental, and spiritual. If most Americans had even a minimal awareness of the degree of difficulty Lance Armstrong has endured to win this race (4 consecutive years) that traverses 2000+ miles, the Alps, the Pyrenees, over a 3-week span, then he would undoubtedly receive the recognition he surely deserves as a mega superstar. We, in the AHMA/ABHM are engaged in our own gargantuan challenge – that of transforming a monolithic dinosaur of a health care system that has been based for over 350 years on the Descartes model. Think of our mission as "modernizing modern medicine." For this highly mechanistic disease-care system to begin to address optimal health, to effectively treat and prevent chronic illness while focusing on mitigating causes, and to base its practice on

love as the ultimate healer, will require a *tour de force* the likes of which our culture has never seen. However, I believe with all my heart that with the deepening of the collaborative effort between the AHMA and ABHM, and the strengthening of the commitment of each AHMA member and ABHM diplomate to our common mission, we have an excellent chance to succeed. We are a community of holistic health practitioners, a tribe of love warriors, and a team of healers engaged in the most rewarding game we'll ever play. Just as the French exhort their favorite riders in the Tour to ascend and descend tortuous and torturous mountain passes, I cheer for all of us on our health care "tour" with the same words: ALLEZ, ALLEZ, ALLEZ!!

## AAPB CALL FOR SUBMISSIONS

Association for Applied Psychophysiology and Biofeedback (approved continuing education sponsor,) April 1-4, 2004, Colorado Springs, CO.

Data-based presentations on self-regulation methods and empirically demonstrable effects of alternative approaches.

Deadline: September 15, 2003

Online submission: [www.aapb.org](http://www.aapb.org)  
<<http://www.aapb.org>>

## 25th Anniversary Pioneers

Started in 1978, the AHMA has provided support for the careers of thousands of physicians. Several of these physicians have become role models and were selected as our 25 pioneers, honored at this year's conference in San Diego. They are:

Patch Adams MD  
Robert Anderson MD  
Jeffrey Bland PhD  
Deepak Chopra MD  
Larry Dossey MD  
Ted L. Edwards Jr. MD  
Terry Friedmann MD  
Alan Gaby MD  
James Gordon MD  
Joe Helms MD  
Robert Ivker DO  
Wayne Jonas MD  
Michael Lerner PhD  
Lee Lipsenthal MD  
Everts Loomis MD  
Bill Manahan MD  
Gladys McGarey MD  
Christiane Northrup MD  
Kenneth Pelletier PhD  
Candace Pert PhD  
Joseph Pizzorno ND  
Rachel Naomi Remen MD  
Hugh Riordan MD  
C. Norman Shealy MD, PhD  
Bernie Siegel MD

The AHMA website will feature biographical profiles of each of these pioneers and will be available for your perusal throughout the coming year. Please watch for them on our upgraded website!

## Help Us Compile the History of the AHMA

We are looking for an historian to help compile and organize AHMA history. At our 25th Anniversary conference we were graced with the presence of some of our founders and treated to stories of the founding of our organization. Holistic Pioneer and dog sled surgeon Everts Loomis hosted the meeting that led to the founding of the AHMA in 1978. Everts started the first multidisciplinary holistic center in the US in 1958 called Meadow Lark before many of us were even born

Bill McGarey, another founder who was with us for the Anniversary Banquet, offered to help gather up old records and information from the founding. He is looking for some help with this. Ideally it would be one of our crones or sages or someone interested in holistic history. If you are that someone please contact Amy Driggs at AHMA headquarters at [info@holisticmedicine.org](mailto:info@holisticmedicine.org).

Respectfully Submitted,  
*Mark L. Hoch, MD*  
*Past President, AHMA*

## Conference 2004 Update

Planning for Conference 2004 "The Soul of Medicine" is well in hand! We are pleased to introduce your esteemed colleagues who are the enthusiastic Chairs for this year's committee.

Robert Wickiewicz MD is a practicing Radiologist with over 30 years of clinical experience. He is a graduate of Cornell Medical College and was until recently an attending physician at Columbia Memorial Hospital in Hudson NY, where he still serves as Chair of the Ethics Committee. He is a PhD candidate in philosophy and religious studies and has lectured on these topics. He is a published author and has presented at the AHMA

annual conference. He is a Trustee of the AHMA.

Currently practicing full-time in the ER and part-time in Occupational Medicine and living in the area of Massanutten, VA, J. David Forbes MD has been a member of the AHMA for fifteen years. Board certified in Internal Medicine and a Founding Diplomate of the ABHM, he is working on the opening of a Holistic practice with a particular focus on meditative energy work and an Emotional process recovery work called PEER therapy. The integration of psychological and spiritual healing paradigms has always been a focus of intense interest and study for him, including Jungian Archetypal psychology. Native American spirituality likewise has been prominent in his process, so he is doubly excited about our conference location in Albuquerque.

They are supported by a fabulous team (the conference committee) including: Steven Ayre MD, Daniel Benor MD, Bhaswati Bhattacharya MD, MPH, Daniel Blodgett MD, Kjersten Gmeiner MD, William Frederic Harvey MD, Bethany M. Hays MD, PA, Wendy Hurwitz MD, Kathryn Keith MD, Karen L. Lawson MD, Charles Mayo MD, Lawrence Palevsky MD, FAAP, Michael Redmond MD, Rachel Busse, Jennifer Cornell MD, Kathleen Fry MD, Ashok Gupta MD, Donald Riemer MD, Scott Shannon MD, Jodi Sherman LMT, MD, Selma Sroka MD, Dawn Stranges, Edward Tick Ph.D. and Valerie Youngblood MD.

We thank them for their commitment and look forward to a sensational conference!

## “Is AHMA Holistic Yet?”

by Fay L. Loomis, M.A.  
wife of Evarts Loomis

The year 2003 marks the 25th anniversary of the American Holistic Medical Association (AHMA), and 25 pioneers were honored at the recent annual conference held in San Diego. With these events as a backdrop, it might be interesting to look back and see what one of the founding members was thinking. Shortly after the organization was inaugurated, Evarts G. Loomis, M.D., F.A.C.S., A.B.H.M. wrote an letter to then President Elmer Cranton and Members of the Education Committee, asking his “friends and colleagues” some profoundly probing questions.<sup>1</sup>

“In answer to the October Newsletter’s questions regarding the educational program and certification, I think fundamental questions should be raised if we are truly going to live up to our title of being Holistic physicians. Can a physician be made holistic by spending a required number of hours in a certain prescribed course of studies? To what extent do we feel we need to follow the present conventional model of certification as a specialty group, and how willing are we to be true pioneers and venture into the dawning new age of changing consciousness, setting up a truly new model for medicine? Is Holistic Health to be a specialty that can be equated along with Ophthalmology, Urology, Anesthesiology and other specialties that are primarily disease oriented, or do we need to stand alone? Is the message that we want to give our patients and our medical colleagues a piece of paper that can be hung on the walls of our examing rooms or a few letters behind our name, or is it a message to be given by our very presence?”

“Is it not the sign of a truly holistic physician his ability to identify with his true SELF and express his God-given uniqueness in the role that led him to be a physician! Should not the role of the AHMA be primarily to honor this uniqueness in each of our aspiring members and attempt through guidance to lead him or her in a course of studies that would be recognized and encourage this quality?”

The questions addressed to the practitioner can only be answered by the individual physician as he or she practices in the outer and inner worlds.

*Holistic practitioners do tend to radiate a healthy, holistic glow, because they practice what they preach.*

The scorecard for the organizational questions also looks quite favorable. Holistic Medicine was labeled alternative medicine and did stand outside traditional medicine for a long time, partly because it had both preventative and causal elements, which moved beyond disease orientation. Thanks to the perseverance and effort of those dedicated to holism, it is now becoming mainstream as a board specialty (you can put ABHM behind your name and hang a certificate on your office wall!) and is currently called complimentary or integrative medicine. Through conferences, regional meetings, publications, and the course which prepares physicians to take the board exam, AHMA offers guidance on mind-body-spirit medicine to aspiring and current members, as well as honoring and encouraging the divinely inspired uniqueness of each practitioner.

AHMA has come a long way in the past twenty five years and still has a vital and influential role to play in the future of health care. As for the present, Happy Twenty-Fifth Anniversary and congratulations on a job well done.

<sup>1</sup> The letter was undated, however, Elmer Cranton served as president of AHMA from 1980-81. To put this letter into further context, Evarts began to think about treating the whole person in the 1940’s and opened Meadowlark, American’s first holistic medical retreat, in 1958. He began a preceptorship program for medical students in 1973, and in 1977 doctors Norm Shealy, Gladys Taylor McGarey, Bill McGarey, and Gerald Looney gathered at Meadowlark to lay the foundation for AHMA, leading to the first conference which was held the following year in Denver. For the 25th anniversary celebration of Meadowlark in 1983, Norm designated Evarts as the Father (and Grandfather) of Holistic Medicine and wrote in *New Realities* the following year that “Meadowlark has served as a role model for most of the people in the holistic movement.”



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Part VI: Diagnosis and Treatment  
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For brochure please contact:  
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## Book Review

### The Self-Help Group Sourcebook: Your Guide to Community and Online Support Groups

The Self-Help Group Sourcebook: Your Guide to Community and Online Support Groups is truly an invaluable resource for health care professionals. It is a fabulous book, which offers information on nearly 1100 national and model one-of-a-kind groups, networks, and online self-help groups. Listings include websites and email addresses for most of the groups.

The book is offered by the American Self-Help Group Clearinghouse at Saint Clare’s Health Services in Denville, New Jersey.

The book contains a database of current information and contacts for national self-help groups and online groups for a wide variety of different conditions from mental health concerns to bereavement to disabilities and a number of rare health conditions. The sourcebook was put to the test by a group of chronic care physicians and passed with flying colors! The physicians were unable to come up with a diagnosis or condition that was not included in the sourcebook. The Clearinghouse group also assists individual for whom no support network exists. They support those individuals in establishing such groups by providing suggestions, materials, and communication.

Overall, **the Self-Help Group Sourcebook** is an excellent guide for anyone trying to help connect people with condition-specific support services. The sourcebook costs \$15.00 plus \$3.00 shipping and handling. It may be ordered through

American Self-Help Group Clearinghouse  
Attn: Self-Help Sourcebook  
100 E. Hanover Ave., Suite 202  
Cedar Knolls, NJ 07927-2020  
973-326-6789



Generations. Gladys McGarey and grand daughter Betsy, now in medical school.



Student trustee Rachel Busse celebrates at the traditional conference ending dance party with a happy medical student.

## Conference 2003 San Diego

<b>Date/time:</b>	<b>Event:</b>	<b>Location:</b>	<b>Details:</b>	<b>Contact:</b>
April 2 - Oct. 15 Wednesdays 8 am-12 pm	Special session of NYSEPH's Training Program in Clinical Hypnosis	New York, address changes monthly	N/A	Monique Rivera 646-935-2255
Aug 13 - 16	American Association of Naturopathic Physicians	Oregon Convention Center Portland, Oregon	American Association of Naturopathic Physicians 18th Annual Convention & Exposition	3201 New Mexico Ave, NW Ste. 350 Washington, DC 20016 Toll free: 1-866-538-2267 Local: 202-895-1392 Fax: 202-274-1992 member.services@Naturopathic.org http://www.naturopathic.org
<b>Aug 20 Sept 17 Oct 15</b>	<b>Fairport NY Harps Meeting</b>	<b>Fairport, NY</b>	<b>Topics vary monthly</b>	<b>Jeffrey K. Harris, MD Phone 585-223-5990 Wholeeye@aol.com</b>
<b>Aug 22 Sept 26 Oct 24 Nov 28 4:30-6:00 pm</b>	<b>Holistic Medical Grand Rounds (Fourth Friday of every month)</b>	<b>College of Public Health, University of South Florida, Tampa</b>	<b>All disciplines (not just MD or DO) are invited to attend and participate.</b>	<b>Call Karen Mutter at 727-524-0900 or Carol Roberts at 813-661-3662</b>
Sept. 4-7	AAPM (American Academy of Pain Management) Annual Clinical Meeting	Adam's Mark Hotel, Denver, Colorado	14th Annual Clinical Meeting Pain Management, Together We are Going Places	AAPM 13947 Mono Way #A Sonora, CA 95370 P: 209-533-9744 http://www.aapainmanage.org/conference/Conference.php
<b>Sept 5 Oct 3 Nov 7 12:00-2:00 pm</b>	<b>New Mexico Harps Meeting (1st Friday of every month)</b>	<b>Santa Fe, NM</b>	<b>A pot luck lunch at the home of Dawn Abriel, D.O. in Santa Fe, N.M.</b>	<b>Anyone interested should call Dawn at 505-988-7180 for information and directions. Or email Kit Keith, MD at kkeith@la-tierra.com</b>
Sept 7-14	Women's Healing Cruise	Cruise from Vancouver, BC to Alaska	Healing Women's Journey	Helene Leonetti http://www.ta2000.com/wisewomen
<b>Sept 9</b>	<b>Seattle Holistic Physicians</b>	<b>TBD</b>	<b>N/A</b>	<b>Kjersten Gmeiner 206-901-2359 gmeiner.k@ghc.org</b>
<b>Sept 13 9 am-6 pm</b>	<b>Minnesota HARPS meeting</b>	<b>Sun Moon Studios in Mankato, Minnesota.</b>	<b>"Journey through your Heart to your Soul," a Shamanic Breathwork Process combining the healing power of the breath with a musical journey through the chakras, focused bodywork, and a talking circle where the experiences are woven into our everyday life.</b>	<b>Nita Gage 808-572-1811 nitagage@aol.com</b>
<b>Sept 17 Oct 8 Nov 5 Jan 21, 2004</b>	<b>Integrated Health Meetings 7-9 pm</b>	<b>Monroe County Medical Society, 1441 East Avenue, Rochester NY</b>	<b>Meeting topics are To Be Announced.</b>	<b>Dr. Jeffrey Harris at 585-223-5990</b>
Oct 1-3	Kellogg School of Management and The Chopra Center	Northwestern University- Allen Center, Chicago (Evanston), IL	The Soul of Leadership with Deepak Chopra MD	http://www.kellogg.nwu.edu/execed/course/soul/index.htm

**Boldface indicates AHMA/ABHM-related events.**

<b>Date/time:</b>	<b>Event:</b>	<b>Location:</b>	<b>Details:</b>	<b>Contact:</b>
Oct 1-4	TrueNorth, AHMA, Institute for Functional Medicine	Kennebunkport, Maine	Relationships: The Primary Tool for Healing	<a href="http://www.truenorthhealthcenter.org/conference">www.truenorthhealthcenter.org/conference</a>
<b>Oct 2 Dec 4</b>	<b>New York City chapter of the AHMA</b>	<b>The Riverside Church, 10th Fl. of the Tower building at 91 Claremont Ave,</b>	<b>Forum where like-minded practitioners can share their experiences, ideas and support one another. All are welcomed, AHMA membership not required.</b>	<b>Margo mamdavis@aol.com 212-870-6758</b>
Oct 10-12	Alzheimer's Prevention Foundation International 1st Conference	Wyndham Buttes Resort Tempe, AZ	1st International Conference on the Integrative Medical Approach to the Prevention of Alzheimer's Disease	800 863 5085 <a href="http://www.alzheimersprevention.org">www.alzheimersprevention.org</a>
<b>Oct 10-15</b>	<b>ABHM Review Course &amp; Exam</b>	<b>Adam's Mark Hotel, Denver, Colorado</b>	<b>Seventh certification examination for medical professionals holding M.D. and D.O. degrees,</b>	<b>Nita Gage, MA Executive Director directorabhm@aol.com 1135 Makawao Avenue, #230 Makawao, HI 96768 Phone 808 572 4616 Fax 808 572 6968</b>
Oct 12-18	Center for Mind-Body Medicine, Center for Spirituality & Healing, Univ of Minnesota	The Claremont Resort, Minneapolis, MN	MindBodySpirit Medicine	P: 202 966 7338x16 <a href="http://www.cmbm.org">www.cmbm.org</a>
Oct 13-18 Dec 1-6 March 8-13 2004	Institute for Functional Medicine	Danvers, MA ; Los Angeles, CA; Gig Harbor, WA	Applying Functional Medicine in Clinical Practice	<a href="http://www.functionalmedicine.org">www.functionalmedicine.org</a>
<b>Oct 17-19</b>	<b>Western North Carolina HARPS</b>	<b>Workshop will be held on a beautiful mountaintop retreat.</b>	<b>Annual Fall Workshop: Completing The Circle, A Soul's Journey into Remembering With NC HARPS, Dr. Patricia Johnson and Intuitive, Nina Zimelman</b>	<b>Nina @ 828-479-8300 gleaningsfoundation@earthlink.net expo@newhope.com</b>
Oct 26-28	Sponsors: New Hope Natural Media, Penton Media, Inc, InnoVision Communications	Marriott Camelback Inn Resort Scottsdale, AZ	newMEDICINE: Where Healing Art Meets Healing Science "The Walking Wounded"	AAEM, 7701 East Kellogg, Suite 625, Wichita, KS 67207 Fax: 316-684-5709 <a href="http://www.aaem.com/schedule.htm">http://www.aaem.com/schedule.htm</a>
Oct 30-Nov 2	American Academy of Environmental Medicine 2003 Annual Meeting	The Wild Horse Pass Resort Phoenix, AZ	Identifying the Causes and Exploring the Newest Treatment Options for Chronic Fatigue, Fibromyalgia, and Environmental Sensitivities	Scripps Conference Services 858-882-8456
Nov 9-14	Scripps Center for Integrative Medicine	Princeville Resort, Kauai, Hawaii	4th annual Destination Health: Renewing Mind, Body and Soul	<a href="http://www.scrippsintegrativemedicine.com/retreat.htm">http://www.scrippsintegrativemedicine.com/retreat.htm</a>
Nov 15 -19	American Public Health Association 131st Annual Meeting	Moscone Convention Center, San Francisco, CA	Behavior, Lifestyle, and Social Determinants of Health/ Alternative and Complementary Health Practices Section	<a href="http://apha.confex.com/apha/branding/index.html">http://apha.confex.com/apha/branding/index.html</a>
Nov 21-23	American College for Advancement in Medicine (ACAM) 2003 Conference	Las Vegas, Nevada	Genetic and Environmental Influences on the Nervous System Alzheimer's to Xenobiotics	ACAM P: 800-532-3688 F: 949-455-9679 <a href="http://www.acam.org/pdf/conference_brochure.pdf">http://www.acam.org/pdf/conference_brochure.pdf</a>

**Boldface indicates AHMA/ABHM-related events.**

## AHMA OFFICERS

### OFFICERS

Karen Lawson, MD  
President - 2003/04  
2708 Inglewood Ave S.  
St. Louis Park, MN 55416  
president@holisticmedicine.org

Mark L. Hoch, MD  
Past President  
4201 E. 54th Street  
Minneapolis, MN 55417  
HealingArts@mn.rr.com

Carol Roberts, MD  
President Elect  
Wellness Works  
1209 Lakeside Drive  
Brandon, FL 33510  
presidentelect@holisticmedicine.org

Bhaswati Bhattacharya, MPH, MD  
Treasurer 2004  
Wyckoff Heights Medical Center  
172 Fifth Avenue, #38  
New York, NY 10010-5919  
Email: bhaswati@aol.com

Hal Blatman MD  
Secretary 2004  
10653 Techwoods Circle,  
# 101  
Cincinnati, OH 45242  
hblatman@iac.net

## AHMA TRUSTEES

### TRUSTEES

Jan Staffl, MD  
Trustee At Large  
151 West 7th Avenue, Suite 110  
Eugene, OR 97401  
Janstaffl@comcast.net

Victor Sierpina, MD  
Trustee At Large  
301 University Blvd.  
Galveston, TX 77555-1123  
vssierpi@utmb.edu

Todd Bezilla, DO  
Council HARP  
2311 Paulwynn Road  
Wilmington, DE 19810USA  
harps@holisticmedicine.org

Robert Wickiewicz MD  
Trustee At Large  
265 Route 26A  
Stuyvesant, NY 12173  
rwickiewicz@holisticmedicine.org

Donald Counts, MD  
Trustee At Large  
2905 San Gabriel St, # 306  
Austin, TX 78705-3541  
md@drcounts.com

Lawrence Palevsky, MD, FAAP  
Trustee At Large  
1737 Wainwright Drive  
Reston, VA 20190-3437  
Holisticpeddoc@aol.com

Emily WhiteHorse, PA-C, MA  
Associate Trustee  
Samuel Merritt College  
Physician Assistant Program  
450 30th Street  
Oakland, CA 94609  
ewhitehorse@earthlink.net

Jodi Sherman, LMT, MD  
Wound Healing Laboratory  
UC San Francisco  
513 Parnassus Ave  
HSW 1619, Box 0522  
San Francisco, CA 94143-0522  
resident@holisticmedicine.org

Rachel Busse, MS II  
Student Trustee  
1457 S. 1st St. Apt #2  
Louisville, KY 40208  
rjbuss01@louisville.edu

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Luke Fortney MD

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**AR**  
**Alice Laule MD, ABHM**  
 Harrison AR  
 alicelaule@hotmail.com

**AZ**  
**Gladys McGarey MD**  
 Scottsdale AZ

**CA**  
**Peaslee DuMont MD**  
 Vacaville CA  
 pfdumont@msn.com

**Daniel M. Asimus MD**  
 Pasadena CA  
 dmamd@earthlink.net

**Peter Muran MD**  
 Laguna Hills CA  
 hausdoc@aol.com

**Valerie Youngblood MD**  
 La Jolla CA  
 vyoungb1@san.rr.com

**William K. Mora MD**  
 Sacramento CA  
 willmora@gv.net

**CO**  
**Linda Burnham MD,FAAFP, ABHM**  
 Fort Collins CO  
 paradox@webaccess.net

**Janna W. Moll CSEM, CHTP, CHTI**  
 Highlands Ranch CO  
 janna@hearthealingcenter.com

**Gretchen Frey MD**  
 Highlands Ranch CO  
 gretchenfrey@aol.com

**Roselia Schlichtig Conrad DO**  
 Penrose CO  
 desertwinds@piopec.net

**CT**  
**Jordan Goetz MD**  
 Hamden CT  
 jgoetz@pol.net

**DE**  
**Todd Bezilla DO**  
 Wilmington DE  
 drbezilla@netzero.net

**FL**  
**Carol Roberts MD**  
 Brandon FL  
 wellnesswk@aol.com

**GA**  
 John Mansberger MD  
 Thomasville GA  
 mansbergerJ@aol.com

**IA**  
**Eileen May DO**  
 Indianola IA

**IL**  
**Ashok Gupta MD**  
 Dixon IL  
 ashgup@msn.com

**Steven Ayre MD**  
 Burr Ridge IL  
 steven303@aol.com

**IN**  
**Kathleen A. Stienstra MD**  
 Terre Haute IN  
 FPKAS@uhhg.org

**KS**  
**Jennifer E. Utley MD**  
 Overland Park KS  
 Jenutley1@aol.com

**LA**  
**Henri Roca III MD, DAAFP, DABHM, CCH, RMT**  
 New Orleans LA  
 henriroca@aol.com

**MA**  
**Alexander Angelov MD**  
 Swampscot MA

**MD**  
**Robin L. Bissell MD**  
 Grantsville MD  
 Robin@pennswoods.net

**Carol Bowman MD**  
 Churchville MD  
 cbmd@erols.com

**MN**  
**Carolyn Torkelson MD**  
 Shakopee MN  
 CIMTork@aol.com

**Bill Manahan MD**  
 Mankato MN  
 bmanahan@mn.net

**Charles Weisman MD**  
 Faribault MN  
 cweismanmd@hotmail.com

**MO**  
**Neil Nathan MD**  
 Springfield MO  
 neilnathanmd@worldnet.att.net

**Bethany Klug**  
 Kansas City MO  
 dbklug@sprintmail.com

**NC**  
**Cheryl Elliott RN**  
 Cary NC  
 followsherheart@mindspring.com

**Patricia Johnson MD**  
 Robbinsville NC  
 Trishajun@earthlink.net

**Mark McClure MD**  
 Cary NC  
 mcclure@urolmd.com

**NH**  
**Lynn Durand MD**  
 Concord NH  
 Ldurand@pol.net

**NM**  
**Kathryn Keith MD**  
 El Rito NM  
 kkeith@la-tierra.com

**NY**  
**Ryna Villar**  
 Bronx NY  
 ryna\_villar@yahoo.com

**Dawn Stranges**  
 Batavia NY  
 dawn@innerpeacemedicine.com

**Jeffrey k. Harris MD**  
 Fairport NY  
 wholeeye@aol.com

**Gail Weiser RPA-C, MSW**  
 Rochester NY  
 gsweiser@juno.com

**Esme Finlay**  
 Buffalo NY  
 eefinlay@buffalo.edu

**Sharon Herr BS**  
 Nassau NY  
 sherr@nycap.rr.com

**Robert Wickiewicz MD**  
 Stuyvesant NY  
 rwickiewicz@holisticmedicine.org

**PA**  
**Christopher Lawinski**  
 Philadelphia PA  
 lawinski@mail.med.upenn.edu

**Helene Leonetti MD**  
 Whitehall PA  
 littlelion@rcn.com

**Earl Trievel DO**  
 Lionville PA  
 DrT19353@juno.com

**Barb Harris-Feshami MD**  
 Kittanning PA  
 barbharrismd@aol.com

**Karyne Wilner MA**  
 Philadelphia PA

**TN**  
**Coleen M. Smith DO**  
 Johnson City TN  
 colsmithdo@pol.net

**TX**  
**Victor Sierpina MD**  
 Galveston TX  
 vssierpi@utmb.edu

**Alberto Santos, III DO**  
 Corpus Christi TX  
 Drsantos@drsantos.com

**VA**  
**Amy Traylor MD**  
 Warrenton VA  
 atraylor@earthlink.net

**WA**  
**Ann McCombs DO**  
 Kirkland WA  
 amccombs@pol.net

**Kjersten Gmeiner MD**  
 Seattle WA  
 gmeiner.k@ghc.org

**WI**  
**Donald Riemer MD**  
 Rice Lake WI

**WY**  
**Kenneth Kranz MD**  
 Cheyenne WY  
 TAIJIREIKI@AOL.COM

**Michael Gurevich MD**  
 Roslyn NY  
 migurevich@hotmail.com

**Edward Tick Ph.D.**  
 Albany NY  
 edtick@juno.com

**Richard A. Aballay**  
 Bronx NY  
 raballay\_2000@yahoo.com

**Mary Scanlon O'Kelly MD**  
 New York NY  
 mokelly2@nyc.rr.com

**Margaret R. Mitchell MD**  
 Williamsville NY  
 margaretmitchellmd@hotmail.com

**Robert Weissberg MD**  
 Albany NY  
 Integmedrw@aol.com

**OH**  
**Kirsten Harrell Psy.D**  
 Kettering OH  
 harrell@essential-spirit.com



President-elect Carol Roberts gets the spirit moving.



Victor Sierpina and Gladys McGarey taking a break between sessions.

## AHMA Conference 2003 San Diego Snapshots

Past-president Mark Hoch dances with his daughter



Classifieds Section

All b/w text, no graphics. Rates per 60 characters:  
Non-members=\$35/60 characters  
Members=\$30/60 characters  
Student/Resident members=\$20/60 characters

Example of 146 character classified ad:

The Center for Natural Health in Albuquerque, NM has an opening for a holistic MD.  
For a complete description contact Jane Doe at 555-255-2525, jdoe@holisticmedicine.org.

**FOR SALE:  
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This 17 year old practice is open four days a week. Income is 95% cash.

There is no hospital work. Average age of patients is 40. The office has 1,800 sq. ft. and contains seven rooms. Physician is moving out of state.

There is another physician who comes in and does acupuncture. The practice grossed 185,000 in 2002. The doctor took off one month in 2002 for vacation and only worked 11 months. Located in semi-rural northern California near

Lake Tahoe/ Sierra Mountains/ Sacramento. Elevation is 2500 ft. with a moderate climate. Beautiful place to raise a family.

CONTACT: Stephen Banister, M.D.  
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**AHMA Annual Scientific Conference 2004  
The Soul of Medicine  
Sheraton Old Town  
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**Save the dates  
Pre-Conference Intensive April 28th  
Conference April 29th - May 1**

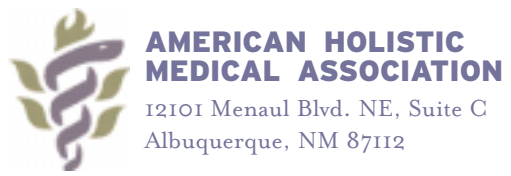


**CALL FOR SUBMISSIONS UNDERWAY  
Submissions accepted for the following tracks.  
Main Theme Track- The Soul of Medicine  
General Practical Track  
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ABHM Track\***

**(\*coordinated through the ABHM office)**

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**Ken Jacobson**  
Executive Director

The AHMA Newsletter is  
published four times per year:  
February, April, August & October.

**DEADLINE**  
Articles should be sent to the  
AHMA office no later than  
September 15, 2003