

# The Crazy Wisdom Interview with Dr. James Neuenschwander of Bio Energy Medical Center

## The Rewards and Challenges of Practicing Integrative Medicine in the Age of Obamacare

Interviewed by Bill Zirinsky  
Photography by Rachael Waring

*Jim Neuenschwander was first interviewed by the Crazy Wisdom Community Journal more than twelve years ago, when he was 38. He was the first of Ann Arbor's second generation of integrative medicine doctors to set up shop. (The first generation basically consisted of Lev Linkner, Dennis Chernin and Patricia Kelly.) He was then a handsome young doctor --- idealistic, committed and passionate about the practice of alternative medicine. Now, 50, he is still handsome, still engaging, still committed and passionate. His idealism, though, has been tempered by his years of dealing with the medical system, and his years of working with the complexities of his patient's medical challenges. Nonetheless, he remains constructive and forward-thinking in his approach to patient care, and in his belief in an integrative approach to medical issues.*

*Jim was raised in Dearborn. He received his BS in Cellular and Molecular Biology from the University of Michigan in 1981, and his MD from the U of M in 1985. He is the founder and Medical Director of the Bio Energy Medical Center on Professional Drive, near the Whole Foods Market on Washtenaw Avenue. (<http://www.bioenergymedicalcenter.com/>) He lives with his wife of 12 years, Tricia Neuenschwander, who also works as the Office Manager for Bio Energy. He has three grown children by his first marriage, and Tricia also has three grown children. They live in White Lake Township on Oxbow Lake, about an hour from Ann Arbor.*

*Jim is a lively and forthright conversationalist. He has a good sense of humor and a fine ironic bent, both of which may have held him in good stead as he navigates the absurdities, frustrations and sadnesses of our health care maze.*

**Bill Zirinsky:** Jim, it's been 12 years since we last interviewed you. At the time, you were a young physician with a determination to provide an integrative medical care approach for people in the Ann Arbor region. At the time, only a few other allopathically trained physicians were doing this, in town. Now, you're 50, a new grandfather, and there are quite a number of integrative group practices around town. Let's start with some questions about the evolution of your integrative medicine practice.

Are you glad that you're an integrative physician? Do you sometimes wish you could just have a standard old medical practice, using all the regular diagnostic tools and methods? It would be easier, no?



**“My heroes have always been people that looked at a problem that many others had already examined, and were able to find simple answers because they thought outside the box.”**

**Dr. James Neuenschwander:** Every day I pull my hair out considering the way medicine is practiced. We actually know the cause of many illnesses; and yet, we persist in treating only symptoms. We are taught half-truths that are repeated often enough that everyone believes them. A perfect example is the treatment of heart disease. In the 1980's, it was determined that heart disease was definitely caused by free radical damage brought about by inflammation. We have known this for 30 years. And yet, which medication did your cardiologist put you on to reduce inflammation? None (with the exception of aspirin, which he put you on for blood thinning and not inflammation).

A wise man once said that no disease is the result of a medication deficiency. Heart disease is not caused by a Lipitor deficiency. Despite all of this knowledge, most people (including doctors) are still stuck in the false model that cholesterol causes heart disease. If this model were true, we would be curing heart disease right and left. Certain models in medicine are true — bacterial infections cause most ulcers. How do I know this? Because if I put a person who has an ulcer on one month of antibiotics, I usually cure them of the ulcer. If cholesterol caused heart disease, all I would have to do is put someone on a statin drug and their heart disease would be cured.

**“Every day I pull my hair out considering the way medicine is practiced. We actually know the cause of many illnesses; and yet, we persist in treating only symptoms. We are taught half-truths that are repeated often enough that everyone believes them.”**

It is thought that 80% of what we do in traditional medicine simply does not work. I would put that number at 99.9%. How many therapies (outside of antibiotics) are curative? Not many. How many parents are told that their children's autism is incurable, because they have no drugs to treat it? And yet, we are able to significantly help over 50% of the kids we see by using nutritional and off label approaches. The true tragedy in all this for me is that

I have seen and learned too much. I know there is a better way for much of what we do in medicine, and I see the damage that is done because most of my profession opts for the traditional way. Would it be easier to go the traditional route? I would need to take an amnestic and forget everything I have learned and seen in the past 20 years. And yes, there are days that amnesia sounds good; but then again, I also have days that I would long to be the greeter at Meijer.

**Bill Zirinsky:** Are you as "alternative" as you used to be, however you would define that?

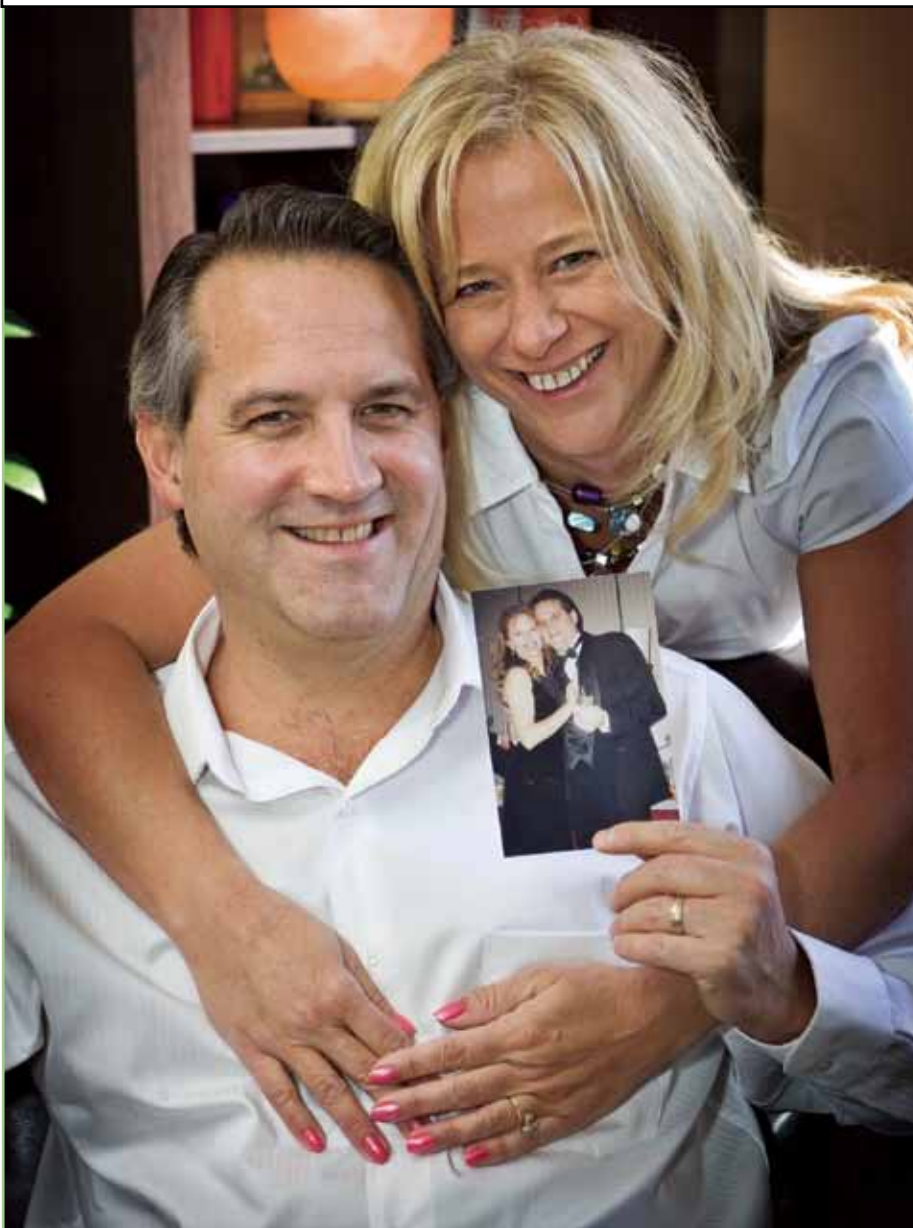
**Dr. James Neuenschwander:** Interesting question. I am certainly more integrative than I used to be. I have learned that to get at the root of health requires nothing but alternative approaches. Detox, exercise, meditation, and good nutrition are what you need for this. However, to get past some people's genetics or toxicities can require the use of medications. Frequently these are being used off label (for something other than their original use, i.e. we frequently use seizure medications to treat behavioral disorders). The paradox is that those of us that are integrative frequently have a far deeper understanding of the medications than many of our allopathic colleagues, who tend to prescribe based on the last position paper published by their respective specialty colleges. I have lost much of my fear of using medications where appropriate, but I certainly have not lost my belief in the use of alternative therapies to truly get to the root of health.

**BZ:** Do you find it rewarding to see the slow but steady growth in integrative medicine, and the number of younger people who are on your integrative/complementary path?

**Dr. James Neuenschwander:** Yes, I do. All we need is about 100,000 more of them, and we should be all set. I think the problem is that we are not taught to think independently in medical school. You have to have a good brain to get through medical school; and yet when you do, you are told not to think but to follow protocol. Most of the way medicine is practiced no longer requires a physician — only a computer with the appropriate decision tree. If you go to an emergency room with chest pain, most of the orders are pre-written and frequently started before the doctor even evaluates you. Much of medicine is like this. What we need are medical schools that teach doctors to think, to question, to seek out information beyond what the next blockbuster drug company is trying to disseminate, and to find the source of their patient's illness and then treat with the best modality for that patient, rather than what the protocol dictates.

**BZ:** Do you have more competition for patients than you used to, or less...or is that something doctors steer away from talking about?

**Jim and Tricia Neuenschwander**



**“The Internet has been a godsend. The more information that is out there, the more people will expect in their own health.”**



**The Neuenschwanders at their office on Professional Drive in Ann Arbor**

**Dr. James Neuenschwander:** I suppose there is more competition, but there is also more need. I have been around long enough that I don't really have to worry about this. We offer a fairly unique product, and when that becomes so common that I don't have enough patients to keep me busy, then it is time for me to retire; I have accomplished what I dreamed of and changed the way we practice medicine. But, I am not holding my breath (or purchasing my retirement villa).

**BZ:** You used to use a Voll machine. What does that do? Do you still believe in it, and have time and evidence shown it to be legitimate and useful?

**Dr. James Neuenschwander:** We still use a Voll machine. It measures the resistance of skin to the flow of a small, electrical current at specific reflex points. These points correspond to various internal organs; so, the Voll allows us to get an energetic map of what is going on in the body. This type of testing is the most sensitive testing you can find. It is, in essence, measuring the body's subtle energy fields. This is where imbalances/disease starts.

I have an outstanding Voll operator in my homeopathic physician, Uma Desai. Dr. Uma has become very skilled in the use of our Voll machine. We updated our machine last year so that it is state of the art. I am always impressed. When Dr. Uma comes to me concerned that she picked up a heart or other condition on the Voll, it is almost always confirmed when I do medical testing.

I use the Voll for a number of things. First, it is a good way to determine a person's sensitivity profile. Patients will often have sensitivities to environmental chemicals or even the medications/supplements they take. The Voll is a good way to test for these. Secondly, I use the Voll when I get "stuck." When I am not finding answers with my standard testing, the Voll frequently will show the way. The third place I use the Voll is simply to get a snap shot of a person's health. They may look healthy but are really in need of care.

**BZ:** You were a strong believer in homeopathic medicine, even though you were trained as an allopath at U-M Medical School. Are you still? And what is it best suited for, in your opinion?

**Dr. James Neuenschwander:** Homeopathy is interesting stuff. We are administering minute quantities of a substance to treat the very symptom that substance would cause in a full dose. Have a fever? Take a homeopathic dose of a substance that causes a fever. They seem like nothing, but I have seen them do incredible things. I think homeopathics work well on children.

## Interview with Dr. James Neuenschwander

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They work well as subtle detoxifiers. They work well to change long-term (constitutional) health patterns. And, they are the primary mode of treatment for many people that have lived long and healthy lives.

**BZ:** I see that you continue to have an acupuncturist on staff, as you have, for many years. When do you bring the acupuncturist in to your medical cases? How does that work?

**Dr. Neu:** Acupuncture is its own system of medicine. Traditionally it was used to keep a person healthy. In traditional culture, you paid the acupuncturist to keep you healthy. When you got ill, it was considered a failure of your treatment, and you stopped paying: the exact opposite of our current system, which rewards only the treatment of illness rather than the maintenance of health.

Acupuncture seems to work best in certain conditions. First, it is outstanding in the treatment of pain. This is what most people think of when they envision acupuncture. I got interested in acupuncture after suffering from severe sciatica for three months. One treatment cured me. I got on the table in pain and got off that table out of pain. That was 18 years ago, and it has never returned.

It helps with all types of pain: back pain, migraines and other headaches, abdominal pain, joint pain, muscle pain, and pain from acute injury, to name a few. Acupuncture is also one of the few ways to access the nervous system, especially the central nervous system. This makes it helpful in treating neuropathies or neuropathic (nerve mediated) pain such as those caused by diabetes or the shingles. It can also help with ringing of the ears and vertigo.

Acupuncture has benefit with abdominal conditions such as constipation, pain, IBS, and pelvic pain. It has been shown to improve outcomes in fertility treatments, including doubling the success rate of IVF, improving hormonal balance in men and women, improving ovulation, increasing sperm counts, and others. The list is long. Basically, I tell my patients to try it for about 5 treatments. If they respond, they have a tool they can use for their health. If not, then acupuncture is not for them.

**BZ:** And colonics. They "still don't get no respect," as Rodney Dangerfield used to say, in the wider medical community. Tell us why you believe in their value? And has it been frustrating to you to see myths and fish tales persist, with respect to its safety, its usefulness, its value?

**“The difference between this type of testing [ELISA and MELISA] and the standard blood work we are used to is like the difference between a skull x-ray and an MRI scan: it provides far greater information and detail about a person’s systems.”**

**Dr. Neu:** For some reason, no one wants to talk about poop. Our digestive tract lies at the core of our health. It is, obviously, the place from which we get our nutrition; but recent research has shown that it is also what controls our immune system. We all know what stool looks and smells like. Given the choice, would you rather have that stuff inside you or outside of you? I choose the latter. We were all taught that whatever your normal stool frequency is, that is normal bowel function. Normal, maybe. Healthy? No way. This is another of those mass myths that are perpetuated by simply repeating them enough times to enough people.

Healthy bowel function is having a bowel movement after every meal. That means at least three times a day for most of us. It should take less than a minute, should be 18-24 inches long, and should float. If you don't have that kind of function, consider colonics. Even if you do, consider colonics anyway. We live in a toxic world and eat toxic, radiated food. We no longer feed our digestive tract the natural bacteria or fiber it needs to stay healthy. Given that much of our chronic health conditions are related to toxicity, this is cheap insurance.

**BZ:** You mentioned to me that you treat more children than you used to. How did that come about, and what are kinds of problems and issues are you specializing in, in treating children?

**Dr. Neu:** My wife, Tricia, had a colleague who had an autistic son. She had heard that the child was essentially cured of autism using an alternative approach. When she investigated that approach, she discovered that it was all the same stuff I was doing with adults. She approached me to get educated on treating kids. I was already busy enough with my patients, but Tricia convinced me otherwise. We treat children with all types of childhood disorders — whether it be asthma, allergies, autism, ADHD, speech delay,

sensory processing disorders, digestive issues, reflux, autoimmune issues, or any number of other issues; our approach works on many of these issues.

Children are wonderful, because they are healing machines. The progress it might take an adult a year to make, will take a child a month. It is very rewarding to see children that have behavioral issues, are unable to talk, or are on five medications for their asthma get better by removing the things that are making them worse and adding in the nutrients their bodies need. There is nothing more touching that to have a child that could not speak and whose parents were told that there was nothing that could be done, say “thank you” and “please” and “I love you, Mom” instead of hitting themselves in frustration because they can't speak.

These childhood disorders have become an epidemic. Autism is up from one in 10,000, when I was a medical student, to one in 90 eight-year-olds; and, perhaps as many as one in 70 three-year-olds. Asthma, allergy, and autoimmune rates have followed that trend (not quite as impressively). In another 10 years, it will be abnormal to have a neurotypical kid that is not allergic and can breathe.

**BZ:** You are a very strong believer in good nutrition and nutritional information. How does that relate to caring for sick kids, kids with autism, childhood diseases?

**Dr. Neu:** We all have genetic glitches that affect our individual ability to tolerate environmental insults (hey environment, your mother wears army boots — sorry, I am getting a bit punchy). If the environment does not stress that system, we don't get symptoms. So we know, for example, that many kids with autism or asthma have issues with their detoxification system. Autistic kids tend to be low in glutathione and lack methylated B vitamins. These two processes mean that they are going to be more susceptible to things in the environment that require glutathione or methyl B12 to detoxify. We also know that methylated B vitamins play a role in our behavior (just ask my office staff before and after I give myself a methyl B12 shot). I think the issue is that our environment has become more toxic in these areas.

We know a subset of autistic kids have extremely high levels of antibodies to certain vaccinations while they might not make any antibodies to other vaccinations. Obviously, if you don't get vaccinated, this is not going to cause a problem. Similarly, if you aren't getting dioxins from the environment, you don't need the glutathione levels in the liver that you do in our environment. Our job as practitioners is to identify those issues and provide the nutrients to correct it. We also have to identify those environmental toxins and remove them. Sounds simple, but it is an ongoing adventure to accomplish those two things.

It is amazing what nutrition alone can accomplish. The perfect example of this was an experiment done with some white mice. In the research world, you can get mice that are so inbred that they are essentially identical twins of one another. So there is one such strain of mice called Agouti mice. An Agouti mouse is always white, fat, gets diabetes, and dies young of heart disease. They are studied to see what can be done to prevent these illnesses. When fat, white Agouti mice have babies, they are also fat and white and develop diabetes and heart disease. That is their genetic makeup. So, one brilliant researcher decided to see what would happen if the mother Agouti mouse was treated with good nutrients while she was pregnant. She gave the mice basic nutrients — omega 3 fatty acids, methylated B compounds, antioxidants vitamins and the like. When these mice gave birth, they had skinny, grey babies. It would be like two morbidly obese white people giving birth to a skinny, Asian baby. That is the power of nutrition. Those nutrients completely altered the expression of those mice's genes.

**BZ:** Can you give us some examples of the interplay of nutrition and autoimmune disorders, allergies, fatigue syndromes, detoxification?

**Dr. Neu:** Autoimmune disorders, fatigue syndromes, and allergies are basically caused by the same thing: the immune system has forgotten who to go after and who to ignore. We call this ability immunotolerance. Early on, our immune system is supposed to identify what is “self,” so that it can go after anything that is “non-self” like a bacteria or virus. When we lose that immunotolerance, we started reacting to ourselves and we call it an autoimmune disorder.

When we lose tolerance to environmental factors such as pollens or food, we call it an allergy. When we lose tolerance to the childhood viruses we all get and never get rid of (chicken pox, herpes simplex, Epstein-Barr, etc.), we develop a fatigue syndrome. In all these issues, the immune system is spinning its wheel reacting to things it shouldn't.

Recent research has determined that the immune system is controlled by the digestive tract and something called intestinal permeability. When we eat food, we are supposed to break down our proteins into tiny bits. When these bits are absorbed, they are too small for the immune system to recognize, and they do not cause a reaction. If those protein pieces are too big, they are not absorbed because the gaps between the cells in the intestine are too tight

(low permeability). Those bigger protein pieces end up in the colon where they are used by the bacteria that live there. No immune irritation. If, however, something happens to open up those gaps (increased permeability), those larger pieces of protein can get into the blood stream. When they do, they irritate the immune system. Now every time you eat that food, you are setting off your immune function. Couple that with the wrong genetics, and you have one of these disorders.

What increases intestinal permeability? Stress appears to be the biggest factor; but many other things can: food sensitivities, medications, infections, chemical agents, etc. So when we change a client's diet, or add good bacteria, or work to eliminate a medication, or improve their digestion, we are helping their immune system to calm down and eliminate the disorder.

**BZ:** What are some examples of the mainstream allopathic world having followed the lead of the integrative medical approach, over the last decade?

**Dr. Neu:** We are seeing far more interest in the value of nutrients. How many reports have you heard about vitamin D deficiency, and how important it is for our health? How about advertisements on television for fish oils? Even drug companies have jumped on board. Instead of investing one billion dollars in a new drug that might not work, they invest 100,000 dollars in a study that shows that their fish oil lowers triglycerides. You can look in any nutritional textbook and it will tell you the same thing; but because the drug company did the study on their fish oil and had the FDA sign off on it, they can claim that only their fish oil has been FDA approved to lower triglycerides. Then they make it available only by prescription and tell doctors how to use it. This is a model that both doctors and patients are used to. We will see more and more of this in the future.

Current examples of supplements that are being promoted by the drug companies include fish oils, antioxidants for eye health, bioflavonoids for joint health, probiotic compounds to treat gut issues, and methylated folate compounds for depression and heart disease.

**BZ:** Dr. Uma Desai, at Bio Energy, does E-Maps. What are they?

**Dr. Neu:** E-MAP is our acronym for the Voll (it stands for energy mapping of acu-points).

**BZ:** You said to me that some years ago, half of your patients came to you because they didn't like doctors, and the other half came because they weren't getting answers from their physicians. And that nowadays 80-90% come to you because they're not getting answers. Can you talk about this?

**Dr. Neu:** The Internet has been a godsend. The more information that is out there, the more people will expect in their own health. You mean I don't have to suffer with these hot flashes? You mean there is something that might actually cure my allergies? You mean my autistic child is actually treatable? People look for answers and find places like Bio Energy.

**BZ:** Please tell us some stories/anecdotes about the efficacy of an integrative approach when dealing with your patients. "There's a switch — once you turn on that switch, you're well." Would you elaborate on that?

**Dr. Neu:** We are designed to be well. Illness is an unnatural state. I compare illness to a rubber band on stretch. To get the rubber band back to its normal state does not require that you push it into that shape; you merely have to remove the thing that is keeping it on stretch. That is what we try to do.

The switch I am speaking of is a master switch. People that have had miracle type cures of incurable conditions will report that when the miracle occurred, they knew in an instant that they were well. It may have taken their bodies months to reflect that wellness, but it occurred in an instant.

I recall a story from a book on healing. The author was a physician who used Zen techniques to help people find their wellness. He spoke of a woman who came to one of his weekend courses — she was frail and had an obvious abdominal tumor. During the course of the weekend, something happened: she was visibly better. When he saw her later at one of his follow up classes, he asked her what had happened. She told him that she had had insulin dependent diabetes since she was an infant and had recently been diagnosed with an incurable liver cancer. While she was doing one of his Zen exercises, something happened inside her: she realized that, because of her illness, she had never chosen to live. In the moment, she flipped her switch and chose to live. Within six months, her tumor had disappeared; she looked healthy and had reduced her insulin. After one year, she fired her doctor because he kept insisting on another CT scan to look for the tumor that had disappeared. All because she found that switch. If we all knew where that switch was, I would have to find a new line of work.

**BZ:** You like to talk about being a doctor in terms of being in a service profession. Can you elaborate on that for our readers?



**“It is amazing what nutrition alone can accomplish.”**

**“There is greater acceptance that many of these nutrients have very real, pharmaceutical effects — even the drug companies are getting into the game.”**

**Dr. Neu:** I am here as a consultant. I offer advice that I think will be helpful for my clients. That is what we are supposed to do as physicians. I feel that given enough information, people will make the right choices. My job is to get them that information. That is why we spend time with our patients. It is the only way we can serve their needs.

**BZ:** You've moved your offices, from a quiet street over on Longshore near the Huron River, to a busy part of town, near Washtenaw and Platt. Why did you move? Do many of your patients come off of the highway, from other parts of southeastern Michigan? How are you finding the move so far?

**Dr. Neu:** The move was necessitated by a need for a larger space that better reflected the spirit of Bio Energy. We moved into a larger space with more room for everything. We also created a space that was environmentally friendly for our clients as well as our world. It is difficult to promote detoxification and clean living while sitting in a carpeted room with incandescent lights and a heating system that routinely kicks out dust. All of that is gone. All of our flooring is green. Our paints and cabinetry are green. Our lighting is green. Most importantly, Bio Energy has a very relaxed, spa-like feel. I think this is much more in line with our practice. Many patients also like the location because of its proximity to major roads. Our old office was tucked away in the woods — nice for us, but not so easy to find.

**BZ:** You're just down the block from the Parkway Center. There're lots of fine, integrative medical types over there — are you planning to interact with them at all, and if so, how?

**Dr. Neu:** We haven't planned anything formal. We have always used Castle Remedies for our patient's homeopathic needs, and that will only improve. Many of our clients also see other practitioners in this area, so probably not much will change.

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## Interview with Dr. James Neuschwander

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**BZ:** You have always offered certain diagnostic tools that were not generally offered by allopathic physicians. Now, your "toolbox" is even broader. Can you tell us about Dark Field Testing, about ELISA testing, about MELISA testing, and about the kinds of nutritional testing that you do at Bio Energy?

**Dr. Neu:** Dark Field Testing is a way to evaluate someone's health status by looking at a living sample of blood. We take a drop of blood, put it on a slide, and look at it right away. We use a specific type of illumination that allows us to see living cells without killing them and staining them. The term "dark field" comes from the fact that the cells look bright against a dark background. This test allows us to determine multiple things about a person's health: signs of inflammation, free radical damage, gut toxicity, bacterial/viral/fungal infections, and the state of blood fats.

ELISA testing uses a blood sample to search for antibodies against food. If these are elevated, it implies that a person has a sensitivity to that particular food. MELISA testing is a newer variation on the ELISA theme. Rather than looking for a particular antibody to something (like in an ELISA test), the MELISA test looks at how the immune system reacts to things. This is particularly of use when looking for reaction to environmental toxins such as metals. At any given level of metal toxicity, the person with the higher reactivity will have more problems. This can be used to pre-test sensitive patients, who are going to have some type of metal implant, to determine if they will have an adverse reaction to that implant. We also do very in-depth biochemical testing to look for imbalances in energy production, amino acid levels, vitamin activity, intracellular mineral balance, and intestinal bacterial balance. The difference between this type of testing and the standard blood work we are used to is like the difference between a skull x-ray and an MRI scan: it provides far greater information and detail about a person's systems.

**BZ:** "What we're looking for is...function...function...function." You said that to me in a previous conversation. Can you elaborate on that?

**Dr. Neu:** We spend a lot of time in medicine evaluating structure. Most of our standard imaging tests (such as x-ray, CT scan, MRI scan, etc.) only tell us about our anatomy. It is great for recognizing fractures, tumors, or other physical anomalies.

When I talk about function, I mean how an organ system works, not merely what it looks like. This is also true of blood levels—they frequently have little to do with the total body function of that nutrient. If you want to know how much calcium is in a person's body, don't measure their blood calcium; measure their bone density, because this is where the majority of the body's calcium lies. In the same way, instead of ordering a B12 blood level, we measure what B12 does in the body. If we need B12 to go from A to B and our level of B12 is low, we will end up with too much A and not enough B. This is an example of functional testing. So many times, our symptoms are related to the function of an organ system, not the structure. I can't tell you the number of patients who have come here with "normal" workups only to discover that they have significant dysfunction in some important organ system.

**BZ:** In what other ways are integrative physicians better able to diagnose and serve and treat patients than they were 15 years ago?

**Dr. Neu:** There are a lot more labs that provide accurate testing that is not readily available at local labs. There is also a greater effort by these labs to include insurance billing as part of their services. Much of this testing used to be very expensive and labs would not bill insurance companies — this made it difficult for many people to afford these types of workups. This is much better. There is also greater acceptance that many of these nutrients have very real, pharmaceutical effects — even the drug companies are getting into the game.

**BZ:** You mentioned customizing nutrients and customizing recommendations, to patients, in ways that were not previously possible. Say more.

**Dr. Neu:** By doing the type of functional testing I discussed above, we can know ahead of time which specific nutrients a patient might need. Instead of using the "shotgun" method of using everything all at once, we can make sure that any nutrients we use are tailored to that patient. This is particularly true when we are talking about specialized diets for kids. There is little point in eliminating a food if a child has no reaction to it. Conversely, it becomes very important to eliminate that food if there is a significant immune response to it.

**BZ:** You said that the situation for many integrative physicians was on uncertain terrain, and may get worse, particularly in terms of Medicare and insurance...is the deck stacked against them...how?

**Dr. Neu:** The trend in Medicare is to standardize care to what is termed "best practices." This is the one size fits all approach to medicine. These are well-intentioned protocols that attempt to make sure that everyone gets the

best care. The trouble is that it leaves little wiggle room. Right now Medicare offers a bonus to physicians that achieve certain goals — making sure a certain percentage of their patients got the flu vaccine or that all of their patients with high cholesterol are on a statin drug; this, despite a significant amount of evidence that neither of these make a difference in death rates or life expectancy. Currently, the program offers bonuses for attaining these goals. As of 2014, they will start deducting payments for physicians who don't meet those goals. That will be catastrophic for a practice like mine where the vast majority of patients don't want either treatment. Of course, all this can change.

**BZ:** I know that you're involved with some of the national organizations for integrative medical care. How does that sustain and stimulate you?

**Dr. Neu:** I am very busy and do not have hours of time to do my own research. I belong to organizations that bring this research to meetings I attend. In three days, I can catch up on a year's worth of new data and bring it into my practice. It is also great to sit in a room with 500 other doctors who actually think similarly and believe in the things I do rather than being the oddball on the block.

**BZ:** Are you training or mentoring younger physicians...if not, would you like to?

**Dr. Neu:** We occasionally have medical students spend a day in the office. I also have had other physicians "shadow" me for a few days. I have not formally been involved in mentoring. I am definitely interested in this — particularly with medical students. That is one of the few times in our training that we receive information that is reasonably uninfluenced by drug companies — there is still a chance to offer a different way of looking at things and have it be seriously considered. By the time you are done with residence, you are so brainwashed in the mainstream mode of thinking that there is no room for any "out of the box" approaches.

Even more importantly, I am interested in trying to figure out what is causing the epidemics of childhood syndromes such as autism, asthma, and autoimmune disorders. I would love to evaluate and monitor every child born in Michigan, along with their parents and siblings, from the time they are born until they are 18. Gather as much health information as possible to find possible causes including diet, toxin exposure, nutrients, vaccines, etc. The purpose would be to approach this problem from the point of view of gathering information rather than trying to prove a point. It would have to be done independent of any governmental or business entity to make it completely independent — we cannot have any sacred cows. We need to know the true causes so that we can make a difference. I would make this information open access and allow others to process the data to help us figure out this epidemic. We could do more for the health of our future by doing this than anything else.

**BZ:** Who were your role models as a physician? And who are they now? And do you have heroes — people or teachers or healer/doctors you look up to and admire?

**Dr. Neu:** My heroes have always been people that looked at a problem that many others had already examined, and were able to find simple answers because they thought outside the box. The perfect example is the two physicians who discovered that ulcers were caused by bacterial infections. They did this because they noted that almost all of their ulcer biopsies had these bacteria in them. They then demonstrated that ulcers could be healed by taking antibiotics. Others had noted these same bacteria previously, but no one made the connection, because, of course, everyone knew that ulcers were caused by stress and overproduction of acid by the stomach.

Some of my heroes include Isaac Newton, who described laws of motion and gravity, which applied to all of physics until the discovery of atoms and subatomic particles many years later. He did this through observation of nature and by helping to invent calculus. Another is Albert Einstein, who transformed physics with his relativity theories. He did this by doing thought experiments — simply using his brain. There was no computer, no particle accelerator, no laboratory with bubbling test tubes — only his brain.

Unfortunately, the field of medicine has very few of these types of people in it. We are so bound to convention that it is difficult to see beyond those conventions. We are taught medicine in the guru/disciple model. Our professors bestow the knowledge, and we are to accept it without question. We do what we do because our teachers did it the same way. Ultimately, this type of "monkey see, monkey do" teaching is what makes humans the dominant species on the planet, but it does not foster better solutions to our problems.

**BZ:** What's the hardest thing for you, personally, in maintaining a healthy lifestyle?

**Dr. Neu:** My most difficult thing is not getting stressed and having the discipline to maintain my exercise and diet routine. I also tend to get hyper-focused on the task of the day, frequently to the detriment of maintaining a balance in my life.

**BZ:** What's the most satisfying aspect of your work? What's the least satisfying aspect of your work?

**Dr. Neu:** The most satisfying aspect of my work is watching an autistic child, who is miserable and unable to speak, transform in to a normal child to the point where physicians don't believe the child was ever autistic. The least satisfying part of my job is dealing with my profession and looking at the huge barriers of money and process that keep a system going that does not work to improve our health. I bite my tongue and grind my teeth every time I overhear a parent complaining about their child's poor health, frequent infections, and the latest medication they have to be on for their behavior (at age 4). There is a better way, and the vast majority of people know nothing about it. I can only treat so many people — we need to change the whole system. That is a daunting task.

**BZ:** You mentioned to me that you feel yourself to be the "luckiest person around"...why?

**Dr. Neu:** I love what I do; I am successful at it; I am in love with my wife (after 12 years); I live on a lake where every warm day is like being on vacation; all my kids are healthy; and I have been blessed with a good enough brain to appreciate it all. Who wouldn't feel lucky?

**BZ:** What books would you recommend to patients?

**Dr. Neu:** *The 22 (non-negotiable) Laws of Wellness: Take Your Health into Your Own Hands to Feel, Think, and Live Better Than You Ever Thought Possible* by Greg Anderson, which is a brief primer on what it takes to be healthy, and *Getting the Love You Want: A Guide for Couples* by Harville Hendrix, which is a great book on relationships. (Editor's note: both books are available at Crazy Wisdom.)

**“I can only treat so many people — we need to change the whole system.”**

**BZ:** Your wife, Tricia, is associated with Bio Energy. Please tell us about that.

**Dr. Neu:** Trish came in at a time when the office was near to closing. We were not making it financially. She took over management, turned it around, and increased our income 40-50% — all during one of the worst recessions in history. Plus, she is one the few people who can get me to improve myself.

**BZ:** How many kids do you have, and how old are they, where do they live, and what are they up to?

**Dr. Neu:** I have three children — Amber, age 30, Andrew, age 26, and Adam, age 22. Amber is married and has my first grandchild — unfortunately she lives in California. She is aspiring to a career as a documentary filmmaker. Andrew also lives in California. He is striving to a career in acting. Adam is in his final semester at U-M. He will graduate this spring with a dual degree in English and Theater Arts. I also have three step kids — Brandon, an electrical engineer in southern Indiana, Bobby, who is finishing his IT degree at CMU, and Bethany (our baby), who is at her first semester at CMU.

**BZ:** What do you love to do, for leisure, in Ann Arbor, in the winter?

**Dr. Neu:** Sit at a good restaurant, have a martini, and dream of spring and summer.

**BZ:** Thank you, Jim.

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