tion errors, system failures and technical errors with a broad electronic network, patients and doctors can have a system which will minimize insurance loss. Dr. Perednia stated that the economics and advantages of telehealth are so profound that their long-term and widespread deployment are inevitable.

<u>Colonel Donald Person, MD</u>, of Tripler Army Medical Center presented a fascinating illustrated program of the Pacific Island Health Care Project. Through the use of telemedicine many patients can receive care without being transferred to Tripler. Letters, faxes, and long distance phone calls have been abandoned. A web based electronic consultation/referral network was established at ten sites with computer, digital camera and scanner. The medical director reviews the consultations, and forwards them to specialists for their recommendations. Excellent mechanism for saving time, providing prompt diagnosis and care, and saving the government lots of travel dollars.

A final thought - perhaps for the editorial page. This year a dedicated committee of HMA members planned and constructed a program of medical education for attendees at the annual meeting. Our medical association staff worked long hours to plan, promote and coordinate location, faculty, sponsors, and social activities. A great collection of exhibitors offered material and enthusiasm, and the Hyatt Regency Hotel at Poipu Beach was a perfect location. This year, like so many others, the material was cogent, well presented and well timed, clinically important, and on the moving, cutting edge of health care. This program without a doubt was one of the very best educational meetings ever presented. Moreover, the cost was remarkably economical for the number of hours of continuing medical education. The curious part is why so few of our members took advantage of this truly excellent bargain offered by the annual meeting committee. Less than 10% of members of the Hawaii Medical Association were present to profit from the knowledge and skills of the distinguished faculty presenting material which is of significance and importance to everyone in the health care system.

Letters to the Editor

Dear Dr. Goldstein:

I am writing to acknowledge receipt of a copy of your recent note and the enclosed copy of the Hawaii Medical Journal. I enjoyed reading your kind words about Bud Smyser. He was indeed an outstanding public servant and journalist. Your tribute to his decades of contributions was touching. I do not know of a finer individual to have been named a Honorary Doctor of Medicine!

Aloha, Daniel K. Inouye United States Senator

Dear Dr. Goldstein,

I wish to apologize and take full responsibility for the shabby quality of the article written by myself and published in the Hawaii Medical Journal, Nov. 2001, Vol. 60, No. 11, pp. 295-296.

While I do not believe the paper contains any serious errors, it clearly does not meet the minimal scientific and writing standards of the Hawaii Medical Journal of the Hawaii Medical Association and my Department of Medicine of the John A. Burns School of Medicine, University of Hawaii at Manoa.

Sincerely, Richard Kekuni Blaisdell, MD

Comment from the Editor

Dear Dr. Blaisdell,

Your apology is accepted. The manuscripts in the special issues on Alternative Medicine, October and November 2001 were accepted "as is" presented to the journal. Because these were special issues the manuscripts were not submitted for peer review, as is usually done. Mahalo Kekuni.

Women and Heart Disease



Why coronary heart disease is a major health problem for women:

- As women approach menopause, their risk of heart disease increases and continues to rise with aging.
- Women with diabetes have 3 to 7 times the risk of heart disease as men.
- · Fewer women than men are quitting smoking.
- About 44% of women 55 to 64 have high blood pressure.

@1999. American Heart Association



Dear Dr. Goldstein,

I was pleased to see that the Journal devoted an issue to alternative medicine. While my training and practice is fully within "mainstream", I try to keep abreast of developments in the areas of complementary and alternative medicine (CAM) that may benefit my patients.

I was disappointed, however, when I turned to the article entitled "Is There Any Evidence?" by Dr. Tabrah. I expected an informed discussion of the current state of scientific research in this growing field. Instead, I found a vague depiction of CAM modalities as "systems of highly skilled interventional psychiatry," and a rehash of the old-line attitudes of standard medicine, which basically says: "We real doctors know what scientific medicine is, and this stuff doesn't cut it. Maybe someday, if they can test these 'outrageous claims' according to our rules, we'll look at it again."

Dr. Tabrah seems to have ignored the large and growing body of research on many aspects of CAM. As one small example: the book "The Wholistic Pediatrician" by Kathi Kemper MD (Associate Professor of Pediatrics at Harvard Medical School and Director of the Center of Holistic Pediatric Education and Research at The Children's Hospital in Boston) includes 47 pages of scientific citations from sources including the New England Journal of Medicine and Journal of Pediatrics. And that book was published 5 years ago! Academic centers for integrative medicine at Harvard, the University of Minnesota, and the University of Arizona, among others, as well as the Institute for Complementary and Alternative Medicine at the NIH, have been encouraging the application of the principles of rigorous scientific research to many fields of CAM, with productive results.

The readers of the Journal should be given a more informative discussion of this important topic.

Aloha,

Mark L. Cohan MD, FAAP

To the Editor:

I appreciate the opportunity to reply to Dr. Mark Cohan's thoughtful critique of my article, "Is There Any Evidence" in the Oct. 2001 HMJ.

Dr. Cohen, in his paraphrase of my concern about poorly controlled studies, has me say in his words, "maybe someday, if they can test their outrageous claims *according to our rules* (italics mine) we'll look at it again."

Yes, indeed, "our rules" to which Dr. Cohen seems to object, happen to have a long and brilliant history of separating facts from nonsense. The rules are clear—that statistically sound, randomized, controlled, double-blind clinical trials, are the only road to clinical reality. Most CAM awaits this attention.

Dr. Cohen calls attention to Dr. Kathi Kemper's excellent book, "The Holistic Pediatrician" which I have. In chapter 2, in a general discussion of complementary and alternative medicine, she describes as "The Gold Standard: The Randomized, Controlled, Double-Blind Clinical Trial" for its evaluation. Throughout the book, among her suggestions of harmless holistic remedies, she repeatedly advises against numerous CAM practices that have never been touched by a valid clinical trial.

In closing, the following unsolicited note from Dr. John T. McDonnell, quoted with his permission, suggests that good science still lives.

30 Oct 01

Frank,

Great article (HMJ 2001 Oct). While the pendulum has swung away from critical thinking, your comments, published as they are, will serve to remind physicians in years to come, that the power of the double-blind placebo controlled study was not forgotten by all of us in 2001—

Despite some possible disparities in what Dr. Cohen and I see in the current evidence for clinical applications of CAM, I am sure he and the entire clinical community agree wholeheartedly that intense CAM research is needed, and that we can all rejoice on our current public interest and funding.

American Heart

Fighting Heart Disease and Stroke

 27.1 percent of men and 22.2 percent of women age 18 and older are smokers,

putting them at increased risk of heart attack, stroke,

cancer and other potentially

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Every year 40,000

smoke.

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HeartStroke

For more information, call

1-800-AHA-USA1 or visit

Association.

Sincerely yours, Frank L. Tabrah MD

