BMJ 2005;330:45 (1 January), doi:10.1136/bmj.330.7481.45-a Letter

# Placebos in medicine

medicine without informing their doctors.

### Medical paradoxes need disentangling

EDITOR—As Spiegel's editorial highlights, paradoxes around the placebo effect can be overcome by distinguishing between a dummy pill and the

effects of thoughts, feelings, and human relationships.2 Placebos may seem like a less toxic solution than pharmacological

treatments for functional or chronic conditions but this carries side effectsdisrupt trust, and outcome is disturbed. Doctors in Israel give placebo treatments without informing their patients, at trial closure investigators often don't tell people if they got placebo,3 and patients often turn to complementary

The issue should not be about prescribing placebos but rather about the need to increase our general knowledge around healing mechanisms,4 to harness directly what placebo harnesses indirectly, in an ethical and practical manner, encouraging a sense of trust and partnership between the public

and healthcare specialists. Placebo effect research presents evidence of the extent to which individuals

possess natural self healing capabilities that can be nurtured in a healthcare interaction.<sup>5</sup> A medical system that does not place central value on doctors taking time to establishing safe, trusting and collaborative relationships, is not "evidence based" and ignores the obvious impact on outcome from the quality of human caring, becoming less cost effective in the long run.

It is time we stop considering perceptions, feelings, and human interactions in health care as variables that need to be controlled in the pursuit of medical science but include and study these as critically meaningful mediators and moderators of therapeutic outcomes in clinical trials, and daily care.

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- References
  - 1.
  - Spiegel D. Placebos in medicine. BMJ 2004;329: 927-8. (23 October.) [Free Full Text]
    - 2. Di Blasi Z, Kleijnen J. Context effects. Powerful therapies or methodological bias? Eval Health Prof 2003;26: 166-79.[Abstract]

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- 3. Di Blasi Z, Kaptchuk TJ, Weinman J, Kleijnen J. Informing participants of allocation to placebo at trial closure: postal survey. BMJ 2002;325: 1329.[Abstract/Free Full Text]
- 4. Reilly D. Enhancing human healing. BMJ 2001;322: 120-1. [Free Full Text]
- 5. Di Blasi Z, Harkness E, Ernst E, Georgiou A, Kleijnen J. Influence of
- context effects on health outcomes: a systematic review. Lancet 2001;357: 757-62.[CrossRef][ISI][Medline]

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