



The Owl of Athena

CONTRATYRANNOS

The Natural Law Theory of Human Progress Website

EXCURSUS #5

One of a series of monographs that expands the discussion of important topics examined in *The Natural State of Medical Practice*.¹

CONSEQUENCES OF A FAILURE TO LEARN THE LESSONS OF HISTORY

Summary: That the universe is not “unfolding as it should” is the topic of this excursus, for the history of the world is the history of the consequences of authoritarianism. There have been a few brief periods when this was not so, and supporting evidence from the history of medical practice is briefly repeated. It was, however, the post-Reformation West that saw a broad and sustained release of the ingenuity of the unprivileged population (common citizenry). This, plus a reaffirmation of the democratic alliance of physician and patient, first clearly expressed by Hippocratic physicians, brought about the profusion of medical knowledge that has led to a striking increase in life expectancy, first in the West and then globally. But the history of medical practice also clearly demonstrates the calamitous sequels to political interference, such as is occurring today. Predictable consequences to modern medicine are detailed.

The previous monograph, summarizing evidence presented in *The Natural State of Medical Practice*, discussed its relevance in today’s world as objective evidence that human progress and virtue emerge from principles on which human liberty are based, the concepts of natural law and natural rights. But the relevance to today’s political theater need not rely on that philosophical justification. Indeed, while the data and analyses can even be considered objective evidence for the existence of natural law, the fact is, human liberty works. The objective evidence can be viewed either theoretically or pragmatically.²

With the preceding in mind, the relevance of *The Natural State of Medical Practice* lies in its historical and prehistorical evidence that the course of human history has been dominated, indeed absolutely controlled, by authoritarian forces. Thus, in contrast to the optimistic “And

¹ Volume, chapter and page number of otherwise unreferenced statements in this monograph refer to the version of the four volumes as published by Liberty Hill Press:

Vol. 1 – *The Natural State of Medical Practice: An Isagorical Theory of Human Progress*

Vol. 2 – *The Natural State of Medical Practice: Hippocratic Evidence*

Vol. 3 - *The Natural State of Medical Practice: Escape from Egalitarianism*

Vol. 4 – *The Natural State of Medical Practice: Implications*

² Here we tread on the contentious subject of historicism, which is treated briefly in *The Natural State of Medical Practice* (vol. 3. p. 299). The question is whether we can justifiably base present-day political decisions on analyses of causation derived from the study of history. To this it can be responded that the concept of human liberty is so basic that the complexity and unpredictability that may be found in related issues are insufficient to alter conclusions based on the concept of liberty alone.

whether or not it is clear to you, no doubt the universe is unfolding as it should,”³ human history can be viewed as perverse and distorted as it has unfolded, and, if nothing changes the authoritarian comportment of the forces that continue to control it, that perverted manifestation will continue, perhaps as long as the human species is to exist.

But it so happens that the force to be discussed now is not represented in the annals of those who have done the dominating or in the stories and historical works that reflect select scenes from a world that is the product of the dominators. We consider here that other unwritten fact sheet of history, the dominated force, the unprivileged, the common man and woman. That there is such a force is not a fantasy, as *The Natural State of Medical Practice* has shown. To view history as an inevitable sequence of power grabs is to have a superficial grasp of the forces available for shaping the course of human events. It is like reading Tolstoy’s *War and Peace* as a mere aristocratic soap opera.

There have been glimpses in human history of an underlying force waiting to be released, the story of the common citizenry, that has barely been recognized but is of such power that it has recently catapulted the West into intellectual dominance of the world. *The Natural State of Medical Practice* reveals its presence in the field of medicine. Other glimpses include (1) rare individuals who have somehow managed to emerge from the dominated population in authoritarian societies, (2) common citizens from the early urbanization settlement hierarchies of Mesopotamia, Egypt, India, China, and pre-classical Greece, and (3) from the West beginning in the 16th century.⁴ It was at those six times that the “force” of the common citizenry, rather than being displayed in physical conflict against tyranny (always unsuccessful) or in a revolutionary power struggle (and merely replacing one tyrant with another), began to emerge from the shadows, or contemporary political *tabula rasa*, as a force unto itself capable of affecting the course of their respective civilizations. In medicine, the evidence for this assertion is found in those medical writings traceable to the formative years of all six civilizations:

1. Sumer – *Treatise of Medical Diagnosis and Prognosis*
2. Egypt – *Papyrus Ebers; Smith papyrus*
3. India – *Charaka Samhita*
4. China – *Huang Ti Nei Ching Su Wen*
5. Greece – *Corpus Hippocraticum*
6. Modern West – medical journals

Medical practitioners have always been drawn from the realm of the unprivileged. But despite their characterization as illiterate and uninformed factional followers of the rich and powerful on the political stage, the phantom-like power of common men and women now has, through its creation of sophisticated medical care in the West, produced a sustained global source of beneficence to humanity, in contrast to the rare, selective, and transitory beneficence of powerful authoritarian agencies throughout history. The attribution of beneficence to those in power or to the Age of those in power or to uniquely gifted aristocratic forebears has been, in great part, a false attribution in which those who dominate (and their admirers) claim responsibility for the occasional genius arising in their midst or they praise works of genius of their prominent

³ From the *Desiderata* of Max Ehrmann, 1927.

⁴ A “snippet” list of notables from “unprivileged” backgrounds is provided on the opening page of *Medical Practice and the Common Man and Woman: A History* (Xulon Press, 2020), an abridgement of volumes 1 and 3 of *The Natural State of Medical Practice*.

comrades while the dominated multitude is prevented from exhibiting any genius of its own, *i.e.*, by hobbling the opposition the elite win the prize and justify their continued political domination as an elite class.

But genius and ingenuity are evenly spread throughout humankind, indeed dwell in every individual, authoritarian and pedestrian alike, so there will inevitably be some ideas or discoveries within authoritarian circles. But there are two indisputable and overwhelming challenges to the supposed superiority of an elite class. One is simply numerical: if the mass of a civilization is free, the number of persons who can apply their ingenuity to problems at hand is far greater than those holding power. The other is also mathematical: two heads are better than one. Thus, in a free society the opportunity to organize into autonomous groups to solve problems relevant to self-betterment is immensely greater than bureaucratic commissions or diktats. Furthermore, efficiency, cooperation and honesty will more often favor the efforts of the former, whereas boredom, laziness, self-aggrandizement, disinterest and notoriety are some of the problems that will plague the latter. The argument of this paragraph is so obvious that it defies reason why, given a choice, anyone would prefer an authoritarian world to one based on human liberty.

And so we can now face the issue of maintaining the freedom of the common citizenry going forward. If it is maintained the answer is easy: despite its continual squabbles and zig-zag course, progress and improvement of the human condition will continue. But if their freedom disappears as centralization of political and economic power continues under the aegis of an elite political class, what will be the course of human events henceforth?

In answering this question, prehistory can be ignored unless new evidence is discovered, for the critical problem in prehistory was the inability to *initiate* progress. We must instead briefly revisit the social changes chronologically associated with *cessation* of medical progress in those four civilizations where documented medical progress was initiated:

1. Mesopotamia – Rational Sumerian medicine first appeared during early urbanization, *ca.* 2900 BC. Subsequent centralization of monarchical power, begun by Akkadian conquerors (2350 BC – 2100 BC) continued through Persian rule (550-330 BC), diluting the initially rational Sumerian contents in the extant *Treatise of Medical Diagnosis and Prognosis* with numinous practices as edited in the 11th C BC.
2. Egypt – Predynastic Hierakonpolis, a relatively small city, is proposed as the site of medical knowledge found in the *Papyrus Ebers*. It became less important with the onset of Dynastic Egypt (*ca.* 3000 BC) where, under pharaonic rule, rational medical knowledge previously acquired was canonized and restricted to a pharaonic priesthood. No new intrinsic medical knowledge would appear even into the Common Era.
3. India – The Indus River Valley civilization deteriorated for unknown reasons beginning about 2100 BC. Medical knowledge acquired in the Vedic Age in an early city like Mohenjo-Daro was lost except for those fragments that, altered and canonized by the Brahmin caste beginning about 500 BC, form the basis for Hinduism's Ayurvedic medicine, now an inexpensive ancient empiric alternative to modern Western medicine.
4. China – The Longshan civilization (*fl.* 2500 BC) with its limited authoritarianism is proposed as the source of fragments of rational medicine that would become the *Huang Ti Nei Ching Su Wen* in the 2nd C BC. Subsequent monarchical dynasties canonized its knowledge, adding bizarre concepts as edited in the 8th C AD by Wang Bing. Despite an early 20th C effort by Dr. Sun Yat-sen to initiate modern medical training,

Traditional Chinese Medicine was forced onto 20th C Chinese culture by the People's Republic of China as a cheap alternative to Western medicine.

From the above it is argued that initially productive and prosperous settlement hierarchies of early urbanizations associated with medical progress were, in two of the four instances and within a century or two, subsequently dominated for millennia by totalitarian governance. Those civilizations did not progress; they got bigger but not better, and crueler rather than kinder. The Indus River Valley and Longshan civilizations differed in that they disintegrated and would not reappear, but their medical knowledge was subsequently and similarly affected by elite Brahmins in India and imperial dictate in China. In each instance, what might have become scientific medicine reverted to simple empiricism, medical progress ceased, and life expectancy for the common man and woman remained little more than thirty years. Politically, all four civilizations remained wallowing in authoritarian mire for millennia.

What about Hippocratic medicine and the Greek experience? Athenian freedoms began to contract in the 4th C BC, and, with subjugation by the Macedonians, freedom haltingly diminished within disintegrating city-states as Rome assumed possession of region (146 BC). Thus, it was primarily the disruption of Greek civilization and its Roman conquest, rather than authoritarian canonization of medical knowledge, that led to the disappearance of Hippocratic medicine. Greek medicine was not transformed; it merely became the domain of no one and disappeared. It was the Roman Catholic Church that would provide lay practitioners in the Dark Ages. Medieval universities later would idolize and canonize Hippocratic medicine when it was rediscovered, but they did not understand it. Feudal existence in the Dark Ages was terrible beyond words for the feudal serf despite the pan-European efforts of a theocratic kinship, and life expectancy remained little more than thirty years.

We come now to the sixth civilization. The association of medical progress in the West with freedom of the individual, but especially freedom of the common citizenry, can be traced to the Reformation. That progress began to manifest itself in the latter half of the 18th C, and the explosion in medical knowledge and technology in the 19th C set the stage for our subsequent medical well-being. And this has all occurred independently of Hippocratic medicine and the Renaissance. This gift of the previously dominated class has since revolutionized medical practice, health, and longevity around the world. Could such a magnificent success be lost?

Foremost to be considered is the physician-patient relation. The Hippocratic experience in the *Corpus Hippocraticum* and especially its *Oath* attest the critical role of a democratic alliance between physician and patient. The consequence of their interaction is the initiating source of all medical progress. Everything that follows is implementation and embellishment. Even the great advances of modern medicine can be viewed as achievements of findings in the physician's office that were subsequently nurtured by capitalism. Progress in other sciences, like that of medicine, results from further investigation of discoveries and invention, but they have no equivalent to the physician-patient relation. And it is the physician-patient relation that explains why medicine in ancient Greece led the way to scientific inquiry in other areas.⁵

⁵ Unlike medical progress and its inhibitors and catalysts documented in *The Natural State of Medical Practice*, scientific progress in other areas has so far not been similarly analyzed. But it has been stated that, in ancient Greece, the catalyst for true scientific pursuit in other areas was Hippocratic medicine, the latter being distinctly separated from the writings of contemporary natural philosophers.

Impositions and infractions affecting the physician-patient relation have been identified and characterized and are not repeated here.⁶ It is merely to be stated that those authoritarian impositions and infractions are many and mighty, and their mechanism of action is to limit the freedom in the physician's office of both the patient and the physician by misappropriating those freedoms for their own purposes. Here is what will happen as the process continues today, based on the history of medical practice as interpreted in *The Natural State of Medical Practice*:

1. First, the patient will be viewed less and less as a unique human being, for statistical lumping and benefit to society at large will, in committee, determine patient priority and management as physicians become, as in ancient Egypt and in fact if not in name, employees of the State.
2. Second, the capitalist economic system as it relates to medical technology will be controlled by government agencies and will promptly deteriorate; corporatism (*e.g.*, crony capitalism) will flourish and innovation, accessibility and quality of product will dramatically decline.
3. Third, like ancient Chinese medicine, convenience (economic, political) will replace scientific validity in medical decisions and disciplines.
4. Next, guidelines and algorithms will be legally enforced, just as 1st C BC Egyptian "physicians" were penalized should they not follow canonized procedures from ancient times. Few qualified individuals will enter the profession of medicine, with residual physicians working for minimum wage as they did in Russia in the 1980's, and the occasional, but inevitable, poor result associated with a departure from official recommendations will, in a jury's eyes, be a crime.
5. Recognition by physicians of unique aspects of a patient's presentation, history, or response to care will decrease in importance as the physician's personal involvement becomes less valuable because the physician's opinion will not be sought as "guidelines" are followed. We will be unprepared for the unexpected and inadequately prepared for the expected.
6. As in modern Russia, medical associations will be government commissions led by non-clinicians or, more troubling, politically oriented physicians. Medical journals will parrot governmental priorities. Clinical discovery will end as professional vetting ceases and canonization of existing knowledge occurs. Seeking friends in Washington, D. C., will overwhelm seeking truth as government grants become even more the gift of political leaders seeking popular support or afraid of controversy.
7. Politicization of the intellectual hub of the profession will guarantee that, instead of early recognition, careful consideration, and selective management of a problem, any bureaucratic response will be late, massive, costly, and wrong. Some might see the recent coronavirus pandemic (2020-2022) as an example of this.
8. Most importantly, as in modern China, good medical care for the average person, especially those in rural areas, will be unavailable because of limitations on providers, facilities, and therapies.
9. In response to (8), just as in ancient Rome and thence into the Dark Ages, those with insufficient training will continue to replace fully trained physicians, and, as a result, empirical specialists and nonscientific medical treatments will gladly proliferate locally to fill the gaps in medical care as people will, of necessity, seek help from any source.

⁶ *The Natural State of Medical Practice*, vol. 1, Bk. 4, chap. 4, p. 546.

10. Life expectancy will decrease for the common man and woman as medical care reverts to the empiric.

Evidence supporting every one of these ten predictions is present today.

But the cost of loss of freedom in the medical profession will not be the only loss. The critical nature of medical care makes it a universal gauge of the progress of mankind. The history of medicine in authoritarian hands in the past shows that when civilizations lose, or, to be more specific, when the common citizenry lose, their freedoms, progress does not just rest for a while and then gradually resume its journey toward a better life. No! Life spirals down to the wonted authoritarian level of basic human survival, medical empiricism for commoners, privilege for those in charge, and unending conflict.

A perfect example is China, where totalitarian, and often essentially kinship, rule at the state and provincial levels has placed a yoke on the common man and woman for four thousand years. The vagaries in the history of its medical institutions are described.⁷ But because of recent ill-conceived notions by Western commercial and bureaucratic organizations and institutions, Chinese governance has been allowed to beg, borrow, and steal modern Western technology. Today it seems prosperous and progressive, but governance remains solidly authoritarian and will remain so. Had the West not offered a helping hand to Asia the Chinese would still exist in the 16th C world of the Ming governing a hundred million impoverished farmers who had life expectancies of thirty years. And it is to this world they will return unless (1) like other prominent civilizations in history, China satisfies its needs by conquest, or (2) it frees the common citizenry. For the moment it appears to have chosen (1).

It did not need be like this. Had the inherent ingenuity of the Asian population that became modern China been permitted natural human freedoms a century ago, China might today be a leader in progress and its beneficence for all mankind, rather than being an ungrateful recipient of the fruits of freedom of the West.

There are varying methods by which power can be ceded to central governance. From examples in the 20th C, the rhetoric of the authoritarian will justify the social egalitarian policies routinely used to cement positions of power by appealing to the justice and virtue, the “ends justify the means,” of those policies. The issue of virtue is an easy one: the political elite will merely redefine virtue as that which contributes to perpetuation of the State and its policies, just as China has done. Justice also will be conveniently redefined. It will not be blind, and it will indeed be convenient.

In conclusion, the only time that freedom of the unprivileged, or common, citizenry has been permitted to endure to the point that its innate force for good could be fully appreciated and self-perpetuating has been in the West since the 18th C, and modern medical progress and increased human longevity are benefits attributable to it. The beneficence of broad-based freedom of the common man and woman is so momentous, and the event of its loss will be so catastrophic, that there would seem to be no reason to seek any other guiding principle of governance but one that permits the widest possible degree of freedom, the greatest protection of natural rights, and the least centralization of political power. But beware: in an age where rhetoric is so extravagant and its expression so amplified, suasion rather than armed conflict will be the principal means used at first to restrict our freedoms. Therefore, as quoted in *The Natural State of Medical Practice*:

⁷ *The Natural State of Medical Practice*, vol. 1, Bk. I, chap. 5, p. 93, and vol. 3, chap. 6, p. 93.

“Open your eyes to the fearful change which has been so noiselessly affected; and acknowledge
BY STANDING STILL YOU BECOME A PARTY TO REVOLUTION [*sic*].”⁸

⁸ Richard Hurrell Froude (1803-1836), as quoted at the head of Bk. IV, chap. 4, p. 546. Hurrell Froude was the elder brother of the famous English historian, James Anthony Froude. A cleric, Hurrell’s statement is to be found in *Remarks on State interference in Matters Spiritual*, in *Remains of the Late Reverend Richard Hurrell Froude*, M. A., vol. 1 of Part 2, Derby, 1839, p. 196. Although pertaining to “matters spiritual,” Froude adds the comment, based on the principles of Hooker, that it “goes to any kind of State interference at all.” Froude, part of the early 19th C Oxford Movement in England, was arguing a principle of 16th C Calvinism.