

## Corporate Medicine

### Blaming the patient for environmentally caused illness

by

Kate Blake

Today, I have a few hours to myself to reflect on why my life as a Carer, looking after my husband whose health was damaged three decades ago, by chemicals at work, and the lives of so many people like me, are trapped in a time-warp of despair! Crumbling under the treatment handed out to us by the NHS that is failing us all so badly! To quote my daughter at an early age of 6, "Mum life isn't fair"!

This is my personal reflection and it is not about self-pity, it is about systems that have gone wrong, and doctors who no longer listen to their patients. The reality of life for people with environmentally caused illnesses, forced to rely on the National Health and Social Services is far from the public face it tries to portray. It is no longer the caring establishment, focused on wanting to hear your views and for you to lead your own care and treatments. In fact, this cannot happen because in the main, the collusion behind the scenes puts paid, very firmly, to this!

This collusion is perpetrated by some of those you would expect to be at the hub of care and treatment in our society. It is this collusion that is denying patients their basic respect and dignity, leaving many millions of them to suffer a mere pittance of a life and existence with only the hope that change for the better will eventually come!

This collusion is all powerful and in itself is becoming endemic in every section of our population requiring some form of medical and social intervention in their lives, from the

cradle to the grave!

It is this collusion that leaves the NHS strapped for cash, as it is like a vampire, sucking the life-blood through the umbilical cord, and cutting off the blood supply to all the vital organs. It takes huge amounts of money from our health budget, draining the very resources and services that should be receiving it!

We understand the concept of the NHS, that there is no endless pot and difficult decisions have to be made where the help and support can be best given effectively. But the NHS has moved away from this perception. Instead it is heading towards the culling of anyone that shows the symptoms of any illness that cannot be simply 'cured' or that is patently caused by environmental factors. Any illness that is not, in other words, acceptable within the corridors of power in the 'Corporate Tower' that now dominates all our medical care!

It is now run on the controls and promotion of acceptable values, of which illnesses and conditions that doctors are permitted to treat. Those that appear weak and need support over a longer period of time; forget them; they are perceived as a drain on valuable health resources; we don't want to deal with them; they have no worth to society as a whole or it's not profitability.

The majority of those with such illnesses are quite the opposite. They are incredibly brave, strong and resilient, in that they suffer this discrimination in silence, and still try to make something out of their meager and painful lot! This is possibly why these particular patients are targeted in this collusion, because this attitude is understood by those determined to silence them. They see it; it frightens them; so they must continue their relentless mechanisms set out to damage these patients both mentally and physically!

So many people wrongly assume and accept the "party line" of cost, as the reason why the NHS cannot support so many groups with similar illnesses, the ones that appear to affect so many different parts of the body. But it is more about what is going on behind the scenes. The dictates and the imposed philosophy that ensures doctors focus on stress and depression as the main cause of these conditions. This is what is draining the NHS money chain, the vast amount of money invested in this, to ensure that any real improvements cannot happen to any of these patients, because then it has to be admitted that they have real illnesses.

Sadly with most of the propaganda and promoted remedies being rolled out as so called “treatments”, the establishment can use them as a stick to beat these sections of sufferers into submission and to get the patients to a point where they are forced to agree that they are not ill.

These "treatments" do not remotely improve ‘the lot’ of those suffering, nor are they intended to! Instead they are purposely designed to keep patients cycling around on a NHS hamster-wheel until they literally give up, commit suicide or die from the real causes of the actual disease. Instead of being a rarity the hamster wheel scenario is fast becoming a reality which is occurring and increasing with incredible stealth, day by day. The only reason it is somewhat ‘camouflaged’ is that nobody is prepared to add up the total figures, leaving only the individual sections being counted!

It is only when you begin adding up all the accumulative factors involved in the stages in between the different aspects of the patients life, that the burden on all health and social resources, the false economy these controls make, can the unnecessary and the true cost of keeping each patient quiet and their lives in a permanent state of suspension be seen.

Very few of these patients would ever have found themselves on this particular scrap-heap had they been diagnosed with the appropriate cause in the first place and an early intervention been made in their cases. But it might be because here, there is more at stake in these particular patients, and medical orthodoxy might have to admit to an environmental illness through a number of causations that once in the public domain, may well be viewed as very alarming.

These so called, 'all in the mind' illnesses, or the dreamed up “somatic” terminology, (defined in medical texts as based on “a thought”), has taken many of the best, at the best times of their life! But it is not just about them. This epidemic of opposition to proper diagnosis develops and mutates like a virus until it strangles the families of patients too.

Such families or at least spouses initially, have to give up their self-esteem and their place in the working economy. They too, are now reduced to being “a person who was a somebody is now a nobody, just a statistic”! Living a life behind the curtains, isolated, and having to coping with the sufferer’s condition without fundamental help from any quarter. They too, are now without any realistic hope of change or a better future!

If only these conditions were treated appropriately, it would massively reduce the cost of all the benefits across the board. Whatever you do, don't be fooled by headlines that portray these sufferers as social parasites, very few are. Hence the reason why there is such a massive back log in Benefit Appeal cases where justified payments are due, but were refused! (The UK Department of Work and Pensions is reported in 2011 to have by far the highest number of decisions overturned at appeal of any UK Department of State). In the main, it is all part of a cunning attempt in a massive and deliberate programme dreamed up in 2002 to prevent genuine claims and, which is now, fully in force! <sup>1</sup>

When these patient's life lines are cut off, (at the point their illness forces them to give up work), they have no choice but to look to the State to support them. They are not looking for lavish life styles, holidays and expensive cars; they just desperately need benefits to enable them to live on the bread line a rung above poverty.

Part of this grand master plan to relegate these patients to the human scrap heap is the ATOS assessments, set up to ensure most are prevented from claiming benefits. (**Appeal & we'll cut cash, claimants to be told**). ATOS a company, "whose performance in the UK in respect of medical assessments has been and continues to be criticised by UK Parliamentary Inquiries by individual UK MP's and by the judiciary, as well as advocacy groups such as the CAB, disabled people organisations and individual disabled people". <sup>2</sup>

Going through ATOS harassment and bullying tactics, genuine claimants, (as these patients really are), have to suffer the indignity of attending a blatantly biased and unprofessional interview, where the forms, the requirements, the training of the interviewers and the outcomes are all focused on ensuring that the claimants fall at the first fence and live without any income or vital payments. In Aug 2011 press reports revealed that 12 Doctors working for ATOS as disability assessors had been placed under the investigation by the GMC because of allegations of misconduct in relation to their duty of care.

---

<sup>1</sup> "Malingering and Illness Deception" meeting in Woodstock Oxford that included psychiatric professors and the insurance company UMUM Provident

<sup>2</sup> Wikipedia Controversy over Benefit Assessments

A vast amount of money is wasted on the resources that are put together for this original pointless exercise, which refuses the initial request for help, then to have the appeals courts afterwards overturn the original findings. Money that would have been far better spent in the first place, treating the patients with the appropriate medical care.

But this is only a drop in the ocean in comparison to the real waste and main reason why the whole collusion within the NHS system is about lining the pockets of those that hold this power —and they do very nicely out of you, thank you very much!

With the real biological causes of such illness hidden, treatments are replaced by a Pharmaceutical Industry cash-cow that keeps patients stocked up with a variety of psychotic drugs. These products are passed into the medicine chain without any independent outside checks to show trials were truly safe. Their safety is concluded to standards set by the manufacturers themselves and, in the main, without any real measures for monitoring long term improvements in their patient's conditions. That's the plan; don't kill them just yet, as they need customers coming back for more!

So for as long as possible doctors and corporations pedal their unsafe products, marketed and sold with spin; with the inside knowledge that the adverse side effects of the products might outweigh any benefits to many of their patients!

The psychiatrist gets paid twice, first from the pharmaceutical companies to sell their products, introduce and influence their controls over patient's diagnosis and treatments and then from us, as we pay our taxes and contribute to our health care. While payments from other pharmaceutically backed organisations, such as the MRC, fund their deliberately flawed and tainted research programs, which rather than search after truth, prevent any real doctors from presenting real "scientific based evidence"; research papers that might actually see measurable benefits and improvements in the health of patients.

Such research programs actually cause further harm and continue the reliance on useless, and in some cases, dangerous psychiatric drugs. At the same time the results of this research prevent the majority of benefits and health insurance claims from being paid out. Seemingly, the results of research of this kind are also designed to prevent justified legal action against

dangerous practices in Industry and the Health Services as a whole.

There is a scam of immense proportion in of all of this, one that leaves the majority of undiagnosed and environmentally caused illnesses in the hands of psychiatrists. Psychiatric diagnosis is more often than not a matter of opinion, not firm evidence, and certainly their opinions are nothing like the proof that they claim is essential in evidence based medicine.

But the Big Pharm and other industries, like the Chemical and processed food industries love this, (of course, its money, money, money), hence the ever expanding book the DSM IV manual and codes, the alternative version of medicine, comprised of pure fiction and escapism!

It would appear that a great deal of the money that could have been invested in improving relevant research programs and care, is instead being siphoned off for the use of very questionable activities by this section of the medical profession.

When you start analysing this whole culture you begin to realise the reasons behind this are not only cruel but on par with an exercise in assisted genocide. This is when you begin to see the bigger picture and understand just why these people do not want the majority back on their feet, living for themselves, their community and their society. It is about controlling behaviour patterns and never about our well-being, let alone making these patients better!<sup>3</sup>

Find me one patient that has been stigmatised by this system that doesn't want to get better and free of the insurmountable pain they experience each day; you won't find one. Some of these patients might never have the opportunity to experience any life at all, as they became ill at a very early age and reliant on other's care. Most of those that have worked usually enjoyed their jobs, despite, in some cases, it actually causing their illnesses. Some had even made valuable contributions and gained great respect within in their local community. Those whose illness took them later in life, would probably understood what leading a normal healthy life-style meant with their family, friends and employers, and a normal routine of getting up, going to work and coming home and having choices of where to use their wages. If their life style now is one by choice, then they have made odd decisions- fighting now only to keep a roof over their head, bed bound or wheelchair bound, just about able to feed

---

<sup>3</sup> The History of Psychiatry: the Industry of Death [www.youtube.com/watch?v=gvdBSSUiyS](http://www.youtube.com/watch?v=gvdBSSUiyS) 19 09 2011

themselves and their families — I have never met one who does not want their life back.

Most of those who suffer from environmental ill health, had no intentions of being a burden to anyone, they would give anything to return to work and a normal life. Hence, why so many patients respectfully agree to the outrageous treatments, ones that are advocated as necessary to improve their conditions, they still believe that doctors have only their best interests at heart, and each is desperate to get their former good health back again.

This might have been true before real medicine and research was high-jacked by the pharmaceutical and other corporations in the mid 1990's.<sup>4</sup> It is only now that people are beginning to realize that most health policies are no longer decided by general consent, but instead dictated by a small group hell-bent on increasing their own vested interests, sitting in their own convened meetings with only a selective and secretive circle of buddies being allowed to rubber stamp health initiatives!

Forget the chance of a balance representation on any medical research, or workshops that discuss new ideas. The only research that happens these days is research dictated and controlled by corporations and psychiatrists and their associates, with just a token few from outside of their own circles. Any independent work is immediately viciously attacked and discredited! That way they ensure total domination of results and outcomes. The only guarantee coming out of all of this is that it will cost tax payer dearly, both financially and in the lives that will be lost! The block went down on true medical research and training when, long ago, we allowed this group to hold the purse string and control our health budgets!

Even press releases on any health issue cannot be trusted as they have sewn these up and ensured that all media articles are censored before they are released into the public domain. Should anyone challenge these directives, our fundamental right within a civilized society, and indeed healthy, within any fields of science, up comes their well-oiled publicity campaign and their primed supporters to smear the response and muddy the waters.

None of the policies that grow out of these systems can be measured in any way for positive

---

<sup>4</sup> Martin J Walker Science is the New Politics. Available from <http://www.slingshotpublications.com> and Martin J Walker, Dirty Medicine: The Handbook, Slingshot publications, London. 2011.

benefits and improvements in patient's conditions, for indeed they are not, consistently and deliberately. The majority of their work is based on theories that contain hypotheses that cannot be audited, as none of their research comes from sound evidence in the first place. In just one program, the PACE Trials, (in support of Simon Wessely's psychiatric theories of ME), cost the tax payer nearly £5 million while the results have been found to be both questionable and unreliable.

Because of the intentions to defraud patients of real remedies and solutions to their health problems, most of these patients experience day to day targeting by those that should be in the best position to understand, and support them, their illness and their conditions. Their medical histories and symptoms continue to be ignored, their relevant testing deliberately farcical and inconsistent in approach, and they will be denied the fundamental comfort of a correct diagnosis. They are constantly ridiculed, in public and in private, for their pain and illness and rarely treated for their symptoms and conditions.

In fact these patients are now seen as a necessary evil to doctors, social worker and health professionals, when they have to have them on their books. All have been led to believe these are a drain on their valuable resources. A deliberate attempt to brainwash the whole medical and health profession by the very hand that feeds them!

But make no mistake unless these doctors and other health practitioner's wake up to reality, they too will find themselves out of a job and on the books of the Job Centers as diagnosis becomes redundant with only two illness options available Stress or Depression. Then what happens, when they themselves get ill? Who will help them to improve their symptoms and conditions, not the redundant surgeon seen surplus to requirements, nor the GP or physician, now long gone, who previously gave genuinely an unbiased informed decision based on years of training?

To cap it all, no one, either patients or doctors, has any realistic chance of complaining about the appalling treatment meted out by this collusion. Even the doctors themselves can no longer rely on the GMC to conduct unbiased investigations into claims of malpractice.

We are now seeing the results of repeatedly burying our heads in the sand, accepting what seems like the inevitable, while the whole health system goes under. The closures of hospitals

beds and services, loss of hospital consultants, doctors, GP's, and health practitioners, as the impact of this spider-web of deceit spreads through the NHS, like a cancer. The momentum is gathering at an astounding rate each week! Those who can see a return to the Victorian work-houses, poor law institutions and asylums are not so easily ridiculed!

But my reflections are not without hope. The internet is a powerful tool. Networking has opened up the access to knowledge and awareness; the potential for ideas to be banded around, and for campaigns and petitions to be started. We are not in the dark ages with respect to educating ourselves and fighting back. Nor are we so ignorant about their connections, conflicts of interest, plots and intentions.

We have to be constantly aware of these frontal attacks on our basic Human Right to Freedom of Speech and Health Choice, and where we can, rebalance power shifting it away from psychiatrist and big businesses. We need to claw back the many Directives and UK and EU Legislation that has taken away our Freedom of Health Choices in Care, those safe alternative wholesome medications, vitamins and supplements, and those treatments that did work well for these patients. We need to get those doctors back, those doctors that really listened and cared about their patients and their jobs.

Whilst the task is daunting, it is not impossible. We can start by asking the right questions and by demanding accountability, transparency and independent measurement to an acceptable standard in every aspect of their work, just like any other business enterprise.

Ask who pays who in this collusion chain link and how much?

Ask what consultative Board positions, payments and incentives are received by the top psychiatrists from the Pharmaceutical Companies, and Industries such as the Insurance, Food and Drink, and Chemical? Ask at what point did those that resigned from conflicting interests in business to influence our Health agendas, relinquished their former shareholding and at what point, and why and when did they received those shares back again? Ask what precisely are all their connections to our health care directives and policies? Ask exactly how much of our money is spent in this theatre of deceit and their schemes used to defraud these patients out of their rightful health care, treatments and benefits.

Demand that they have to prove their value for money.

Demand that records of meeting and their contacts in these links must be published in the public domain. Demand that independent legal controls are introduced that truly measure their schemes, research programs, medications, treatments and outcomes. Demand all their work is independently audited by an outside higher regulating authority, not connected in any way to any of the current regime. Demand meaningful standards and consistency and proof that original concepts are met and not deviated from and other agendas replaced, and most importantly that both theories and outcomes are measured constantly by patients to prove affectivity.

We have little choice but to start this now before it really is too late to turn the tide away from such headlines as those in a recent *Daily Express*<sup>5</sup> Thousands being left to die because of poor NHS Care.

Kate Blake 20/10/2011

---

<sup>5</sup> The Daily Express, 13th October 2011: 'Thousands being left to die because of poor NHS Care'.