Physiology versus Pharmacology

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According to Feinman and Einstein I consider Science as a truth or a collection of (visual) images developing in space and time that are connected by symbols, generally words. About the same object, people show a cross-sectional variability in their mental reproductions and even the same person shows a longitudinal variability. These mental developments allow prediction of the next events, e.g. what we shall find around the corner. The variability is high in the correspondence of the predicted events versus the actual events. The coincidence degree represents the value of a given “truth” and the reliability of a person. Many physicians may assert a prognosis from the current state of an ill patient, from personal experience and science. I presume to know the development of diabetes: this development goes on for years with the help of physicians. The patient requires more and more insulin to allocate energy in increasing fatty stores. Insulin is given sometimes directly by injections or indirectly by drugs stimulating production. A project for a never ending body weight increase! Why am I blaming this strategy? [1-4] Why Medical Sciences show big cross-sectional differences in their mental reproductions and show a cross-sectional variability. These mental developments allow prediction of the next events, e.g. what we shall find around the corner. The variability is high in the correspondence of the predicted events versus the actual events. The coincidence degree represents the value of a given “truth” and the reliability of a person. Many physicians may assert a prognosis from the current state of an ill patient, from personal experience and science. I presume to know the development of diabetes: this development goes on for years with the help of physicians. The patient requires more and more insulin to allocate energy in increasing fatty stores. Insulin is given sometimes directly by injections or indirectly by drugs stimulating production. A project for a never ending body weight increase! Why am I blaming this strategy? [1-4] Why Medical Sciences show big cross-sectional differences in the pathogenesis and treatment that we do not see in the physicists’ rules? The physicists have areas of uncertainty that are far beyond the surface! I have an explanation that might even become a truth if many scientists would agree. Physicians have to share the products of research with patients they have to encourage patients to start a novel path with some risks The researcher remains usually far from the conflicts of interest, but the treatment has to be acceptable and understandable: joint pain must be treated by local changes in activity, posture, work load, rest, heat etc. and not by control of energy intake [5-11]. There are billions of people who pretend to impose their lack of awareness and fight against novelties and treatments they do not understand. Patients want unchanged customs and want to consume the staple food, even if there is no more need [12-17]. Drugs have to be found to overcome the second principle of Thermodynamics with unremitting failures. Exploitation of physiology adaptations are the healthiest solution [13,18]. In this direction, only physical activity is largely exploited but this sole intervention is insufficient to stop general fattening [12]. Although difficult, intake adaptations are most effective to achieve an even energy balance [6-12]. Drugs are mysterious, magic, constitute the simplest solution and are sustained by investigations on huge numbers of subjects. In contrast to Prigogine (research does not deceive) the wishful, unaware thinking of billions rejects the least appealing solution as false or insufficiently proved.

References