

# THE MODERNISATION OF HERBAL MEDICINE IN AUSTRALIA

**Interview with Vincent Di Stefano**

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## **How would you define Natural Medicine?**

It's a term that is used - a descriptive term - for a range of treatment methods that depend on mild intervention, non-drug based approaches that can also be identified with a particular philosophical stance.

## **...And that's what it means to you?**

Natural medicine – yeah, I suppose so, yeah. This is the essentials of it.

## **What does the word 'natural' on its own mean to you?**

Natural. Yeah, well that raises the question of 'what isn't natural'? Natural medicine . . . I suppose it carries an aura of benignity. If something's natural, it means it has been produced by non-human forces. It's essentially benign to life and life-forces. It participates in processes that are active in the world, independent of human intervention. So, I suppose the term natural points towards a wholeness, towards a *sanity*, towards an inherent self-regulation, to something beyond human manipulation.

## **Do you mean that it enters the realm of spirituality?**

It's a matter of categories, I suppose. Looking at naturalism, nature encompasses more than we can actually see. In the era of medicine, particularly medicine as it is understood in the present time, it tends to focus on the tangible, tends to focus on the body. You have raised the term 'spiritual'. Spirituality – the whole notion of spirituality - points beyond the notion of tangibility, beyond a physicality, it's another area. Don't ask me to define spirituality, it's a tricky one. It would be an interesting exercise. But I don't see spirituality as being inherently incorporated within naturalism and naturalistic methods – ok?

## **And how would you define herbal medicine?**

Herbal medicine is an ancient tradition – it's a cumulative ancient tradition that makes use of products of the plant kingdom for the purposes of healing human sickness and disease and discomfort.

### **Can you elaborate on that?**

What does herbal medicine mean? Herbal medicine – again, I suppose we've started off with looking into the meaning of what it is to be natural. Plants, by their nature have come through the elemental forces of the earth, of sunshine, of water, of rain, of the atmosphere, and have their own dynamic, they have their own pattern. There is a remarkable diversity within the plant kingdom developed over huge periods of time. We have learned to identify particular plants, and particular uses of plants as medicine.

### **Is that what herbal medicine means to you?**

Herbal medicine to me – I suppose it's a point of connection. Looking at it as a practitioner, I'm trying to view this now, Monique, from the perspective before I even contemplated coming into this profession, and it jibed that plants make sense, plants have been around for far, far longer than we have been around. They're capable of looking after themselves, they don't need to be tended by humanity, although we can obviously help their growth processes and various other things through fertilisation, and through selective breeding and things of that nature. But plants are an integral part of planetary consciousness and of planetary life. And we also participate in it.

So there is a commonality, there is a common force which drives all of life, whether it be animal life or plant life. And from a philosophical point of view, I suppose, I feel far more comfortable using materials that share the same roots if I can put it that way . . . the same life-giving influences that are part of our own natures . . . yeah?

### **How should herbal medicine be used?**

How should any medicine be used? How *should* it be used? How *is* it used? Yeah. A large part of this depends on a person's comfort zone. We all have different explanations for what sickness is, and what sickness represents, and we all have different expectations about how to deal with it. So plants – how should they be used? They should be used within a context . . . I feel if you're looking at an ideal situation, plants – an understanding of plants – should precede their use in medicine. An acceptance of the reality of plants as agents of healing ideally precedes making use of them. It's a little bit like the sort of situation we encounter these days when a person has a hangover, or a person has a headache or a migraine, then culturally we're conditioned to look for a Panadol or an aspirin. But for someone to turn around and say, "Well look, why don't you try Feverfew instead, I've heard that that works pretty well". So, "Oh, I'll try Feverfew". There is a contradiction of sorts within that approach, within that attitude, which is basically replacing one thing with another.

Plants – again, it's a total thing. You'll find that most people that are drawn to herbal medicine – or at least were drawn to herbal medicine before it became as popular and close to mainstream as it has become today - tended also to identify themselves with other, shall we say, non-mainstream affinities. People who tended to use herbal medicine then also perhaps had a more sensitised awareness of environmental realities, perhaps had understood the warnings given by Rachael Carson in the

nineteen sixties. People who had understood that forces were being unleashed on a planetary scale, especially after Hiroshima and Nagasaki, that were very, very noxious and dangerous and perhaps – although they could be argued as being natural, having come from the natural world – nonetheless were a direct consequence of dramatic human intervention.

So, how should plants be used? It's very difficult for one who's raised within western technological civilisation to give an answer to that. If you want to get an answer to that question, then ideally talk to someone who has lived in a steady cultural situation where plants have been part of their mainstream - part of their cultural system of healing - for generations, and then you'll get some understanding. Basically, we find ourselves in a limbo of sorts, where there is on the one hand a searching of the traditional knowledge which is passed through the universal, from the European tradition and various other traditions that I suppose contemporary Western herbalism has drawn from. And balancing that with the emergent understandings of power medicine, which have so strongly affected the way we live and the way we practice medicine over the past one hundred years or so.

### **Power medicine?**

Power medicine is biomedicine.

### **What would you say are the elements and principles that identify the practice of herbal medicine?**

It depends on who's practising it, Monique. (laughter)

### **Can we say 'Western herbal medicine'?**

Yeah, western herbal medicine, any sort of herbal medicine. Although 'Western herbal medicine' – this is an interesting one. What are the boundaries? Are there boundaries? It's a very difficult issue – getting back to what we said before – because of the fact that we're culturally disconnected. We are by and large dissociated from the historical process that has carried our knowledge of plant medicines historically, yeah? Going back to pre-Greek times, even going back to Egyptian times. The Egyptians understood plants. A lot of that knowledge was transferred to the Greek world. The Greek and Arabic understanding in turn infused the broader European tradition.

Up until about 100 years ago, plants were pretty well all there was, well not so much all there was. Things began to change in the fifteenth and sixteenth centuries where the work of the alchemists was perhaps misinterpreted, misunderstood, and minerals and metals began to be used in medicine. And then at the time of the development of early chemistry, proto-chemistry, and - particularly in relation to petrochemicals - once organic substances began to be isolated, synthesised, and experimented with and used, things changed radically again. But by and large, these are influences that were used by different elements within medicine – if you like, cutting edge or academic medicine, say, between 1500 and the middle 1800's. But up until that time, I suppose

if you look at those who were doing most of the effective healing around the place, plants were *it* - plants, and whatever else people were able to draw from the hygienist or lifestyle understandings that were part of early Greek medicine.

### **How does that compare to herbal medicine practice today?**

Herbal medicine today is practised in many different ways. I mean, it depends on who is practising it, it depends on their own philosophical orientation, it depends on the training system that they've been inducted into.

### **What if we say 'in Australia'?**

In Australia . . . well, within Australia there are a number of streams of herbal medicine. There are people who continue to practise, I suppose, in a way that carries strong resonances with the traditional way herbal medicine is practised in traditional cultures, and by that I mean things like Traditional Chinese Medicine, Ayurvedic medicine, Unani medicine. These systems are based on understandings other than the pharmacological understanding, they're based on the humoral system, on the notion of elemental qualities, so they're very qualitative systems. They look at qualities, things like heat, dryness, dampness.

### **I guess, specifically I wanted to talk about the Western herbal medicine meaning that Western herbal medicine has come from – England, America and European influence.**

OK. Well this is one of the streams. There are practitioners who continue to work in a humoral sense - admittedly they're in the minority. I suppose the majority of practitioners have been through - in relatively recent times - and by recent I mean perhaps over the past 30 years, there has been a progressive opening into the pharmacological, through the development of pharmacognostic studies, through the development of an awareness and understanding of the fact that plants are active because of particular singular substances, constituents within them. So, increasingly, that has become a major emphasis within herbal medicine education. Whereas if you came into this perhaps 30 years ago, teachers would be speaking in terms of the qualities of the plants; their demulcency - their ability to soothe inflamed tissues; their astringency - their ability to tighten tissues - these are very, very diffuse qualities; their expectorant qualities - the means whereby they can perhaps shift mucus from the pulmonary system.

What has happened in the meantime is that now many will speak in terms of the activity of the essential oils, which may have an antiseptic effect, an anti-inflammatory effect; they'll speak in terms of the endocrine-activating influence of plants contain steroids, triterpenoids, things like ginseng and liquorice; they may speak in terms of the complex anthracene-like derivatives of St John's Wort – hypericum, and their effect on the nervous system. So this interpretation has moved far more towards a pharmacologic framework, a pharmacologic interpretive

framework, rather than a framework which looks at the qualities of the plants and their general activities. So, I see that this has increased.

### **So you think it's increasingly pharmacologically based?**

*Nods*

### **Which form of HM practice do you identify with?**

Look, I suppose I occupy a schizoid space in that regard, in that I put a very high value on traditional knowledge. Also, having trained in Western scientific ways, I also have a great appreciation of the newly emergent knowledge that we've acquired over the past decades – in recent decades. I suppose in some ways - initially because of my scientific training - I came into it through a fascination with pharmacognosy. You know, when I learned of the nature of simple organic molecules, and ranging through to the very complex organic molecules that are part of plants, looking again at studies that were done in terms of their activity and how they impacted on our own natures, I was drawn very, very strongly into that. But the further I went into it, the more I realised that there were profound limitations. I could develop *an* understanding of sorts, but it was somehow flat, it was very two dimensional. And only after, I suppose, spending some years going deep into pharmacognostic studies, did I begin to retrace the tradition, as far as I was able to. And I find that particularly over the past ten years or so, I've been drawn more and more strongly to the traditional frameworks, the humoral frameworks. Because - and again - you can't really separate plants from the patients, from those who are going to use them.

Healing is a very complex phenomenon, and to reduce it to the activity of singular substances, it is a limitation. It's only seeing part of the picture. Within the discussion that goes on between the herbalist, the doctor, and the patient, there is a hell of a lot that moves, there is a hell of a lot that happens within that context, and our contemporary understandings of placebo I think touch upon that understanding vaguely. I'm not saying that plants act through a placebo effect, but perhaps - if one works within this sort of traditional setting, if one works with an understanding of plants - if one is *immersed* in it, Monique, if you go out there at dawn, and you find some plants, you go out there at the right time, just as their essential oils are at their richest, just as the heads are starting to bud, you *gather* them, and you carefully select out the best - you dry them - very, very carefully again, then you prepare a tincture, you've established a very strong identification with an historical mission, with a particular process, and I suspect - this is perhaps thinking in artistic, or seeing the practitioner or herbalist as an artist more than a physician - that process in itself will bring changes in the character of the practitioner, which will influence the dynamic of the healing relationship with the patients.

### **Is there much of that process left – in terms of it being practised?**

I don't think very much of it was there to begin with.

### **In Australia?**

In Australia, yeah – there were pockets of it, and there continue to be pockets of it. But when I began my studies, that was the essential context of it. I was brought into this firstly through working with plants, and then I looked for a course in herbal medicine.

### **Were you doing botany?**

No, when I say working with plants, I met a fellow who showed me how to prepare tinctures of a particular sort, and after doing that for a little while, I thought I'd chase this one further. What characterised early work, early educational work in this area - and by that I mean perhaps thirty or forty years ago, say, twenty to forty years ago - was that those who were teaching more often than not were precisely in that sort of situation. They would gather their herbs, they'd process their herbs, they'd establish a very powerful relationship with them. And part of that style of teaching was that that understanding would be transmitted to students in the group. So it was, if you like, a subtle encouragement to follow in that particular direction, so a number of students were in fact encouraged to go out and do it. But what's happened in recent years is that the process seems to have become far more cerebralised...well, yes cerebralised, or *cerebral*.

### **As opposed to?**

As opposed to experiential, yeah? We now know the terpenes, we can name the terpenes, we can draw the structural formulae of the terpenes within the essential oils of plants, but we may not know what they *smell* like - yeah? We can describe the physiological action of a plant or a class of plants, but we may not be able to recognise the plants themselves. So this is like a separation, this is what I mean by perhaps the experiential side of it being overtaken by the cerebral dimension of it, yeah?

### **So in relation to that, what do you believe is the status or role of herbal medicine in Australia today?**

OK. Look, the status is definitely changing. Twenty years ago, or thirty years ago it was definitely far out on the way out fringes of respectability - in fact it was witchcraft, it was considered to be worse than witchcraft. It was delusion and quackery. What happened has been described. In the nineteen seventies, towards the nineteen eighties, that attitude softened a little to one more of tolerance where, "Well, they don't do any *harm*". But what happened towards the end of the eighties and into the early nineties is that many groups around the world began to take their studies into formal clinical mode, and began to analyse plants and found that in fact they did contain some very interesting substances, tested them in various ways, and found that the plants were not wanting. And what that has resulted in is a very strong orientation towards a semi-pharmaceutical approach to plants.

The other side of it is - I mean, these things also need to be understood in a cultural sense, Monique - early herbal medicine tradition is totally embedded within a communitarian, shamanistic framework, whereby the practitioner was an integral part of the community.

That has changed radically right through medicine.

It's now become by and large a potentially very profitable activity on the part of manufacturers and marketers. So that in turn has altered the character of herbal medicine.

**So how is it now? If the character has altered, would you say it is a money focussed activity, primarily?**

It depends on where you are in the hierarchy. If you are a committed practitioner who has come into it through a love of plants, then more likely than not money is not a consideration at all - rather, there is a commitment to developing a lifelong understanding of plants as agents of healing, and using them within a clinical situation, to be of greatest benefit to the patient - yeah? But if you're a manufacturer, then that's not going to be your focus. Your focus is going to be on how do you move as many of these things as possible, in as profitable a form as is manageable.

And I've been fascinated to see how the form of administration has changed. The way plants are offered, the way plants are presented to patients has changed radically over the past . . . in recent years. There are still a few practitioners who will use fluid extracts, and extemporaneously prepare specific formulae for their patients, but you'll find that - especially within the marketing and some of the literature that I've received - what has amazed me is how the plant product comes to resemble more and more the pharmaceutical pills that are routinely prescribed - even to the point of having sugar-coated, coloured small tablets in bubble-packs - foil-backed bubble packs, and you pop one out here and there. And so, it's very much a marketing ploy that I believe is hooking in to a widespread social and cultural acceptance of *pills* as a form of medication.

**So that pharmaceutical side, do you think is that necessary for it to be accepted by consumers?**

Not at all. I don't think it's necessary at all. I think this is possibly a cynical exploitation of an existing commercial reality.

**Do you think money is one of the primary factors in the new role of herbal medicine today?**

Money determines a lot in medicine, and it has over the past couple of centuries. It possibly has prior to that, but particularly since the professionalisation of the healing arts. The monetary side-effects have had a very powerful effect - and that's not just in the sense of drug companies and pharmaceuticals, but in companies that produce and market medical technologies as well, diagnostic equipment and pathology services.

So money is a huge, huge influence behind the scenes. It may not necessarily be a major factor that drives young, idealistic souls towards the noble profession of medicine, and in fact some may manage to avoid being seduced by the monetary reality, the money side of things, and cleave to a mission, an historical mission within medicine . . . . but a lot cave in. I mean, look at the entrepreneurial doctors. Geoff Eggleston a while ago made a lot of money with football teams through medical practices. Drug companies historically - I mean, they're multinational companies! And where big money changes hands, and where great power can be exercised, then processes can be overtaken. And this is what - unless a person is very highly informed, or takes some steps towards developing an understanding of background forces and influences - then one can very easily be carried along in this tide of subtle commercialism that is washing through medicine.

**Do you think herbalists have been at all influential in the changing status of herbal medicine in Australia?**

Simply by being herbalists, by continuing to maintain their presence in the face of great hostility three or four decades ago - that in itself, the continuity has ensured that it wasn't nipped in the bud as many would have liked. There were some attempts in the 1980s at legislating particular practises out of existence. They didn't work, because there was some continuity in the practise of these natural forms, particularly herbal medicine. And the community - even though it may not have been broadcast very widely - I believe that many people in the community have quietly made use of these approaches without making a song and dance or great fuss about it. They've basically made use of them, and found that they've been effective, and continued. I suppose this may relate more to a folkloric style of medicine, of self-medication that is part of every cultural experience.

**What do you think are the reasons that people use herbal medicine?**

In a longer-term sense it's because herbal medicines work. In a shorter-term sense, it's because they're getting a lot of signals - or many people are getting new signals through the media - about the usefulness of plant medicines, through advertising and things of that nature.

**Primarily the advertising?**

Not primarily, but I'd say that this is probably contributing to an increasing utilisation of plants by people in the community.

**Do you think other practitioners are influencing their use? I mean biomedical and naturopathic.**

Because of the fact that drug companies are now marketing plants and plant extracts to doctors and doctors are beginning to . . . . I suppose doctors are *forced* to acknowledge that plants like Echinacea *do* affect the activity of the immune system; plants like ginkgo biloba *do* influence the cerebral circulation and can have a positive effect in tinnitus and early Alzheimer's; plants like hypericum *do* have a role in

dealing with retro-viruses and with emotional, depressive conditions; things like ginseng, Siberian ginseng, Eleutherococcus, *do* have a very powerful effect on moderating the effects of stress and enabling - or increasing - a person's ability to deal with stresses.

At a certain point you can try and ignore the signals, you can try and sweep them under the carpet, but the sheer pressure of this stuff that has emerged over the past 20 years has forced many doctors to acknowledge that it's not witchcraft, it's not all bullshit - that in fact there is some healing activity in plants. They're hopping on to - medical practitioners are beginning to yield, to concede that there is some potential benefit.

But again, this is not just an issue of therapeutic efficacy. There are issues of professional territoriality, of power - of *cultural* power - of particular occupational groups - that come into this.

So perhaps the more forward-thinking of the medics are realising that not only are these plants effective, but people in the community are beginning to twig, beginning to realise that they're effective. So, in order to move along with this whole process, far better to espouse it than to remain forever opposed. And in fact some of them are - whether it's through the cynical exploitation of popular change, or whether it's a genuine breaking-down of old cultural and professional prejudices within the medical profession - are moving more strongly towards it.

**You mentioned before herbal medicine and drugs. I'd like to ask what comparisons would you make between the two?**

Herbal medicines and drugs . . . well, herbal medicines are drugs! But it depends again, I suppose, on what our understanding of drug stuff is. And that understanding has been strongly conditioned by the use of synthetically derived drugs over the past century. What we've come to expect is that drugs are powerful and effective. If you have an infection you want to know that it's going to be hit on the head really quickly. This is something that the penicillins and other early microbials did very, very radically. A woman wants to know that if she's taking a tablet as a contraceptive, that it's going to work - and this is something that the steroidal oral contraceptives have done. If someone has rheumatoid arthritis or a savage inflammatory condition, they want to be sure that what they're taking is going to tone things down - and this is where the cortisone derivatives have been very, very effective. That has created a cultural expectation that whatever you take, it must be evident through its effects.

Plants don't necessarily work that way. And in fact, the whole process of healing doesn't necessarily work that way. What we've seen with drugs and the use of pharmaceuticals is again symptom control, and symptom management.

Plants by their nature operate multi-dimensionally. You're not likely - unless you use very powerful substances like the Greeks used - they made use of *Helleborus niger*, they were familiar with the effects of plants like hemlock - I mean, these are not chamomile, parsley and sage type plants. There are *profound* effects, even unto death,

through particularly the stronger alkaloid plants. So, the Greek doctors also - this is interesting, there's an interesting historical parallel - the plants used by the Greek doctors tended to be knock-out plants, the patients knew that they'd taken *something*. They would either have a very powerful emetic effect - they'd vomit shortly afterwards, they'd have a powerful purgative effect, or a very strong neurological effect, or effect on their psychic understandings - and this is where the psychoactive plants that have been used in traditional cultures have brought us to a direct understanding of that.

Whereas, if you go back a little further, you have a look at the repertoire of the Egyptian doctors, they had many, many hundreds of plants, and they weren't all power plants. There were very, very subtle plants in there as well.

All of the power plants within the Western tradition have tended to be taken over by the medical profession, because if it's strong and if it has an effect, therefore it is potentially dangerous, and many of the plants like nux vomica, for example, you can't get it, that's been taken, medics no longer use it. But if you go to any history of medicine museum or any college pharmacy museum, and have a look at some of the old books that were kept by the chemists - particularly around the turn of the century, you'll find that plants like nux vomica, ipecacuanha - these are all *very* powerful plants - alkaloid plants were regularly prescribed because they were very powerful, very, very effective. And this is the style of medical management that is becoming more acceptable.

**Is there a psychological sense that if you're taking something strong – for example, something that's going to make you vomit – that it's actually working?**

Yeah, look that's definitely influencing the process. But I would suggest that perhaps that slant was coming more from the profession itself, because what that did then was justify the creation of an autonomous profession that had its own rules of association, that had its own fee scales - things of that nature - that enabled it to charge professional fees and to create virtually a new social caste for itself. That probably - that reality, the fact that these powerful substances were in the hands of a caste of healers, probably determined that side of things.

So what happened is that the milder acting plants were quietly used in a folkloric sense, in a village medicine sense, a community medicine sense. There were individuals who managed to carry the torch through generations, over the major part of the last century. But something happened in the 1960s and 1970s, whereby there was a reawakening of - or perhaps there was a reaction to - the excesses of technologising virtually everything. And perhaps there was in consequence a reconsideration of cultural elements that had been, if not discarded, at least put aside - had been overshadowed by these more powerful forms, which rendered essentially, control - greater degrees of control.

Getting back to this notion between drugs and herbs. The similarity is there, that's what we've talked about, with the strong herb drugs and the pharmaceutical drugs. These are where the similarities are. Where the essential differences are, are in the

areas of subtlety. Not only in terms of the effects of the plants, but also the interpretation of how they influence our own natures. And this gets a lot closer again to issues that relate to healing, and the nature of healing itself.

You'll find many practitioners speak in terms of balancing activities with the body, of balancing anabolic and catabolic activities. Restoring the body's equilibrating mechanisms - again, balance comes into it - homeostasis is keeping that balance. So these plants will be seen, particularly from a humoral perspective, as being more active in that domain than in the domain of introducing a singularly active substance into the body, which then has a 'wham, bam' effect that is visible to anyone, that can be measured. If someone has high blood pressure, they'll take beta blockers or a calcium channel antagonist and the blood pressure will be lowered. If someone has a tendency for their blood to clot, a few doses of warfarin will bring about a total change in platelet aggregation and things of that nature. So these are very, very powerful markers.

But how do you measure the effects of something like chamomile, how do you measure the effects of something like lemon balm? How do you measure the effects of something like peppermint? You know. Nonetheless these all carry some influence.

### **You can't measure them scientifically?**

You can measure their constituents. You can analyse them and determine what's in them. But I'd challenge any scientist to fully plumb that one. Look, the further you go into plants - they are a *universe* in themselves - you'll find that there are hundreds, literally hundreds of different compounds in plants. And the essential problem as well is, you can pick a plant in New South Wales, and you can pick the same plant, the same species in Victoria, and if you subject them to analysis, they'll contain different ratios of these materials. If it's a wet season or a dry season - a little bit like wine, I suppose - and in different years how these climatic and agricultural realities, things like the nature of the soil, the dryness, the dampness - will effect the quality of the grape which in turn will effect the quality of the wine. This is the difference. It's not just one substance being administered, it's an *entire constellation* that interacts with the constellation of influences that keeps our own human natures going. That's the *delight*, that is the *fascination*, that is the *mystery* that I think drives a lot of practitioners deeper into a great love of herbal medicine. And this is very, very different to the direction it's taking in present time, through processes like standardisation, through processes like marketing and packaging.

It seems like there's a background insistence on validation according to *particular* - a *particular* understanding of *particular* research methodologies . . . validating the effectiveness of plants. If you're dealing with plants which work very, very subtly, *how do you do that?* Your question was 'are these active, you know, can you measure the changes?' Well, I'd suggest that with some of these it may not be possible to get objective measures, but you can talk to people and say "Well, do you feel any different?" And you may find, you may be very surprised at the fact that they do. But then, this opens a door then to other interpretations, you know, this could be the

placebo effect. Well even if it *is* the placebo effect, that's fine! I suppose for me the issue is what is healing, what is the nature of healing?

One thing I've learned over the decades, is that healing is not something that is mediated by the administration of 'precise doses' of a chemical substance. Healing is a process that involves, well, obviously physiological, biochemical change, but it also involves mental change. It involves relational change. It involves many, many aspects of our human nature and character. Part of the problem, I suppose, relates back with this seeming need to reduce things to their simplest possible form. And this is reflected in scientific methodology whereby you reduce the variables. But life is full of variables. And once you reduce the variables, then in many ways you are stepping outside of living process.

**How do you think people are using herbal medicine today? Are they being prescribed through practitioners, are they self-medicating?**

All of that. Herbs are being prescribed by herbalists, herbs are being prescribed by naturopaths, by doctors, people are self-medicating. Just about everyone knows about Echinacea these days, particularly mothers with children who – by the time their kids have had three or four courses of antibiotics and they're still snuffly, they're starting to look further afield regardless of whether their doctor tells them, "Well you just take another course". They'll talk to other mothers, you know, because they're sick of their children being sick. And if one particular approach hasn't worked, then they'll try another! That's human nature. Again, the ferocious maternal instinct to protect the young, in some ways.

**On the marketing side, what does that say about knowledge? If the main source of hearing about the products is through the doctors, or through advertising and marketing?**

Well this is more like general therapeutic substances – I think vitamins particularly holds there. There is a latent . . . . I suppose you can sort of call it partly collective unconscious, collective *cultural* unconscious, whereby herbal medicine is one of the most ancient medical forms, and this is something . . . . again, it gets back to where we started, it's part of the *natural* world. And, in a highly artificial world, a highly contrived world, many people are reacting at an instinctive level with an aversion to what they perceive as being the very damaging consequences of excessive human control.

So, the word 'natural' in itself suddenly becomes very attractive. And if you have 'natural' biodegradable toilet paper, then some people are going to make use of that over regular Sorbent. And if you have 'natural' shampoo, that may make it over some of the other brands. But what we're seeing again is this cynical exploitation again. The marketers are reading the signs and saying "OK, if we move things along this line, then we've got a better chance of perhaps reaping a few dollars".

So, I don't feel it's entirely being driven by - I don't even think it's even largely driven by commercial sources. It's being more driven by experiential realities. It's

being driven by the fact that what had thirty years ago been a group of outlaws, their understanding has been increasingly vindicated and supported. A profession, the medical profession which was utterly hostile – you just look at the literature, this isn't hearsay, you just go back and look at the literature of thirty and forty years ago to get some sense of the vehemence and the hostility of the medical profession towards these areas - that has noticeably, tangibly changed. There are now several courses, for doctors, on herbal medicine. But if you have a look at who's running them, it ain't the educators, it's the manufacturers, by and large.

### **You're talking about the conferences, and workshop, and seminars?**

Yeah, directed mainly towards the medical profession. And not only that, now it's become big news - when I say now I mean over the past fifteen years or so - a lot of the educational activity, particularly graduate educational activity, has been taken over or taken charge, by manufacturers. You know, people like MediHerb. Blackmores are a bit off the scene these days, but Phytomedicine have now stepped in. But then again, the familiar faces of MediHerb have moved into another company. It's the same game, essentially.

And even though these are the theatres for the dissemination of knowledge, of newly emerging knowledge - these are the theatres whereby clinical vignettes can be discussed, treatment strategies can be discussed - nonetheless they exist for one purpose, and that is *to sell a particular product*.

### **What does that mean for herbal medicine?**

This is a reflection of the dominant cultural mode. This is a reflection of the fact that perhaps this is the cost of increasing social and cultural acceptability, perhaps this is the cost of becoming more mainstream. Perhaps this is the cost of receding from the margins.

### **What do you perceive is herbal medicine's role in Australian health care?**

Potentially huge. Absolutely huge. But I supposed I'm biased, Monique – I love plants. I *know* they work. But they're not used to their fullest extent. They're not used in the broadest possible cultural manner. We still drink Liptons and Nescafe. Very few people have yet to set aside a section of their garden and put in some Melissa plants, or some Spearmint plants. Or some Verbena – you know? Go out and gather some Hawthorn berries, or some Hawthorn blossom when it's happening.

### **How will people know what to do with them?**

How will people know what to do with them . . . yeah, I suppose that's the issue, isn't it? And again, history reflects the cultural shift, the cultural change. Something is a medicine only if it comes in a blister pack and is tableted, sugar coated and appropriately coloured and marketed and priced.

## **So if you can do that with herbal medicine – what is its role in Australian healthcare?**

It obviously has a role, but then again this is all assuming that the people who will be making use of this form are wealthy, they have plenty of spare cash, and are able to . . . it's a culture of convenience as well, it's a lot easier to take a couple of tablets than it is to gather the herb, dry the herb, cut it up, let it infuse for ten minutes, pour it, add a little bit of honey, get used to the taste, and then enjoy it that way.

### **It's a ritual?**

It is a ritual, it is a ritual. But then again, so is going to the glass bottle, flipping the lid, tipping out two tablets, placing them between the teeth and then swallowing with a glass of water. They are each of them rituals, yet they have different cultural implications. And again, this gets back to that word 'natural' that you brought up at the start. You can understand one form as a participation. You go out there, you look at your plant, if you want you can even *talk* to it! You give thanks to the creator, you can commune with this plant, come back in, and while you're cutting it up, in a sensory sense you will *smell* the fragrance, you will *feel* the texture. And then you will *taste* its qualities as well. So it is part of a process.

### **As opposed to the glass bottle?**

Well, you start off with the eftpos machine, you buy it, you break the seal, this is another ritual - and this ritual again reflects the dominant cultural values. So what we're looking at here I think is an essentially cultural issue. One that either tries to restore the steadiness, the cultural and historical steadiness, ways that have been part of every generation throughout historical epochs, or saying that, "Well, we're in the twenty-first century now, and this is the way it goes". What is it... "Be there or be square!"

Why deal with these dirty plants, they might have microbes on the leaves, a slug might have crawled over them, you might get a bug! When you can get something which is totally proven to be safe with quality control mechanisms, precise dosages - and its very easy to take. I suppose that's a part of it - this is only just dawning on me now.

I'm also intrigued with the difference, and what it is. But look, I see this in my kids. Kids come into a world where there are existing expectations. They come into a world where . . . . they still can't understand why Gill and I still haven't acquired a mobile phone, we don't have mobile phone. They can't understand that. They can't understand why dad gets so upset when they use the microwave to heat up their stuff. And they say, "Well why bother lighting the stove, it'll take two or three minutes to heat up, when we can do it in ten or fifteen seconds".

So, these things of course take time. And what this suggests to me is a process of deepening understanding, of deepening involvement in those processes that most of us take for granted in life.

## **What do you think the future holds for herbal medicine in Australia?**

For herbal medicine? For herbs as medicines, I think its going to increase. The usage is going to increase. In terms of herbal medicine - there is no 'herbal medicine', there are 'herbal medicines', there are different forms of herbal medicine that are practised by different practitioners. And probably each of them will proliferate. Each of them will be retained - hopefully - so long as the drug companies or the marketers don't exert the sort of influence which results in a restriction of availability to only those materials that have been standardised and appropriately processed. I think that would be an utter disaster, because it's built on the assumption that our present civilisation is indestructible and that the style of living that we have now will continue on forever more.

It's a little bit like when my father has a really good crop in his backyard garden, so he decides to let a couple of those plants go to seed. And he has only just realised after five years that nothing ever comes of them. And I asked him recently, "Well, where did the original plant come from, Dad?" He said, "I bought the seeds in a packet". So it's a very similar thing.

There are a couple of people here in Victoria who have set up a program at NMIT, Northern Melbourne Institute of Technology, for furthering herbal education. And what they did was create a program whereby people with land – not just a small backyard, but people with at least one or two acres, who had an interest in herbal medicine - were invited to come in, and they were instructed in organic growing techniques.

Technology was used here, they were each of them given something like one and a half thousand seedlings or seeds every year, that they could put into their various plots and bring through to completion. Many hundreds of people did this course. One of the consequences of that is that right up the east coast there is now a huge repository of medicinally active plants that have been put into the earth. Most of the people that had done this course found they weren't supported by the local manufacturers, so they basically produced many kilograms of high quality herbs - but no one bought them. So, a lot of them have gone out of business. They started off with high ideals. Those ideals were never enabled to actualise, because possibly a lack of coordinated planning - this is in the past 10 years - but also by a deliberate and conscious rejection of these plants by the major manufacturers, manufacturers of tinctures and extracts, and the reason for that is that they can get cheaper stuff overseas.