Adventist Futury IV

Lessons of the Past and Future #4

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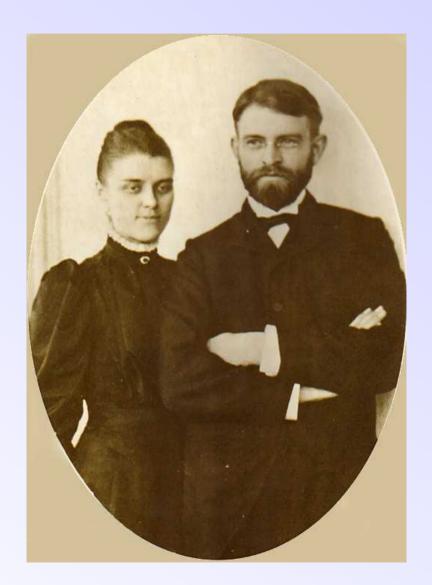
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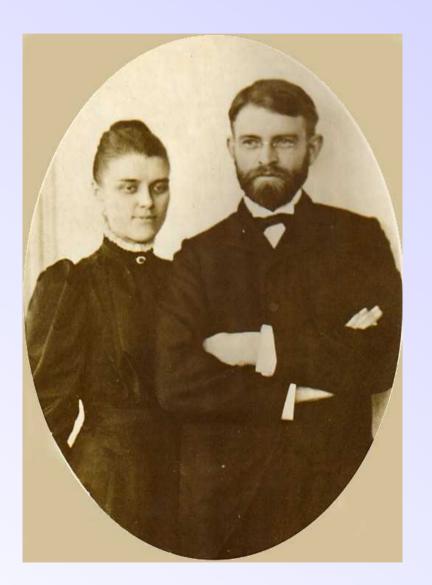
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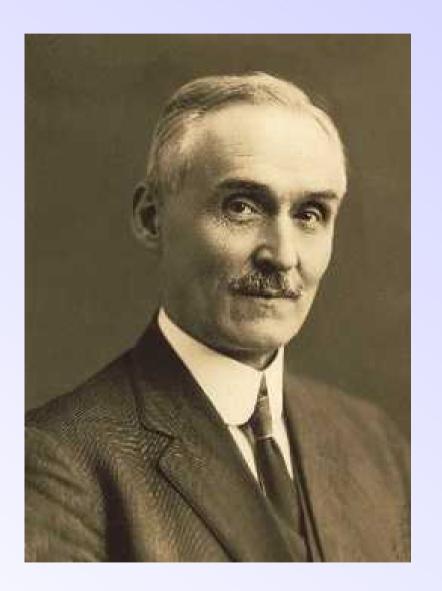
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After History Comparison of the Two Clinics:

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Each year, between 350 million and 500 million people are infected with malaria, and 1 million die from the disease. Malaria accounts for one death every 30 seconds in Africa alone. —UNICEF

Artemisia annua



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"As religious aggression subverts the liberties of our nation, those who would stand for freedom of conscience will be placed in unfavorable positions. For their own sake, they should, while they have opportunity, become intelligent in regard to disease, its causes, prevention, and cure. And those who do this will find a field of labor anywhere. There will be suffering ones, plenty of them, who will need help, not only among those of our own faith, but largely among those who know not the truth."

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Medical What?

◆ Simple treatments

"God's remedies are the simple agencies of nature that will not tax or debilitate the system through their powerful properties. Pure air and water, cleanliness, a proper diet, purity of life, and a firm trust in God are remedies for the want of which thousands are dying; yet these remedies are going out of date because their skillful use requires work that the people do not appreciate."

—Testimonies, vol. 5, 443

Why?

"In the last scenes of this earth's history, war will rage. There will be pestilence, plague, and famine. The waters of the deep will overflow their boundaries. Property and life will be destroyed by fire and flood."

-Maranatha, 174

Ever hear of...

- Methicillin-resistant Staphylococcus aureus (MRSA)
- Extremely Drug-resistant Tuberculosis (XDRTB)
- ◆ Avian Flu (H5N1)
- ◆ Adenovirus Serotype 14 (Ad14)
- ◆ Carbapenem Resistant Enterobacteriaceae (CRE)

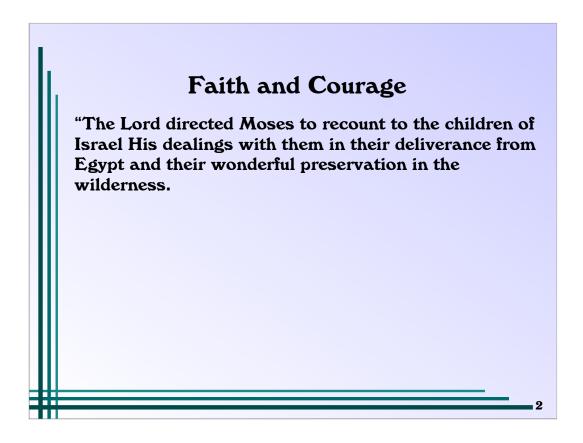
Now is Our Chance...

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...a whole new word. The idea is to focus on lessons from the past that are good for the future.



This is a great balanced statement on Sacred History.

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Bad news about us, but good news about God.

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Faith and courage. This doesn't come from just the bad news or just the good news. Some people only want to talk about one or the other—not good.

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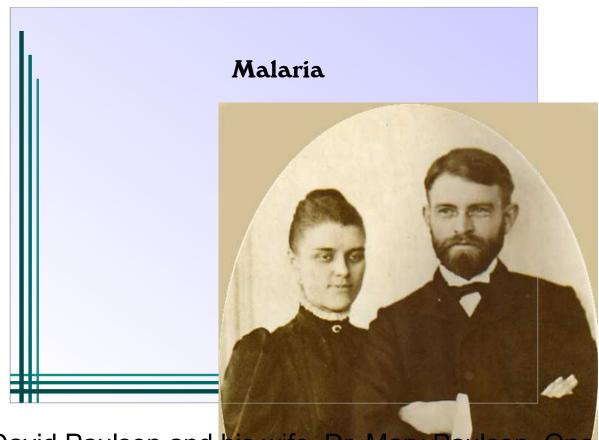
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"Ever repeating"--that's why there is value in history.

SKIP PAGES 2–9 IF ALREADY COVERED IN PREVIOUS PRESENTATION.



Dr. David Paulson and his wife, Dr. Mary Paulson. One of the doctors who had sided with Dr. Kellogg, but had accepted the correction of the "Iceberg Vision."

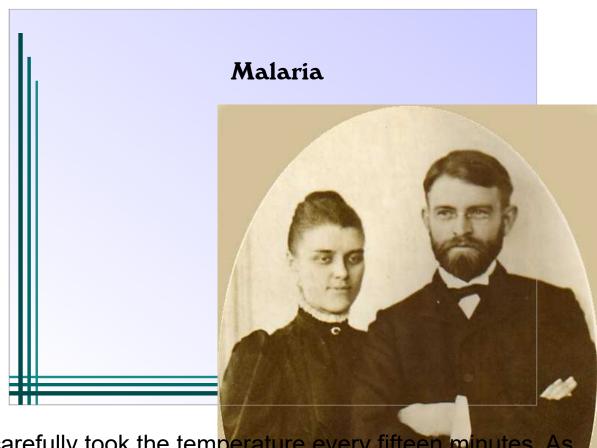
At the General Conference session of 1907, David Paulson told of his experience (along with Dr. Daniel Kress) dealing with malaria while in the University of Michigan.

Quinine was the favored treatment of the other class members. Deadly stuff. Try to get just enough to kill the "bugs" without killing the patient.

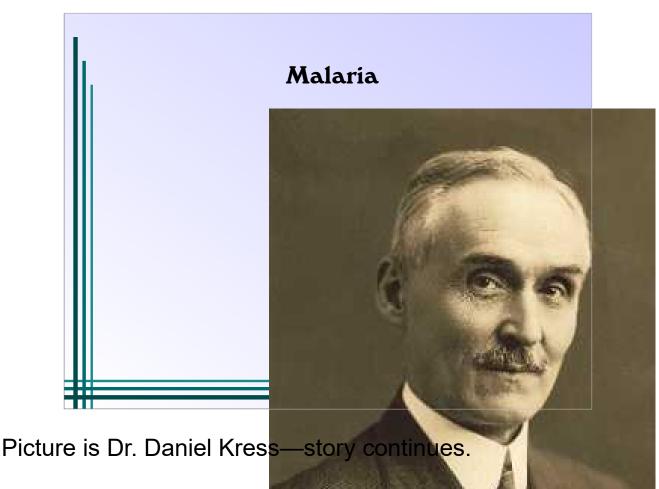
Paulson and Kress chose to use hydrotherapy.

As a test, it was arranged that half the malaria patients would be treated with quinine and half with hydrotherapy.

CLICK—picture remains the same; quotation from Paulson on next page



We carefully took the temperature every fifteen minutes. As soon as there began to be the least rise of temperature that was a notification to us that the chill was approaching. We at once put the patient into a hot blanket pack, bringing on profound perspiration, and thereby—if we had hit it right —we invariably prevented the chill. The patient perspired for a time; we took him out carefully, and, provided it was the alternate-day variety, we gave tonic treatments (hot and cold). The following day we again instituted the temperature-taking program. We invariably found that the rise of temperature was much delayed, showing that we were gaining the ascendancy. We would then go through the same program. Frequently we did not have to do this the third time; the work had been done, and in a week or ten days the patient was fully restored to health. Sometimes we would miss hitting it just right for several days, so there would be a delay.



One day an old, feeble, broken-down man came in so loaded with malaria that it seemed he was on the brink of the grave. According to the rotation he belonged to the quinine list. The doctor, after sizing up the situation, said he did not dare to undertake his case, and he was turned over to our list. I will never forget when Dr. Kress and I earnestly told the Lord that His principles were on test, and pleaded with Him to vindicate what He had said. We then took hold of the case. Within a week the man was restored to health. Praise the Lord.

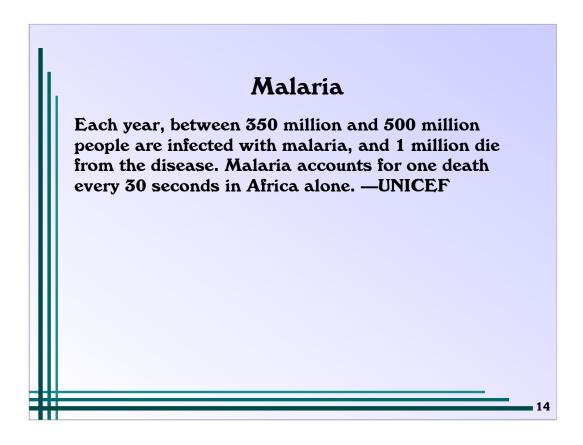
Malaria

After History Comparison of the Two Clinics:

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NOTE ABOUT AFRICA COMES ON CLICK



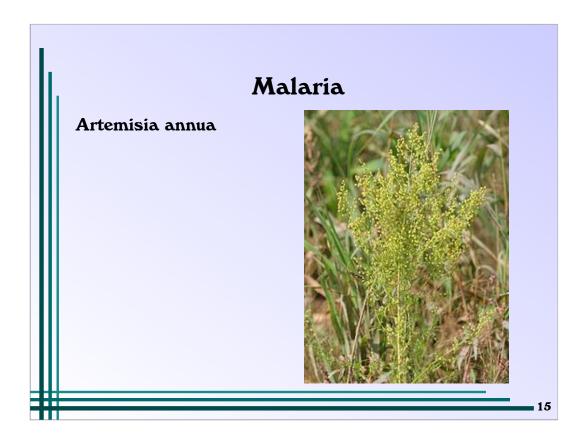
Problem hasn't gone away

Most African countries have used chloroquine as their first-line drug since 1970. But resistance is up to 90 percent in some areas.

Sulfadoxine-pyrimethamine is the new option. But pockets of resistance have been found from South Africa to Burundi, sometimes running as high as 60 percent of the cases.

Current best bet is insecticide-treated bed nets.

Wouldn't it be nice to find a treatment for malaria?



Artimisia annua, also called Sweet Wormwood

Source of artimisin—the most powerful anti-malarial drug known.

WHO opposes use of the herb. Say they want to avoid developing resistance. But the only place resistance has ever shown up is in the Thai-Cambodian border region, where they have been using straight artimisin.

Cinchona bark is still effective after hundreds of years even though chloroquine (a derivative) is not.

But what has that got to do with the future of Adventism?

Medical Ministry

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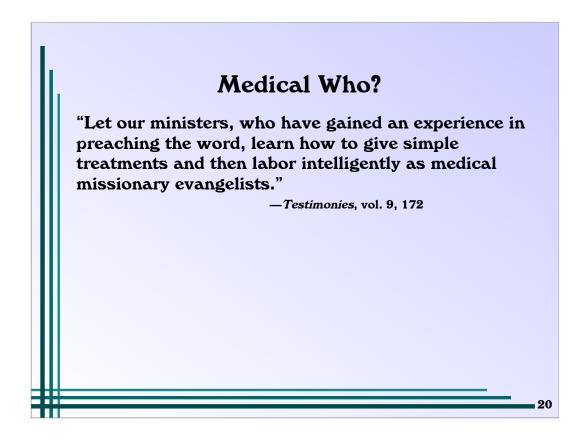
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Medical Ministry "I wish to tell you that soon there will be no work done in ministerial lines but medical missionary work." —Evangelism, 523

Really? None?



But let's be honest—we're not all doctors. And this medical missionary work isn't for everyone.

So let's look at the "Who?" of this whole picture.

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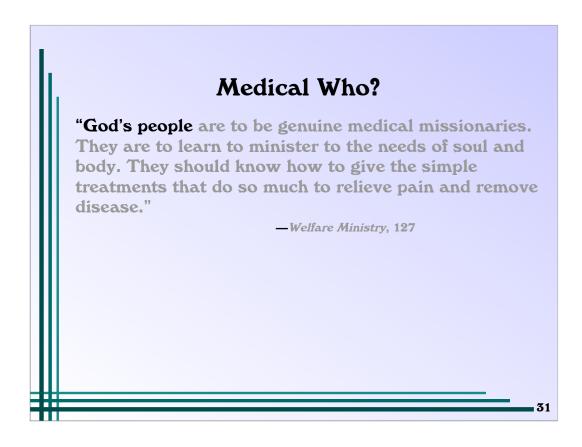
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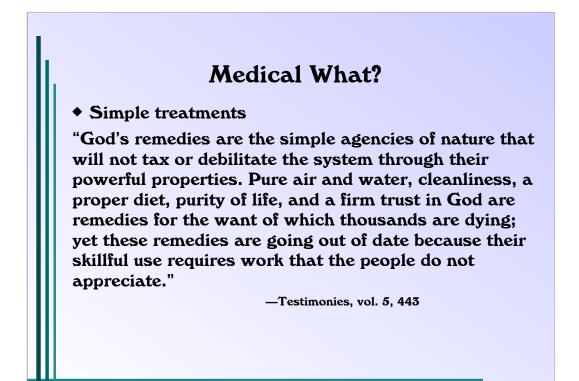
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Medical missionary work isn't for everyone—unless they are one of God's people.



Focusing on "Who"—how about the "What"?

CLICK FOR FIRST ENTRY

General disclaimer—Acute care good, lifestyle and chronic conditions... uh, less good.

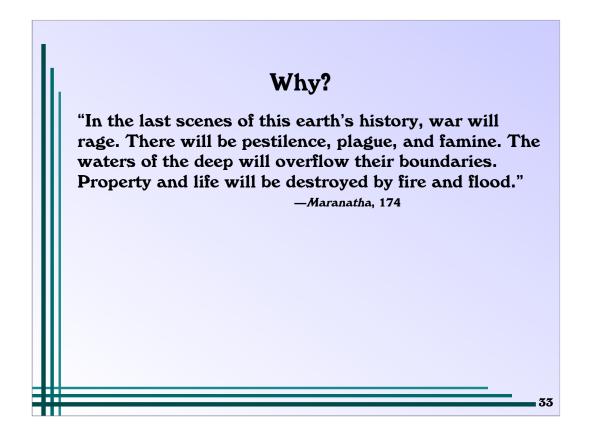
CLICK FOR SECOND ENTRY

"Simple treatments" 41 times

"Simple remedies" 78 times

Perspective here— "Jesus" 37,308 times "God" 133,323 times

"Requires work"



Why this emphasis on "simple treatments"?

My guess—existing medical services will be overwhelmed, and all we will have at our disposal will be the simple treatments... and prayer.

Could that really happen?

Ever hear of... • Methicillin-resistant Staphylococcus aureus (MRSA) • Extremely Drug-resistant Tuberculosis (XDRTB) • Avian Flu (H5N1) • Adenovirus Serotype 14 (Ad14) • Carbapenem Resistant Enterobacteriaceae (CRE)

Drug-resistant staph deaths may surpass AIDS toll—JAMA, 10/16/2007

AD14, 10 fatalities so far, young adults with no other symptoms

CRE--The MCR-1 gene, first described by Chinese investigators in November 2015, disables the last-line antibiotic colistin, an older drug that isn't often used in humans but is commonly used for raising food animals. Nephrotoxicity

Probably others—but I'm not some sort of alarmist

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Seems like a pretty simple lesson, doesn't it?