

My First Half-Century in the Iron Game

There have been medical doctors in my family for at least six generations: during the late 1700s, about the time of the American Revolution, my Great-Great-Grandfather was a doctor; he was followed by my Great Grandfather, Grandfather, Father (and Mother), both my brother and sister, several cousins and uncles, and currently my daughter, all of whom were, or are, doctors. In my more or less immediate family, starting with my father and mother, there were fourteen doctors.

Given this family history, it rather naturally follows that I have come into close contact with a lot of doctors. Secondly, I have been directly involved in medical research for the last twenty-four years, and this brought me into contact with thousands of other doctors outside of my family. Thirdly, for about thirty years before I became involved in my current research projects I was directly involved in the treatment of poisonous snake bites, and this brought me into contact with many doctors.

So, one way or another, I have had enough experience with doctors to give me at least a few firm opinions about doctors in general; overall, my opinion of doctors is favorable, but I am also aware of many common shortcomings in the field of medicine today. Hillary Clinton has probably never been right about anything else in her life, but she was right when she said that the costs of healthcare in this country are now out of control. But being aware of a problem does not always provide a solution to the problem, although it obviously is a required first step in that direction. We are certainly aware of “what” (that serious problems exist in healthcare), but there is as yet nothing approaching agreement in regard to “why” (just who to blame for these problems).

Hillary, if given a free hand in the way of taking “control” of the healthcare industry in this country, would have attempted to put out a major fire by throwing gasoline on it. Even a casual glance at the results produced by the government during the last sixty-odd years should make it immediately apparent that the government, far from being the “solution,” is usually the “problem.” A very large part of the current problems in healthcare are direct results of earlier government actions; rather than making things better, any attempt at government regulation has simply made things worse.

Encouraged and supported by the government, the lawyers and insurance companies in this country have been largely responsible for the ridiculous increases in healthcare costs that have occurred during the last thirty years; today, most doctors have to spend at least half of their time dealing with a flood of paperwork that generally serves no worthwhile purpose. Then too, they must practice “defensive medicine” (ordering all sorts of unnecessary and expensive tests simply to cover their ass in the very likely event of a malpractice lawsuit), and this also serves no purpose except driving up healthcare costs. Many doctors in Florida today must pay \$250,000.00 a year for malpractice insurance that does not even provide “full” coverage; and, of course, there are hundreds-of-thousands of greedy lawyers out there constantly searching for any sort of lame excuse to sue a doctor.

More than half of the doctors in Florida who used to deliver babies have simply stopped doing so, because they are no longer willing to take the risk; today, if you deliver a baby, and if anything at all goes wrong with that child anytime in the next twenty-odd years, it is automatically your fault, and some lawyer will ruin you financially in his attempts to steal from you, count on it. Today, nothing is ever your fault, somebody else is always responsible for all of your problems and must be made to pay for their crimes against you.

And, yes, it is certainly true that doctors are sometimes guilty of malpractice, but all of the available evidence supports the conclusion that at least 95 percent of all lawsuits alleging medical malpractice are nothing short of outright extortion and theft on the part of lawyers. People do not call lawyers “ambulance chasers” for no reason.

Until very recently, and with very good reason, lawyers were not permitted to advertise or solicit clients; but take a careful look at their advertising today and it will not require a genius level IQ to figure out their motives. The most common sort of lawsuit today, the so-called “contingency lawsuit,” where the lawyer takes a large part of anything that

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the poor victim is forced to pay, “plus the lawyer’s expenses,” is illegal in every other major country in the world. In England, a lawyer would be disbarred for life and go to prison if he entered into such a suit.

And the real “catch” to these suits is the clause that says “plus expenses.” Which works as follows: if, for example, such a suit steals a total of \$1,000,000.00 from the victim (the party being sued), the lawyer takes at least 33 1/3 percent “off the top” of the payment, then takes most of whatever is left as his “expenses,” paying himself at the rate of several hundred dollars an hour for whatever number of hours he believes he can get away with. One recent suit in Miami that paid \$1,000,000.00 in purported damages was divided as follows: \$18,000.00 to the supposedly-injured party and \$982,000.00 to his lawyer.

When that story got into the local papers, some people seemed to feel that the injured party got screwed by his lawyer, which he obviously did, so a committee of other lawyers then investigated the case to see if the injured party was treated fairly by his lawyer; their suggestion was that the lawyer pay the injured party another \$15,000.00, but they had no power to force him to do so, and I doubt if he did.

My age being what it now is, I have devoted a lot of time during the last two years to an attempt to arrange my affairs in such a manner that my estate (whatever is left when I die) will not fall into the clutches of any lawyers, judges or accountants; because, if it does, they will steal it all, count on it. And while you might believe that such matters are relatively simple and straightforward, that the law concerning estates is clear, you will be in for a big surprise if you investigate the matter in depth. There are two things that you must avoid if you hope to leave much, if anything, to your heirs: the IRS and so-called “probate.”

Having taken a large part of your “gross” income, and almost all of your “net” income throughout your life, the IRS will take whatever is left when you die if they can manage to get their hands on it, and they will certainly try to do so. Or, if your estate is forced into “probate,” that means that everything you have is handed over to some lawyer or judge who will then take ten years or longer to settle an estate that could have been settled in ten minutes, while paying himself out of your money as long as it lasts. All of which outrages, of course, are not only permitted but are encouraged by the government.

But there is a way to avoid both the IRS and probate: simply give everything away before you die, so that there is nothing left for the lawyers and IRS to fight over. But, of course, even doing that is not as simple as it might appear; you must first learn exactly what the laws are and then arrange things in a certain manner in order to avoid the thieves. Doing so is not easy, but it can be done.

But, you might ask, why should I really care what happens after I am dead? Well, I care for two distinct reasons: one, quite a long list of people have helped me in one way or another during my life, and to the degree that doing so is possible I would like to reward them for their help; two, I am arrogant enough to believe that my lifetime of interest in the field of exercise has produced developments that can provide great benefits to millions of other people if my discoveries and developments are not flushed down the toilet of history, so I want my company, MedX Corporation, to continue after I am gone.

I am convinced that “prevention” of medical problems is far more important than “treatment” of such problems in most cases; in effect, if it isn’t broke you don’t have to fix it; and I believe that the potential benefits of proper exercise are far greater than most people in the medical and scientific communities even suspect, are primarily important for preventing medical problems. Within my lifetime a revolution in dental healthcare has occurred, and it has primarily been a result of prevention rather than treatment; I believe that a similar outcome will be, or could be, and should be, produced in the field of general healthcare, and that, if so, it will primarily be a result of a widespread application of proper exercise.

However, for that to happen, two problems must first be addressed: one, the medical and scientific communities must be educated in regard to the actual potential benefits of proper exercise; two, just what constitutes “proper” exercise must be clearly defined, since there is certainly no consensus in that regard at the moment.

One of the most expensive medical problems today is lower-back pain; total annual costs probably exceed 100-Billion dollars in this country alone. About three years ago, a coal-mining company in Montana was being plagued by lower-back problems to the extent that they were on the point of being forced out of business by the costs. In an attempt to

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solve this problem, they came to us (MedX Corporation), purchased a MedX Lumbar-extension machine and sent two of their employees to the medical school in Gainesville so that they could be trained to use the machine properly. Having installed the machine in their headquarters, they then started exercising several hundred of their employees in an attempt to increase their lower-back strength in order to help prevent lower-back injuries. Their workers were exercised on the machine only once each week, one set of the exercise continued to failure. And the results were nothing short of dramatic: their costs related to lower-back problems immediately dropped from several-hundred-thousand dollars to less than three-hundred dollars. This case, and many similar cases, can be taken as clear proof that exercise works when applied properly for the prevention of injuries.

As I have said repeatedly in earlier chapters, a large part of the current controversy in the field of exercise is a direct result of the fact that it was, until very recently, impossible to meaningfully measure the actual results of exercise; and, of course, it is impossible to evaluate anything that you cannot accurately measure. About 95 percent of the supposedly scientific research that has been conducted in the field of exercise was devoted to attempts to evaluate the benefits of various forms of cardiovascular exercises, so-called “aerobic” exercises, and at least some good has resulted from such research; and while that is well and good, it does not follow that exercise is limited to improvements in cardiovascular ability. Personally, I believe that far too much attention has been devoted to aerobic exercise while exercise for producing other benefits has been generally ignored. I also believe that body building has done more in the way of turning people away from exercise than it has in the way of attracting them. Yes, body building is far more popular now than it was even thirty years ago; but, no, it is still far from being truly “popular.” Which is a damned shame, because the medical and scientific communities could learn a lot of valuable lessons from the field of body building if they ever bothered to give it a close look.

Because of my close contact with literally thousands of doctors over a period of many years, I am, I believe, in a better than average position to judge the “general” opinions of doctors on the subject of exercise; while there certainly are at least a few exceptions, it remains my clear impression that most doctors know literally nothing about exercise, and that in many cases they hold firm opinions that are nothing short of dangerous.

And this opinion applies even to most of the doctors who are specializing in rehabilitative medicine, the doctors who most need a clear knowledge of exercise since exercise is literally the only treatment protocol of any slightest value in their field. And, of course, the same thing is true of physical therapists. The few exceptions to this general rule, and they are damned few, are people who have been self taught by their own personal experience; they damned sure learned nothing of value about exercise in school. By and large, if they are “taught” anything about exercise in school, such supposed “teaching” consisted almost entirely of filling their heads with a lot of bullshit based upon utterly phony research performed with such worthless testing tools as Cybex machines. Thus we have a clear example of the stupid leading the blind, or vice versa.

Only time will tell just how many of my current opinions about exercise turn out to be correct, but I have at least produced something of great value that never existed previously: the tools required for meaningful and accurate measurement of the results of exercise. So, finally, after stumbling around in the darkness of ignorance and stupidity for years, we are now in a position to determine just what does, and does not, work, and may even be able to find out just why such things work, or fail to work.