



*****NEWS RELEASE*****

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Doctors Hampered from Saving Patients by Imposed Standard of Care Protocols

*Doctors need freedom to treat COVID-19 patients, not straitjacket,
'Evidence-based Medicine' protocols*

ST. PAUL, Minn. — [Citizens' Council for Health Freedom \(CCHF\)](#) resonates with the complaints of physicians frustrated in their care of COVID-19 patients by 'evidence-based medicine' and various bureaucratic restraints imposed by outside third-parties.

Evidence-based medicine (EBM), a term advanced by Canadian physician David Sackett, was introduced as a way to appraise medical literature. It was never intended to restrict the medical choices of physicians, but government and other third-party payers often use it to limit patient access to care.

“Evidence-based medicine protocols can act like handcuffs, preventing the proper care of patients,” said Twila Brase, president and co-founder of CCHF, and author of two reports on EBM. ***“To save his patients from EBM protocols, New York City physician, Dr. Cameron Kyle-Sidell, made [a public plea online](#) for every hospital to change ventilator protocols because they were damaging lungs. But why did he, a physician, even have to ask for permission?”***

As a result of the protocols, **Dr. Kyle-Sidell** told [MedScap](#)e he had to step down from the ICU: “We ran into an impasse where I could not morally, in a patient-doctor relationship, I could not

continue the current protocols which, again, are the protocols of the top hospitals in the country. I could not continue those.”

The New York Times released a [video of several physicians](#) nationwide who are questioning the one-size-fits-all treatment protocols and concerned about harming their patients. Only one physician interviewed said physicians should not deviate from these protocols. The other physicians were already leaving them behind, clearly trying to save their patients rather than being worried about repercussions from the institutions that employ them.

“COVID-19 has drawn attention to the dangers of one-size-fits-all evidence-based medicine protocols issued by third parties and tracked for compliance and payment decisions,” said Brase. ***“Thankfully many doctors are throwing EBM to the wind to save their COVID-19 patients. They’re talking to each other cross-country by Zoom, like they used to do in doctor’s lounges at every hospital, and ignoring prescriptive third-party protocols that don’t work for patients. This ‘freedom to treat’ should not change when COVID-19 is over.”***

“Physicians understand there are no standard patients even if health plans, hospital administrations or government claim otherwise,” Brase continued. ***“Patients have different preferences, reactions, physiology, tolerances, compliance levels, cultural needs, and DNA. Their treatment must be adapted to meet those differences. Although treatment can sometimes be standardized, no physician should be locked into an EBM straitjacket.”***

As evidence of successful care counter to current protocols, CCHF points to physicians delaying use of ventilators, putting people in respiratory distress on their stomachs in prone position with low flow oxygen, sharply reducing standard ventilator pressures to reduce lung damage, and prescribing hydroxychloroquine to keep patients from facing hospitalization and ventilation.

CCHF maintains a patient-centered, privacy-focused, free-market perspective. CCHF has worked in its home state of Minnesota and at the national level for more than 20 years to protect health care choices, individualized patient care, and medical and genetic privacy rights. In 2016, CCHF launched The Wedge of Health Freedom, an online directory of direct-pay practices (JointheWedge.com).

Twila Brase, RN, PHN has been named by *Modern Healthcare* as one of the “100 Most Powerful People in Health Care.” She is the host of the daily *Health Freedom Minute* radio program heard by over 5 million weekly listeners on more than 800 radio stations nationwide, and the author of the eight-time award-winning book, ***[“Big Brother in the Exam Room: The Dangerous Truth About Electronic Health Records.”](#)***

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