

**Skeptic**

*a person who looks for the simplest explanation first,  
but is willing to consider other possibilities in the light  
of unambiguous evidence*

**Wanganui's 'Natural Therapy' Clinic  
Expressions of mortality  
Bent Spoon and Bravos  
2012 Conference report  
Meetings and IQ**

new zealand  
**Skeptic**

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#### Deadline for next issue:

**December 10 2011**

Letters for the Forum may be edited as space requires - up to 250 words is preferred. Please indicate the publication and date of all clippings for the Newsfront.

Material supplied by email or CD is appreciated.

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# Waiting for the big one

IF the beliefs of a sizeable number of people turn out to be correct, this will be the final issue of the *NZ Skeptic*. According to a survey of 16,262 people in 21 countries conducted by market research company Ipsos for *Reuters News*, two percent of respondents strongly agree, and eight percent somewhat agree, with the proposition that 21 December 2012, the end of the current cycle of the Mayan Long Count calendar, marks the end of the world. Perhaps surprisingly agreement is highest in China (20 percent), while the Germans and Indonesians (four percent) are relatively dubious. One could perhaps question the representativeness of the sample (comprised of people who have agreed to take part in online surveys), but there must be a lot of people out there who are really worried about this.

David Morrison, who runs the *Ask an Astrobiologist* page on Nasa's website, was reported in Canada's *National Post* (28 September) as saying he has been flooded with thousands of questions about the issue, with at least one a week from teenagers so concerned that they're considering suicide. "The one thing in common with all of these scare stories about December 2012 is that they have absolutely zero basis in fact," he said. "There was no Mayan prediction of anything going wrong, there's no planet Nibiru, there's no planet alignment, there's no change in the Earth's axis, there's no change in anything about the Earth. It's just a complete fantasy."

Belief in impending apocalypse has long been a feature of certain religious groups, but the various 2012 scenarios have a distinctly secular flavour. There seems to be something deeply and paradoxically appealing about the notion that we will all be wiped off the face of the Earth, and it's not all driven by religion. Some see it as a response to the uncertainties of life, providing a sense of narrative amid the chaos. Another factor may be that, at least in its secular incarnations, it derives from a sense of insignificance in the face of the immensity of deep time. The universe is more than 13 billion years old, life has existed on Earth for at least three and a half billion years, and we probably have another five billion years before the sun runs out of fuel. Against that, what is the value of a single human life? (That's a question I believe can be answered, but space precludes discussion of it here.)

If Doomsday is almost here, at least it means that we don't have to face the idea of life going on without us. Some, perhaps, would see our lives today as having more meaning if all of history was leading up to this moment, and there won't be any more to come. We would become the heroes of the Story of Life – that story may be a tragedy, but at least we were in at the end.

*David*



# Snake oil, water and acid – a very sad mix

Clive Solomon

*A fiasco over a 'Natural Therapy Clinic' at Wanganui Hospital was finally resolved satisfactorily – but for the wrong reasons.*

THE attempted introduction of 'natural therapy' to Wanganui Hospital has been yet another appalling demonstration of the failed leadership, governance and management structure of the Whanganui District Health Board.

Whilst clearly recognising all our rights to pursue personal and spiritual health, wellbeing, happiness and pleasure, my view is this: New Zealand hospitals, established with public funds and administered by the Ministry of Health, must follow the principles of evidence-based care.

I have a high level of interest and involvement in things spiritual and religious. I am an ardent advocate of patient and broader human rights and strongly support and respect our indigenous people and the Treaty of Waitangi.

However, and a big however, as a trained scientist, specialist General Surgeon and third term elected member of the Whanganui DHB, I have been appalled at what has unfolded

in the attempted introduction of 'natural therapies' to our public hospital here.

I think I understand the sentiments that might have driven this initiative. Indeed I also have a degree of sympathy with its proponents, who almost certainly meant well.



**Dr Clive Solomon: hospitals must follow the principles of evidence-based care.**

The arrogance of thinking within Western medicine that excludes possible benefits of

other modalities of healing is not warranted. An environment lacking in empathy and caring is all too common in our public hospitals and also needs to be dealt with. So too, the awful health statistics of our under-privileged population – in which Maori are sadly over-represented.

However, even a cursory examination of what has transpired in this failed process reveals serious and very worrying realities of the state of stewardship of the provision of medical care in New Zealand.

The initiative to establish a 'Natural Therapy Clinic' at Wanganui Hospital saw the formal establishment of the service via an early morning blessing at Te Piringa Whanau on Monday 23 July at 7.45am. The service was led by local kaumatua John Maihi and Wanganui Hospital chaplain Rev Graham Juden.

Despite obvious months of planning and detailed preparation, this was announced via a press release of 19 July<sup>1</sup>, just



three days before the formal launch.

This was the first word of this initiative breathed to members of the Whanganui District Health Board. Not a single mention of it was made by the CEO Julie Patterson to her board – not even a hint in her weekly email updates to board members, the last one appearing just days before the launch. For a board that runs on the premise of ‘no surprises’ from its CEO, this is disturbing.

This is especially concerning since the media release in January 2012 suggesting (with the blessing of local obstetric specialists) that Wanganui might soon have no obstetric service was also never formally discussed at a board meeting. This created six months of chaos and anxiety for our community.

### Termination

Fortunately, like the absurd idea of not providing an acute obstetric service to a city of 45,000 people, the ‘Natural Therapy Clinic’ idea has been terminated.

Interestingly, the scheme was cancelled just days before it was to be presented to the board. The only way I was able to get it to the board table at all was to link the idea of allowing non-accredited ‘practitioners’ loose on our patients with the recent case of alleged sexual abuse of one of our patients by a mental health care assistant in our organisation.

The CEO reported at the time<sup>2</sup>:

“Almost 12 months ago we received a complaint from a young woman, one of our mental health clients. The complaint alleged that she had been raped by a Health Care Assistant (HCA). The staff member was

## The issue is a gross breach of our commitment to our patients to apply best practice and evidence-based models to their care.

immediately suspended and the complaint investigated. It was found that the staff member had had inappropriate contact with the woman (texting and meeting her away from the unit) and a strong suspicion that there had been a consensual sexual relationship. The staff member resigned but was informed in writing that the outcome of the investigation was that he would have been dismissed. As this person was part of the unregulated workforce, we had no other levers.”

How much more blatant a lesson does one need to realise the obvious pitfalls of not only allowing, but encouraging, unregulated workers access to our patients?

The ‘paper’ which was finally presented to the board was the usual inept documentation supplied for board members and was lacking in even the rudiments of scientific form or rigour.

The claim that the pilot programme received “overwhelmingly positive feedback from staff”<sup>3</sup>, is perhaps one of the more obvious areas of deception in all this.

A survey of the 75 staff members who chose to use the service at its pilot stage apparently showed a positive response. However, of course, this is a self-selected group of less than seven percent of hospital staff members who wanted to avail themselves of the service in the first place. The views of the other 93 percent of staff are not canvassed or recorded.

But this is characteristic of DHB doublespeak.

The first media release of 19 July concerned me on a number of levels. The fact that the board had not been consulted was one. Board sets policy; management is tasked with implementing it.

All too often in our fragile district, management has implemented unjustifiable actions and then looked to the board for support after the fact. That support has understandably and correctly for the most part not been forthcoming.

### An open-ended field

The second concern was the lack of definition of ‘Natural Therapy’ and the open-ended inclusion of all comers, including traditional Maori healing, Christian prayer, massage, Reiki and meditation training, as treatment modalities.

More recently, and again without prior notification, we learn through the media<sup>3</sup> that ‘colour therapy’ was also included in this array.

None of these can seriously or accurately be considered to be therapies any more than a warm



bubble bath or hairdressing could be. That does not mean that they necessarily infer harm – of course the latter two do not. Furthermore, it does not mean that hairdressers and bubble bath are not allowed or even encouraged in our hospitals: of course they are. They simply are not therapies. They are nice things and we can choose to use them in or out of hospital if we wish at our own whim.

The provision of Traditional Maori Health is already recognised by our Ministry of Health and appropriately funded and provided outside of hospitals. One could well argue that this is a legitimate part of the history and culture of New Zealand and like the Maori language is worthy of respect and support. I agree. This is a noble sentiment, and one supported by our government, but any serious practitioner of traditional Maori healing would no sooner practise his art in a backroom of Wanganui Hospital than I would perform a laparotomy in the staff canteen.

### Confusion

It is curious that the reported formal line of the organisation as to why the project was shelved was to “avoid confusion and anxiety in the community which we are here to serve”.

That confusion, however, has been created by the management team of what is supposed to be a first-world public hospital formally suggesting through one of its most prominent specialists that the likes of ‘colour therapy’, prayer and body rubs might have any serious therapeutic benefit.

Indeed, in a study of some 1200 patients published in the *American Heart Journal*<sup>4</sup>, prayer clearly has been tested and shown to have no such effect.

My greatest concern, until recently, was that this project was initiated and sustained by a medical specialist colleague Dr Chris Cresswell, who is a Fellow of the Australasian College of Emergency Medicine (FACEM) and boasts vocational registration with the New Zealand Medical Council.

### Code of Ethics

Our own Medical Association of New Zealand code of ethics requires us to “[a]dhere to the scientific basis for medical practice while acknowledging the limits of current knowledge.”<sup>5</sup>

It is entirely inappropriate for us to use our acquired medical positions and titles to actively promote in a formal way practices that clearly are not evidence based.

The issue is not that these modalities have no value. For individuals they clearly do. It is not that they might do harm; they probably will not. The issue is a gross breach of our commitment to our patients to apply best practice and evidence-based models to their care.

Furthermore, the notion that individuals who are essentially unaccountable and unrecognised by professional bodies and standards should be unleashed on our patients is at best irresponsible. That one of our senior doctors – Dr Cressell – in his professional capacity was using his medical qualifications and status to promote these people and

suspect modalities should be a matter for the Medical Council to act on. These are not acceptable treatment options. They might well be nice and comforting and like hand-holding and hairdressing, patients are at liberty to use them at their own behest even in our hospitals. They are not to be formally prescribed by doctors using their medical credentials to promote snake oil. These are not therapies; these are not credentialed practitioners. These are at best warm fuzzies and do not require ‘clinics’ endorsed by our doctors. They have no place in our hospitals any more than homeopathy, devil worship or nail painting does.

I was surprised that the hospital CEO, Clinical Board and Association of Senior Medical Staff supported this poorly conceived idea at the outset. They did. They most certainly did.

Not one of my medical colleagues locally spoke out against this plan. Not one spoke out in support of high-quality, first-world, evidence-based medical care of which we should be unambiguously proud.

### Common sense?

Then suddenly, the idea was dropped. I thought some common sense had prevailed.

The real and greatest concern, though, is this. Our CEO and board chair refused in the public section of our board meeting to properly explain why the project was so suddenly stopped in its tracks.

The answer lies not in medical ethics, science, patient concern or professionalism. Astoundingly, it seems, it lies not in a rational,



scientific concern for evidence-based practice and a concern for who precisely we allow to have access to our patients. It lies, rather, in religiously based paranoia and bigotry.

### **A Wizard at the hospital**

On 6 September 2012 an advertisement article appeared in the Wanganui River City Press titled 'Dreams, magic, healing and medicine'<sup>6</sup>. This promoted a talk to be given by Dr Cresswell on a number of topics including the 'Natural Therapy Clinic' and his proud introduction of it to Wanganui Hospital.

Sadly for Dr Cresswell and the 'Natural Therapy Clinic' the article disclosed the fact that Dr Cresswell is an ordained Wizard in the Whanganui School of Witchcraft and Wizardry, a clearly unchristian organisation and the meeting was part of Theosophy Wanganui.

I guess that degree of open mindedness, free spirit and lateral thinking on the part of Dr Cresswell is what led him on his natural therapy crusade. I must confess to a degree of admiration, kinship and support for his wide ranging interests, but alas, like business and pleasure, some things are best not mixed.

We can deduce it was the wizardry of Dr Cresswell that drove the medical professionals to object to the scheme. Not science, not ethics, not professionalism. Rather, we are told, "it was contrary to their religious beliefs".

I've been told more than once my problem is that I think too much.

That's probably true, but what has happened is not only mind boggling and sad, but frighteningly revealing on a whole number of levels.

A well-meaning 'good guy' doctor probably crossed the bounds of professionalism by formally elevating feel-good modalities to therapies. An ill-informed management team jumped on the bandwagon and Maori health was usurped in an attempt to ooze credibility over other unrelated claptrap practices.

The Health Board members were never consulted and some well-deserved bad press followed. Sadly, the Medical Council of New Zealand and the Ministry of Health provided no guidance and remained silent whilst all this unfolded. Happily, some very influential Wanganui senior doctors killed the project after previously supporting it. Sadly, it seems it was because of their own religious and personal bigotry that a silly idea was ended.

Great result, bad motivation. Very bad motivation.

### **Medical ethics**

Vicki Hyde of the NZ Skeptics<sup>7</sup> points out:

"It's rare for public figures to come out against these 'soft' services. It's easier to ignore the ethical and evidential issues associated with claims that these kinds of practices actually help to treat illness or disability beyond exploiting the well-recognised placebo effect."

It is imperative that as doctors, our first responsibility must be to our patients. Of course,

we need to be cognisant of our limitations, humble, not arrogant and open to all the needs of our patients. But we are trusted as a profession and that trust can only be maintained if we adhere to defined standards based on evidence and ongoing re-evaluation and scrutiny. We should not promote, via our medical qualifications, unproven modalities at the level of treatment modalities. But neither can we allow our own specific religious affiliations to affect our professional conduct with respect to our colleagues who might hold different or indeed no religious affinities.

As trained medical practitioners we must boldly uphold the scientific basis of our profession and never be compromised by political correctness or political claptrap and doublespeak.

### **Saving grace?**

The supposed saving grace in all of this is that (we are told) no taxpayer money was spent on this project. My Official Information Act application will shed some light on that. But note, apart from the media releases, the following occurred<sup>8</sup>:

- A credentialing committee was established, including Dr Cherryl Smith (Co-Director of Te Atawhai o Te Ao), Dr Chris Cresswell, Gilbert Taurua and Runesu Masaisai (WDHB Clinical Therapies Manager).
- Dr Chris Cresswell was to extend his professional development on natural therapy as part of his credentialing requirements as recommended by the clinical board.



- An independent legal opinion was sought which resulted in the WDHB's insurance company providing approved cover for the pilot.

- Therapists were required to become honorary DHB staff ensuring compliance with all WDHB expectations, policies and procedures.

- Systems were established to obtain confidentiality agreements from all therapists.

- Therapists were required to be police checked.

- Therapists were referee checked and cleared by both steering committee and credentialing committee.

- A memorandum of understanding was developed specific to the therapists collective.

- Informed patient consent expectations and documentation were established.

- The orientation programme for therapists included: WDHB purpose, values and behaviours, fire and emergency evacuation, infection prevention and control, manual handling, patient safety and service quality including complaints, privacy and the code of rights, CPR and smoking cessation.

That appears to be a lot of taxpayer funded work to me.

Some appointed members of the Whanganui DHB tried to excuse this whole debacle by suggesting that this was all just a staff benefit scheme and never intended for patients. They clearly never read their press releases and have been patently out of touch with this important

process, or worse, have compromised their own integrity in order to cover for a failing and flailing management.

To add insult to all these injuries, in an attempted justification of the failed project, Julie Patterson made the public comment that "in areas like 'chronic pain', Western Medicine has nothing to offer." Really?

With views like that from high earning health bureaucrats, doctors, nurses, the Medical Council and the Ministry of Health have sure got a lot of work to do.

In the face of all of this nonsense, we cannot and should not remain silent.

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1. Whanganui District Health Board Press Release 19th August 2012.

2. Weekly update, CEO Whanganui District Health Board 21st May 2010.

3. Wanganui Chronicle 26th September 2012. *Hospital Ditches Natural Therapy*, Anne-Marie Emerson.

4. Benson H et al. 2006: *Am Heart J*. 2006 151(4):934-42.

5. Medical Association of New Zealand Code of Ethics. [www.nzma.org.nz/sites/all/files/CodeOfEthics.pdf](http://www.nzma.org.nz/sites/all/files/CodeOfEthics.pdf)

6. River City Press Sept 6th 2012 *Dreams, magic, healing and medicine*.

7. NZ Skeptics press release 24th August 2012, [www.scoop.co.nz/stories/AK1208/S00554/consumer-wins-bent-spoon-again.htm](http://www.scoop.co.nz/stories/AK1208/S00554/consumer-wins-bent-spoon-again.htm)

8. Wanganui District Health Board Meeting 28th September 2012 Item 10.2.

**Clive Solomon is a Consultant General Surgeon, elected member of the Whanganui DHB (third term) and a Wanganui District Councillor. [Editor's note: Organisations referred to in this article differ in their preferred spelling of Wanganui or Whanganui.]**

death

## A matter of life and death

**Simon D Pollard**

*The tragedy of old age is not that one is old, but that one is young.*  
– Oscar Wilde, *The Picture of Dorian Gray* (1891).

IN 2011, I gave a talk at the INZ Skeptics conference in Christchurch titled 'Biology and Mortality: the Mysterious Fears of Our Nature'. I used my photographs to show how memorial art is an expression of one of the mysteries of life, which is what happens to us once we are dead. This article arose from a bizarre story about a man from California and how he planned to spend

eternity. Along the way, it embraced embalming, shoes for the afterlife, crypts and cryonics.

On August 30 1986, at the age of 81, Richard F (Freddie) Poncher from Los Angeles, California died. As is the tradition for American funerals, his body was dressed and made up, so that he looked asleep, rather than dead. After the funeral, the





Memorials can convey something of the deceased's hopes for the afterlife – or of their personality in this existence.

coffin was closed and slid into a crypt he had bought in a community mausoleum called the Corridor of Memories in Westwood Village Memorial Park Cemetery, Los Angeles. Crypts in community mausoleums look like rows of marble-fronted filing cabinets and this one was four crypts high. He had one person above him and two below. End of story, except for one small detail: Freddie insisted that after the funeral, his body was to be rotated, so he would spend eternity face down in his coffin. Why would he want his body to appear as if it was lying on top of the person who was below him and face up? After all, they were both dead. But planning for eternity is big business in the United States, and preservatives, the right

shoes and cryonics may help you get to the other side.

I'll get back to Freddie, but first a few words from Mary Shelley, who wrote *Frankenstein*. In 1831, 13 years after it had first been published in 1818, Mary wrote an introduction to a revised version of her book.

She explained how she had wanted to tell a story that spoke to the “mysterious fears of our nature”. As Victor Frankenstein wrote:

“I beheld the corruption of death succeed to the blooming cheek of life; I saw how the worm inherited the wonders of the eye and brain.”

Faith can conjure up an afterlife, a reward beyond the grave, but what if science, rather than the supernatural, could become our savior?

Once the sparks started to fly, Frankenstein's creation showed us that being dead wasn't necessarily

life-threatening. Mary's story was about reanimation rather than resurrection, with a warning about the dangers of dabbling in God's laboratory. It was an afterlife where you had both feet on the ground, but just remember to be careful what you wish for.



I Will Arise...



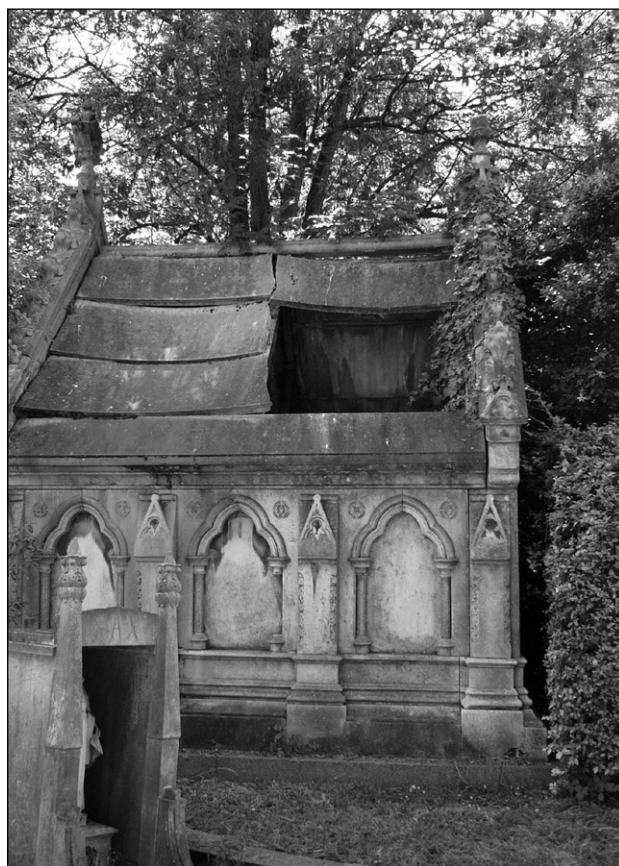
## Looking your best

This brings me to the blooming cheek of death, mortuary footwear and life in the freezer. In the United States, most people are embalmed before being made up with cosmetics for corpses, which can create a life-like glow. Then you can be displayed to family and friends who say how well and undead you look. It's not reanimation at Victor's level, but the wonders of the eye and brain appear intact.

The essence of the ritual is nicely summed up in Frederick and Strubs, *Principles and Practice of Embalming*: "A funeral service is a social function at which the deceased is the guest of honour and the centre of attention ... A poorly prepared body in a beautiful casket is just as incongruous as a young lady appearing at a party in a costly gown and with her hair in curlers." Embalming slows down decay long enough that, with a mask of makeup, the guest of honour looks like they have just nodded off. And when you are

in a padded coffin with a comfortable pillow, in a room called the Slumber Room, the corruption of death is nowhere to be seen. Bo-toxed and buffed, you are in good shape to head off to the afterlife.

But don't forget, you will need sensible shoes. In her 1963 book, *The American Way of Death*, Jessica Mitford quotes from a catalogue of Practical Burial Footwear, which ... I Have Arisen? said: "The No. 280 reflects character and station in life. It is superb in styling and provides a formal reflection of successful living." A sole for a soul. I prefer Woody Allen's view: "I don't believe in an afterlife, although I am bringing a change of underwear".



... I Have Arisen?

## Freddie and Marilyn

Now back to Freddie. Pillows, shoes and underwear were not on his afterlife bucket list. He was so insistent that he be placed upside down in his coffin, that he told his wife, "If I croak, if you don't put me upside down over Marilyn, I'll haunt you the rest of your life". That's right: the person lying under him was Marilyn Monroe, who died in 1962. She was still enough of a sex symbol, 24 years after her death, that Freddie was flipped in his coffin, toupée and all, in a creepy and comic gesture. Happy Birthday Mr Poncher, Happy Birthday to you. Had the Corridor of Memories become the Corridor of Mam-maries?

Unfortunately, for Freddie, eternity as he planned it was threatened, when in 2009 his



Darkened by the finger marks of fans, but with her nameplate brightly polished, the last resting place of Marilyn Monroe.

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## Charter schools open door for creationism

GOVERNMENT plans to establish charter schools look like providing a way for creationists to get their teachings into New Zealand's classrooms (*Dominion Post*, 19 August).

The Manukau Charitable Christian Trust is planning to team up with the Manukau Christian School to teach a "philosophy" titled 'In God's World', to be marked against the Cambridge curriculum.

The philosophy encourages every subject to be taught so students "discover" how God made the world, and upholds and governs it.

Trust chairman Tony Bracefield said it planned to open a number of junior classes at churches, feeding up to senior classes on Manukau Christian School's grounds. He said the school would use non-qualified teachers, and teach about 200 children in the long term.

Post Primary Teachers Association president Robin Duff said the types of people who appeared to be interested in charter schools would not have made it through teacher education.

"In the case of the trust, we'd be concerned if an organisation with a 'statement of faith' that denies evolution and claims creation according to the Bible is a historical event, were to receive state funding."

He said the trust could be grouped with religious organisations like Destiny Church

and the Maharishi Foundation, which had both expressed interest in charter schools, and which delivered education that denied scientific principles.

Associate Education Minister John Banks said he would not comment on the trust's charter plans.

A day later, the *NZ Herald* (20 August) reported Banks had told Radio Rhema he has no doubts the first chapters of Genesis are true.

"That's what I believe, but I'm not going to impose my beliefs on other people, especially in this post-Christian society that we live in, especially in these lamentable times. There are reactionaries out there, humanists in particular, that overrun the bureaucracies in Wellington and state education."

### Racist creationists upset Kawerau

Meanwhile, many residents of Kawerau have been upset by a creationist pamphlet mail drop in the small Bay of Plenty town (*NZ Herald*, 22 September).

"Are you a racist? You are if you believe in evolution!" the pamphlet states. "Kids are taught in school that man evolved (changed) from a chimp. So I ask you who changed the most from a black chimp with black hair and brown eyes? A black man with black hair and brown eyes?

Or a white man with blond hair and blue eyes?"

People who received the pamphlet should "rip it up and bin it," said Vicki Hall, a spokeswoman for the Race Relations Commissioner. "The commission's position is that the pamphlet is clearly offensive. However, there is no law that prevents someone from publishing it."

While the pamphlet accuses those who "believe in evolution" of racism, it is based on the racist premise that black people look more like chimps than white people do. Yet two of the three chimp subspecies have fair skin, and Caucasians tend to be hairier than other peoples. The similarity between chimps and people of colour is all in the minds of the pamphlet's producers, and the citizens of Kawerau were right to pick these mealy-mouthed hypocrites as racists.

### Death's link to vaccine 'convoluted pseudoscience'

The likelihood of an Upper Hutt teenager having died as a result of the cervical cancer vaccine has been rejected as convoluted pseudoscience by Helen Petousis-Harris, of Auckland University's Immunisation Advisory Centre (*Dominion Post*, 21 September).

Jasmine Renata, 18, died in her sleep in September 2009, six months after completing the programme for cervical cancer vaccine Gardasil.



She suffered from runny noses, headaches, warts, tiredness, a racing heart and other symptoms. During an inquest in August, her parents said they believed the vaccine was the cause of their daughter's failing health and eventual death.

Canadian neuroscientist Christopher Shaw and US pathologist Sin Hang Lee told the inquest heavy aluminium staining in Ms Renata's brain tissue could have acted as a "trojan horse", bringing the human papillomavirus into her brain.

But Dr Petousis-Harris said on 20 September that the doctors' arguments were convoluted and not based on scientific evidence. "I find that quite concerning, given the gravity of the issue here. Anyone who has had the vaccine may become worried, and anyone planning to have it may also become worried. But it's based on no evidence at all, which is not good. You have got to make your decisions based on good science."

It was important to discuss the weaknesses in the research so parents and possible vaccine recipients had all the information, she said.

There is further commentary on this case at [www.immune.org.nz/commentary-coronial-inquiry-expert-witness-testimony](http://www.immune.org.nz/commentary-coronial-inquiry-expert-witness-testimony)

### Medium to 'help heal' Pike River pain

Australian medium Deb Webber, of *Sensing Murder* fame is once again in this country using a tragedy to promote her business (*Greymouth Star*, 16 August).

Webber, who caused anger in 2009 by raising the case of missing Auckland toddler Aisling Symes while plugging her shows on breakfast television (Aisling's body was recovered from a stormwater pipe a few days later), has announced that this spring she will meet with family of Pike River disaster victims to help heal their pain with readings in a private session.

"I have been flooded with emails from family members so it will be nice to help them out," Webber's publicist said.

Given that Webber has no psychic ability (see *NZ Skeptic 104*), it's uncertain exactly how she is going to be able to help at all.

### Didgeridoo healing reaches NZ

Back in *NZ Skeptic 102* Alison Campbell reported on how didgeridoos could be used to clear emotional and energetic stagnation, and help "to quantum manifest healing and the co-creation of our universe." Now this amazing medical breakthrough is available in New Zealand (*Stuff*, 6 September), thanks to yet more visitors from across the Tasman.

Australia-based psychic double act K and Dr Michael appeared in Auckland on 18 September. The US-born Dr Michael bills himself as a "vibrational healer with the didgeridoo" and a reiki master who "gives energy healing with past life and spirit healing messages".

K on the other hand is "blessed with psychic abilities since childhood" and is said to be "one of

Australia's most sought after clairvoyants". Must have been quite a night.

### More Dunedin ghosts

Dunedin is emerging as the haunted capital of New Zealand. Following a series of ghostly events at Otago University's Cumberland College (*NZ Skeptic 104*) spirits are now reported to be occupying the nearby Globe Theatre (*Otago Daily Times*, 2 July).

Five members of paranormal investigation group The Other Side Paranormal visited the theatre to follow up earlier research into three spirits believed to be there. The spirits were said to be those of Robert Blackadder, who lived in the building in the 19th century before it became a theatre, a girl called Mary Elizabeth Richmond who lived in the building in the 1860s, and former theatre caretaker Frank Grayson, who died in the 1980s.

"I think it's safe to say the caretaker Frank is still there. He is just there looking after the place, basically. We've found a few things on our video footage ... a few light anomalies," said investigator Kelly Cavanagh.

There was also an "incident" when a person felt someone sit down next to them, and a photo revealed "energy" beside them. Other information gathered from an electromagnetic field reader, temperature gauge, and voice recorder would be analysed over the next week, Ms Cavanagh said. "We've definitely got some results and we are quite happy with what we've found."



## From Page 9

wife, Elsie, decided to sell his crypt to help pay off the rest of the mortgage on her Beverley Hills home. She owned the crypt next door, which Freddie had bought for her, and she was going to have him moved off Marilyn and into less racy real estate. Eventually, she planned to join him, in a reduced state, as cremated ashes. Here is the advertisement for the crypt as it appeared on Ebay:

“Here is a once in a lifetime and into eternity opportunity to spend your eternal days directly above Marilyn Monroe. This crypt in

the famous Westwood Cemetery in West Los Angeles currently occupied above Marilyn Monroe is being vacated so as to make room for a new resident. ‘Spending Eternity next to Marilyn Monroe is too sweet to pass up’, recently quoted by Hugh Hefner (sic), who has reserved his place in eternity next to her. The lucky bidder will be deeded a piece of real estate that he or she will make their last address. And below you will be Marilyn Monroe. In fact the person occupying the address right now is looking face down on her.”

The ad noted, “Local pick-up offered” and “No returns accepted”.

It appears that spending eternity above Marilyn was not the multi-million dollar drawcard that Elsie had hoped it would be, and for now Freddie remains in his crypt.

When it comes to cryonics, being dead is cool, as your crypt is a lot colder than those of Marilyn and Freddie. In what is another Frankenstein-like stab at reanimation, the dead are injected with cryoprotectants (antifreeze) and frozen in the hope that at sometime in the future, science will be able to wake them up. One scientist said that the chances of a cryonically-frozen person being reanimated, and remembering being the person they used to be, was as likely as making a cow out of hamburger meat that will remember being the cow it used to be. Unfortunately, mush is mush, and to me, selling cryonics is a bit like asking a parachute manufacturer if their product is any good and being told that none of their customers have ever complained. Whether it’s being reanimated or resurrected, I think that most of us would like to think that we could cheat mortality and spend eternity being happy, healthy and undead. The odds aren’t good and I’m sure that the goods would be odd.

**Dr Simon Pollard is Curator of Invertebrate Zoology at Canterbury Museum, and a natural history photographer and writer.**

**He was awarded Science Communicator of the Year in 2007 by the NZ Association of Scientists.**





# Consumer wins Bent Spoon again

*Vicki Hyde announces the Bent Spoon and Bravo Awards for 2012.*

**C**ONSUMER magazine has won its second Bent Spoon Award from the NZ Skeptics for continuing to promote homeopathic products as a viable alternative to evidence-based medical treatments.

In its September 11 2011 review of anti-snoring products, *Consumer* consulted a medical herbalist who was quoted as saying that “all homeopathic remedies may work wonders for one person and do nothing for another” and that “homeopathy is best prescribed on an individual basis, after extensive consultation”.

Homeopathy is known to exploit the well-recognised placebo effect where the body heals itself in many cases. Any “wonders” worked can be attributed to that effect, as homeopathic solutions are made up solely of water – a fact not known by 94 percent of New Zealanders purchasing such products.

Yet again *Consumer* has failed to point out that there are no active ingredients in a standard homeopathic product. Surely this should raise consumer protection alarm bells, akin to someone buying a microwave and receiving a cardboard box which they’re told will heat food via the

cosmic power of the universe if you think hard enough...

*Consumer* did note that another expert had pointed out that “the efficacy of homeopathic remedies had not been demonstrated convincingly in evidence-based medicine.” This caveat was not adequate as far as the NZ Skeptics were concerned, particularly as the homeopathic products had a prominent place at the head of the list.

We’ve seen the homeopathic industry use selective quotes as part of their marketing and advertising strategy to get unwitting customers to pay \$10 for a teaspoon of water. No doubt *Consumer*’s inclusion of homeopathic products will be used to boost business, despite the admission by the NZ Homeopathic Council that homeopathic products have no active ingredients. Disturbingly, *Consumer*’s expert doesn’t seem to be aware of this admission, stating that ‘extra’ active ingredients could help.

A number of people had raised concerns about *Consumer*’s willingness to feature such dubious products, with one nominator saying that the article had “destroyed *Consumer* NZ’s reputation as an organisation New Zealanders can trust”.

*Consumer* last won the Bent Spoon in 1992 for a similarly lacklustre examination of

forum

## ‘Organic’ water?

Either this water is alive, or it contains carbon. Either way I’m not drinking it.

Hugh Young  
Wellington





non-evidence-based health products. We'd hoped they'd learned something by now as our country's main consumer advocate. What's next – endorsing rubber bracelets as power-boosters for our athletes? Approving the sale of specially trapped sunlight in bottles to treat the blues? They should leave such shonky stuff to the tabloid press.

In addition to the Bent Spoon, the NZ Skeptics' Bravo Awards praise a number of attempts to encourage critical thinking over the past year. These included:

- Margo White, for her health columns in the *New Zealand Listener*. It's great to see informed writing on health issues, based on research and evidence, rather

than the large amount of low-grade items we usually get, based on press releases and thinly disguised advertorial material.



Homeopathy: Still sugar pills and water, whatever *Consumer* says.

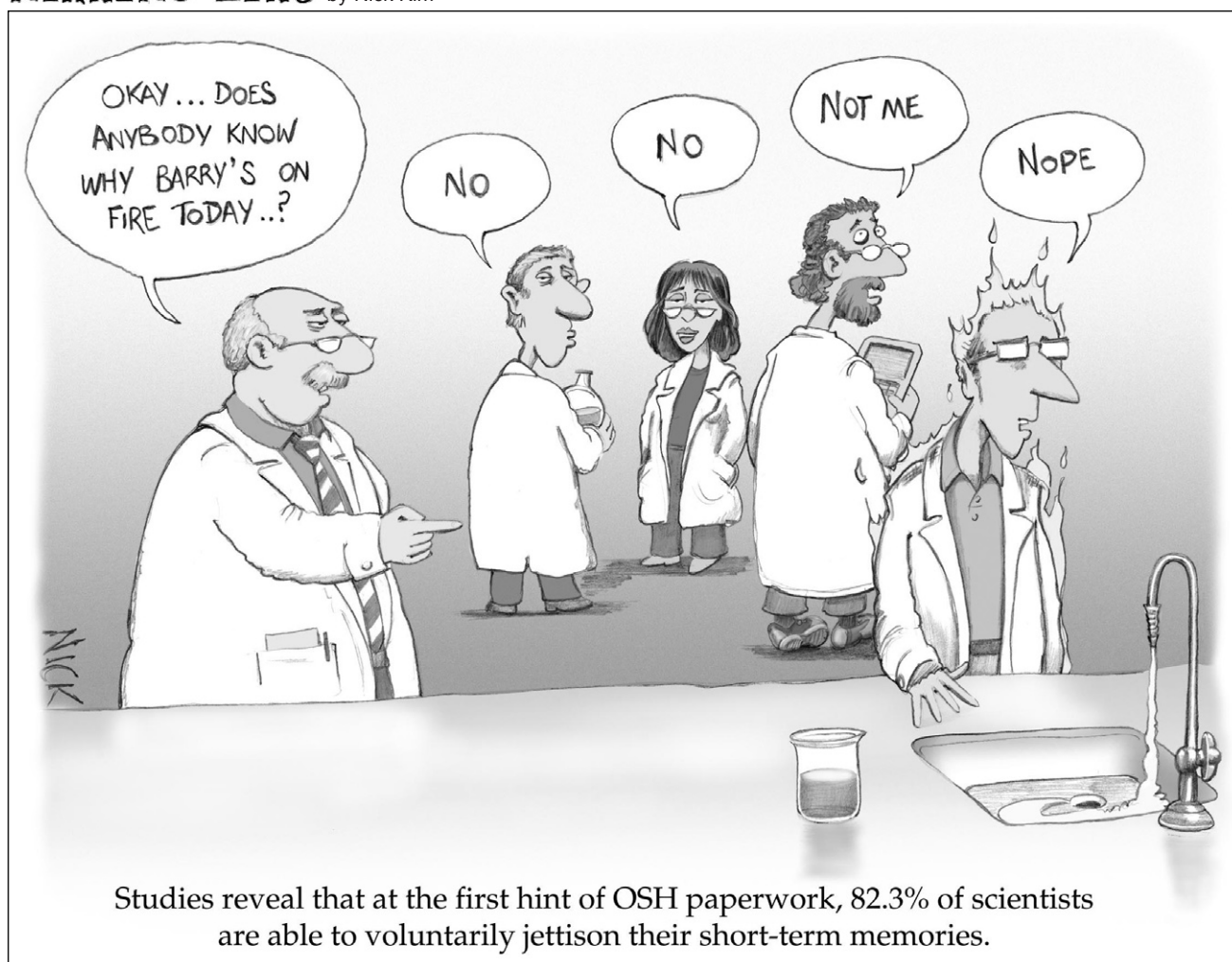
A number of White's columns were nominated for a Bravo, such as the item 'Lies, Lies and Eyes' which reported research indicating there is no evidence for the claims by proponents of neurolinguistic programming (NLP) to be able to tell if a person is lying or not simply by looking at the direction in which they glance.

- Whanganui District Health Board member Clive Solomon, for supporting evidence-based medicine as the core focus for hospital care (see p3, this issue).

The awards were psychically conferred at the NZ Skeptics Conference in Dunedin.

Vicki Hyde is media spokesperson for the NZ Skeptics.

## NEARING ZERO by Nick Kim



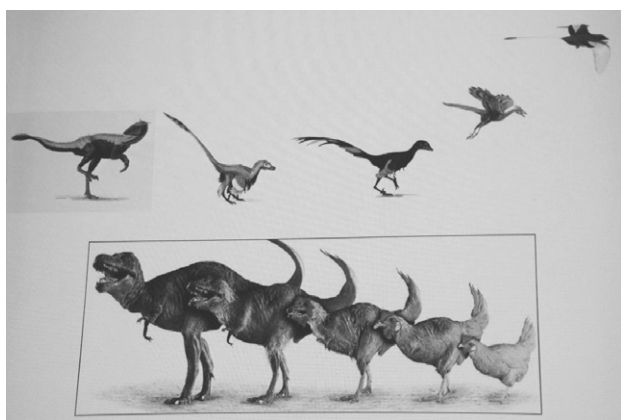


# Best Time Ever!

*Michael Edmonds reflects on the 2012 NZ Skeptics Conference.*

**H**AVING just driven four and a half hours back to Christchurch from the NZ Skeptics conference in Dunedin I should be tired. However, I am

some salient comments about engaging those with unusual views in dialogue rather than just telling them they are wrong. This approach was used the very next



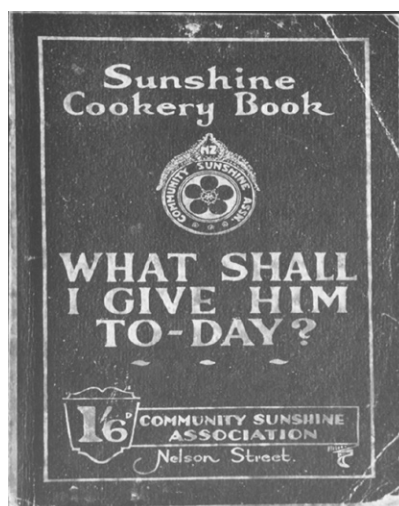
**The NZ Skeptics Conference covered everything from evolutionary misconceptions...**

still on a bit of a buzz from a really great conference, although a glass of Coca-Cola and a handful of M&Ms might also have something to do with it.

This was my third NZ Skeptics conference, and knowing a few more people certainly helped enjoy the conference, not to mention meeting up with Siouxsie Wiles and Dave Winter, two of my fellow Scibloggers who made it along – Dave's talk outlining some of the common misunderstandings regarding evolution was delivered with energy and enthusiasm and was really interesting.

Other speakers included Professor of Science Communication Jean Fleming, who made

day when another speaker delivered a rather controversial medical approach, the Marshall Protocol, in treating chronic disease. Members of the audience asked polite yet probing questions in order to tease out possible erroneous thinking. It was fascinating



**... to early New Zealand cookbooks...**

to watch and made me proud to consider myself a skeptic (and Siouxsie asked some excellent questions, while maintaining composure in the face of someone

who criticised the use of mouse models in research).

Professor Richard Walter described some fascinating 'alternative' archaeologies which have been developed in NZ, including claims that New Zealand was settled by ancient Celts, Chinese and other races. This sounds funny but the right wing, racist undertones implied by some of these alternatives is also a little scary.

Anthropologist David Veart delivered an enlightening and entertaining talk looking at the history of fad diets (and associated beliefs) in New Zealand. Who knew that cornflakes were originally developed to help suppress masturbatory urges? (Though as one conference goer tweeted – possibly providing far too



**... and being a thorn in the side of dodgy advertisers.**



much information – “cornflakes never stopped me ...”). One part of the talk that was very interesting to me personally was that of Ulric Williams, a medical doctor in my home town of Wanganui, who pushed the eating of non-processed food (generally good) as well as an anti-vaccine agenda (quite bad) which resulted in Wanganui having one of the highest levels of polio in the early 20th century.

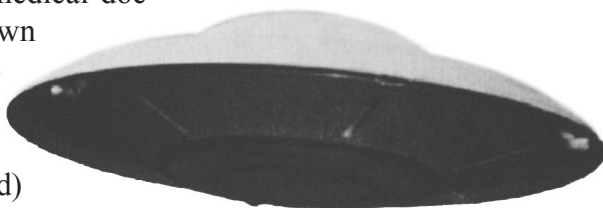
Fellow Cantabrian Mark Otley gave a fascinating talk about Well-Being – how it is measured, and how the government is now using various measures of well-being as well as looking at our GDP in assessing how New Zealand is performing, and the direction in which we should be heading.

My own talk on how to make a good Advertising Standards Authority (ASA) complaint seemed to go down well, so hopefully when skeptics come across advertisements flogging off dodgy alternative medicine products or services they will know exactly how to knock them on the head using the ASA.

The final talk for the conference was by Associate Professor Colin Gavaghan who, with humour and eloquence, described the complexities that occur when law and medicine come together in dealing with dodgy therapies, patients and doctors.

I haven't managed to cover all conference speakers, so apologise to those I have not mentioned. The cola and chocolate appear to be rapidly wearing off. So I will finish with a big thanks to those

who organised the conference, particularly Katie and Warwick – I had a fantastic time.



And thanks to my fellow Sci-Bloggers who finally taught me how to twitter properly (I think), though it will be a long time before I am anywhere close to the skills of Queen of the Tweets,

Siouxsie, who can get off five while I am still writing one.

Also one final word – Siouxsie and fellow skeptical podcaster, Craig, managed to corner, corral and coerce many of the speakers to do podcasts for their Completely Unnecessary Skeptical Podcast (CUSP – [thecusp.org.nz](http://thecusp.org.nz)). I recommend taking a look or a listen sometime.

**Michael Edmonds is manager of science programmes at Christchurch Polytechnic Institute of Technology (CPIT).**

## people

### Travelling on...



NZ Skeptic Chair-entity Gold stopped by the *NZ Skeptic* offices recently on his way from Bluff to Cape Reinga. Looking rather hairier than when he started, and having “worn out a foot” in Palmerston North, he is now travelling by cycle. The original plan was to follow Te Araroa, the walkway that runs the length of the country, but since swapping feet for wheels he has detoured through Napier and Rotorua. The journey is raising money for the Christchurch Earthquake Appeal, Women's Refuge and, of course, the NZ Skeptics, as well as giving the web programmer a chance to recover from the OOS that was threatening his career. He'll be settling in Wellington at the completion of the ride.

You can read about his travels at [intentionallyhomeless.org](http://intentionallyhomeless.org)



## Skepticism's Mirror Ball

*The Scope of Skepticism: Interviews, Essays and Observations from the Token Skeptic Podcast*, by Kylie Sturgess. Podblack Books, 2012. 151pp. About \$NZ18, or NZ\$6.40 for Kindle. Visit [tokenskeptic.org](http://tokenskeptic.org) and click on 'Merchandise' for links. Reviewed by Martin Bridgstock.

IN THE foreword to this book, Michael McRae uses the image of a mirror ball. Mirror balls have an important property: when a light shines on them, they reflect illumination into all kinds of dark corners. This is what Aussie skeptic Kylie Sturgess has accomplished in her first book.

For many years Kylie has been interviewing people involved with skepticism. This book is a distillation of some of her most interesting work. The first surprise came when I had a look at the people Kylie interviewed. I simply didn't recognise over half the names. Who, for instance, is Bruce M Hood or Petra Boynton? And why is Tim Minchin, the wild comedian, included?

The short answer is that, after reading each interview, my

conclusion was "Yes, I can see why this is important for skepticism. And I'm glad I know about it." For example Bruce M Hood is a psychologist who became concerned about the way that a British firm was producing 'bomb-detectors'. These devices were being bought to detect terrorist bombs in places like Iraq. Hood became concerned about their lack of documented effectiveness and found himself in a nasty confrontation with the device's makers. It became clear the 'detectors' were based on paranormal principles (see Newsfront, *NZ Skeptic* 97), and action was taken to stop them being sold. Good skeptical work by Professor Hood.

Petra Boynton is a sexologist. She's a perfectly genuine academic who studies aspects of sexual health. Boynton became

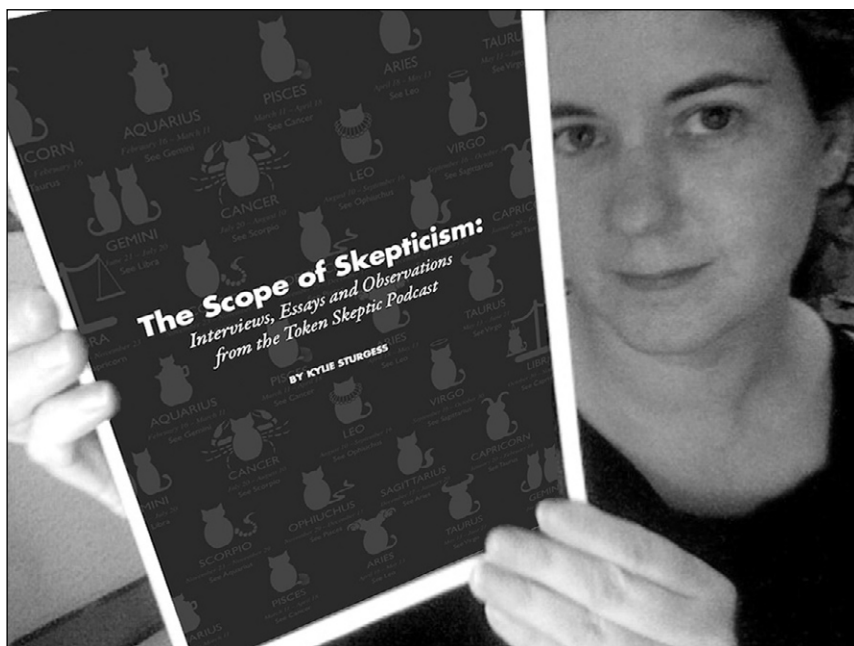
concerned at a 'charity' which claimed to be raising money to reverse the effects of female genital mutilation in some African countries. However, Boynton found a suspicious lack of reported activity. Money was going in, and nothing much was happening. Eventually it turned out that the Raelian cult was behind it all.

The inclusion of comedian Tim Minchin may come as a surprise. His wild, heavily made-up image on stage might lead anyone to think he is a devotee of woo. In fact, he's a skeptic who was encouraged by some of Randi's work, and builds both atheism and skepticism into his performances.

The theme of the book, as I read it, is that skepticism is expanding, and becoming involved in all kinds of unexpected issues. We need to know what is happening, and to support it where we can.

Overall, *The Scope of Skepticism* is well worth reading, and good value for the purchase price. I'd defy any skeptic to read the interviews and not learn many useful things from the people in the spotlight. We need to know about the frontiers of skepticism, and Kylie has brought back some fascinating reports.

**Martin Bridgstock** is a senior lecturer in the School of Biomolecular and Physical Sciences at Griffith University, Brisbane.



Kylie Sturgess: illuminating the expanding world of skepticism.



# If meetings really lower IQ...

... then there's little hope for the world, says *Alison Campbell*, who attends far too many meetings. Fortunately however, that may not be the case.



**I** ATTEND a lot of meetings; that's the nature of my job. Recently the Dean came in and waved the front section of the *NZ Herald* under my nose. "Look," he said, "all those meetings are really bad for you." Scenting a way of getting out of them, I grabbed the paper and found the article in question (syndicated from the UK paper, *The Telegraph*).

"Attending meetings lowers your IQ," cried the headline, and the article goes on to say that:

"[the] performance of people in IQ tests after meetings is significantly lower than if they are left on their own, with women more likely to perform worse than men."

The story is based on a press release about research carried out at Virginia Tech's Carilion Institute. And this showed that the research outcomes were more nuanced and more complex

than the newspaper story would have it. The research found that small-group dynamics – such as jury deliberations, collective bargaining sessions, and cocktail parties – can alter the expression of IQ in some susceptible people (Kishida et al. 2012).

In other words, meetings don't necessarily lower your baseline IQ. What they may do is change how you express that IQ, particularly if you're susceptible to peer pressure. The internal urge to conform can result in people making decisions as part of a group that they might not have made on their own, especially if they have concerns about their status in that group. (As the Virginia Tech release notes, this was shown to good effect in the superb film *12 Angry Men*, with Henry Fonda leading a stellar cast.)

The researchers placed study participants in groups of five and studied their brain activity (using MRI scans) while the groups were engaged in various tasks. While the groups were working they were also given information about the intellectual status of group members, based on their relative performance on those cognitive tasks. (There's a tendency for people to place great store on relative measures of IQ, and where they personally sit on the scale.) And afterwards, when participants were divided

on the basis of their performance into high- and low-performing groups before their IQs were measured again, they were found to differ quite significantly despite the fact that all participants had statistically similar baseline IQs when tested at the beginning of the study.

"Our results suggest that individuals express diminished cognitive capacity in small groups, an effect that is exacerbated by perceived lower status within the group and correlated with specific neurobehavioural responses. The impact these reactions have on intergroup divisions and conflict resolution requires further investigation, but suggests that low-status groups may develop diminished capacity to mitigate conflict using non-violent means."

As I said, this is altogether more nuanced, more complex, and much more interesting than the news story that caught the boss's eye. I suspect I'll be attending meetings for a while yet.

K.T.Kishida, D.Yang, K.Hunter Quartz, S.R.Quartz and R.Montague (2012) *Phil.Trans.R.Soc.B* 367(1589): 704-716.

**Alison Campbell is a lecturer in the Biological Sciences Department at Waikato University. She writes Bioblog as a way of encouraging critical thinking, looking at scientific papers that are relevant to the Level 3 curriculum and Scholarship, and fielding questions from readers.**



## Clairvoyants agree on missing man

By **CORINNE AMBLER** Police Reporter

POLICE will join friends of missing Wellington man Michael Kelly today in a search of an area where clairvoyants think he might be found.

Three clairvoyants independently said Mr Kelly was in the same area of greater Wellington, and friends had been searching there, close friend George Allan said.

Ms Allan said she had been dealing with a Wellington clairvoyant, one from Tauranga, and two women from the Spiritualist Church. A clairvoyant from Christchurch had also come to Wellington of her own accord, saying she had strong feelings about where Mr Kelly, 23, could be found.

At a meeting last night suggestions from the clairvoyants were considered and it was decided to check the nominated area today. Ms Allan said the clairvoyants thought Mr Kelly had been robbed somewhere near Ecstasy Plus nightclub by two men. He had been dumped in bushes near Oriental Parade, where he lay for a few days before the men panicked and took him away.

Ms Allan was told a third man was possibly involved and one clairvoyant could give detailed descriptions of the three, who were rough-looking Maoris, aged about 26. She could describe their tattoos and would recognise them if she saw them.

The clairvoyants thought Mr Kelly was near farmland and saw trees, buildings and cattle grates. Ms Allan said

the women felt the third man had not wanted to hurt Mr Kelly, but one of the men wanted him dead.

All three clairvoyants had independently given the same description of the men's car and police were following that up. ...

– From the *Dominion*, 12 November 1992.

## Natural ebullience may have led to Kelly's death

By **MATTHEW GRAINGER**

MICHAEL KELLY, whose body was found at the bottom of a light shaft in a Wellington inner-city building yesterday, may have contributed to his death by his ebullient nature. His friends had told police that he had sometimes climbed buildings – and on one occasion a crane – after drinking.

Mr Kelly, 23, who started a police hunt when he went missing four weeks ago, was found at the foot of a three-storey shaft in the Moore Wilson building in Tory St by a worker who opened an internal window on to the shaft. He had last been seen on October 18 outside Ecstasy Plus nightclub on the corner of Tory St and Courtenay Place.

Detective Inspector Lloyd Jones said police were searching for clues to reconstruct the events that led to Mr Kelly's fall. Mr Jones said Mr Kelly's death was seeming "less like foul play, misadventure is more apparent." ...

– From the *Dominion*, 17 November 1992. Both articles reprinted in *NZ Skeptic* 26.

## Want to join NZ Skeptics or renew your membership?

An on-line subscription/renewal form (internet banking and credit card options) is available on the New Zealand Skeptics website ([www.skeptics.org.nz](http://www.skeptics.org.nz)) – click on 'Join us'.

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## Want more skeptical discussion?

The NZ Skeptics Yahoo group is a discussion forum moderated by members of NZ Skeptics. Sign up at [groups.yahoo.com/group/nzskeptics](http://groups.yahoo.com/group/nzskeptics)

To join, send an email to the subscription email address on the page. Or join via your Yahoo ID, if you have one.

And New Zealand Skeptics has a Facebook page. Surely an excellent reason to sign up on Facebook, if you haven't already joined the billion-plus happy users?

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