

Health Law

**IS SPIRITUALITY RELEVANT TO THE PRACTICE OF
MEDICINE?**

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Abstract: The interrelationship between spirituality and medical science has been looked upon with suspicion for centuries. While in ancient societies medicine and religion were intertwined, in the West separation between these two since the Middle Ages has created a wall of mistrust which undermined the relationship. During the last two decades, however, there has been an upsurge of interest in the role of spirituality in medical practice in North American universities. There are a number of reasons for this development. They include an increasing number of patients particularly those with life threatening or chronic diseases who expect their spiritual concerns to be acknowledged and addressed. Furthermore, the unprecedented increase in medical technology has diminished the need for medical practitioners to provide compassionate care and has raised the awareness of physicians of the danger of dehumanization of medical institutions. Consequently, medical education programmes in a growing number of medical schools have begun to implement courses encouraging the integration of spirituality and medicine.

Keywords: Spirituality; medicine; healing; treatment; integration; religion; compassionate care; dehumanization; technology

INTRODUCTION

The rapid explosion of knowledge and progress of science has made unprecedented advancement in the field of medicine. Armed with modern technology, physicians have focused on conquering illnesses with enormous success. But is treating the disease the same as healing the person? Have we

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become more disease and less patient-oriented? In recent years, there has been a growing amount of research literature indicating a connection between spirituality and medicine.

Many patients in the critical stage of their illness want to express their spiritual needs and concerns which should be acknowledged. Religious beliefs can influence medical decisions on crisis interventions and life-sustaining procedures. Mansfield et al (2002) reported that in their study of 1033 individuals in the southern part of the United States, 80% of respondents believed that God acts through physicians to cure disease while 40% reported that God's will is the most important factor in recovery of patients.¹ Spirituality provides hope and gives meaning to life and therefore contributes to a holistic approach to the healing process. For centuries, many proponents of religion and science disputed each other's ideologies. But in reality, science and religion are inter-twined.² Historically, medical science evolved from religious establishments. In the East a positive relationship between spirituality and medical science has been preserved. But in the West, due to the separation between the Church and medical science, the biomedical model of practice has concentrated on the disease rather than the person who bears the disease.

Science and medical technology, important as they are, have shifted our attention from naturalistic healing to a more technical and biochemical approach. If this trend continues, it may contribute to the dehumanization of medical practice. George Engel proposed that the biomedical model evolve into a broader concept of a biopsychosociological model. However, the spiritual dimension of health sciences should also be taken into consideration. As a human being is essentially noble and spiritual in nature, with the body as its physical frame, it is important to recognize the need for physical and spiritual healing in any medical intervention. Death is not an end, it is a gateway to a new world.

Allen Dyer (1988) is of the opinion that scientific medicine has created numerous ethical dilemmas arising from new technologies. The psychology of science has altered the thinking about our place in this world and our attitudes to professional activity. According to him "the question is not whether medicine

1. Mansfield, C.J., Mitchell, J, King, D.E.: The doctor as God's mechanic? Believers in the Southern United States. *Social Science and Medicine. Social Sciences & Medicine*, 2002 (54) 399-409.

2. Abdu'l Baha: Abdu'l-Baha in London, Baha'i Publishing Trust, London, 1987, p. 28.

should be scientific, but how it should be scientific. It should not be scientific in a way that undermines the humanistic aspects of medicine or transforms professionals into technicians.”³ Albert Einstein stated “Science without religion is lame, religion without science is blind.”⁴

Materialism and Human Values

In a materialistic society and in a system of medical education unprepared to acknowledge and grasp the moral imperatives of the profession, there is a lack of sensitivity to the holistic needs and the spiritual development of the patient population. Many of our patients complain of feeling “empty”. Some of them fill in this “emptiness” with alcohol and mind-altering drugs. Some use food to overcome emotional hunger and develop bulimic symptoms while others bury this emptiness with depression and despair. Progress in pharmacological discoveries and treatment have alleviated the pain and emptiness but have not removed the cause.

Nancy Andreasen, in her editorial article “Body and Soul” stated that “changes in health care are placing us under increasing pressure to become only physicians of the body and to abandon our responsibility for the mind and soul.” She further indicates that the current health care system is globally insensitive to the mind or psyche of patients, regardless of their physical infirmities. The dehumanization of medical care is a trend which exists in many specialties. She deplores the materialistic trend in behavioural science and maintains that “psychiatrists are physicians to the soul as well as to the body” and believes that they should be proud of this fact in the face of the increasingly materialistic social structure that surrounds them.⁵ The rise of traditional healing including Shamanism is a sign of the search for a new direction. There is a need to bring harmony between scientific endeavour and religious knowledge of the nature and purpose of a human being.

3. Dyer, AR. Ethics and Psychiatry: Toward Professional Definition. American Psychiatric Press, Inc., 1988, p.137.

4. Einstein, A. "Science, Philosophy and Religion, a Symposium", published by the Conference on Science Philosophy and Religion in their Relation to the Democratic Way of Life, Inc., New York, 1941.

5. Andreasen, NC. Body and Soul. *Am J Psychiatry*, 153: 5, 590, 1996.

Treatment, healing and spirituality

In recent years, there has been increasing interest in the differences between treatment and healing. Kearney⁶ believes that treatment and healing are two distinct processes in the patient-physician relationship. Treatment and cure reflect a physician's relationship with the disease and its eradication. But healing is a process through which a physician relates to the patient and his personhood. This relationship is intended to restore hope and wholeness. It is also to enable the patient to draw a meaning from the illness and develop a capacity to grow and take responsibility for its management. As a result, it is conceivable that a patient may be healed in the process while his disease remains incurable or vice versa. Kearney and Mount (2000)⁷ have reported the following two cases to underline such a development:

Patient A was a 30-year-old man, a former business executive and athlete who suffered from metastatic cancer. Days before dying he said goodbye to his doctor and commented, "This last year has been the best year of my life." He was asked how a year filled with agony could be considered as "the best year". The patient replied that he had experienced a new awareness of the spiritual aspect of life.

Patient B, a widow in her 70s, suffered from pain due to breast carcinoma with bone metastases. She was resistant to analgesic treatment for her pain including increasing doses of morphine. Her physician inquired "When were you last well?" "Do you mean physically?" "No, I mean in yourself." "Doctor, I've never been well a day in my life." Then she added, "I've been sick in mind and spirit every day of my life." She remained anguished until her death.

In case A although the patient was not cured, he was content as he understood the meaning of his ordeal and purpose of life. In the case B, however, the patient was never able to attain serenity of mind and soul and the loss of meaning in her life was very painful.

I believe that the above dichotomy discussed in the literature relates to two

6. Kearney, M.: Palliative medicine - just another specialty? *Palliative Medicine*, 6: 39-46, 1992.

7. Kearney, M, Mount, B: Spiritual care of the dying. In: Chochinov, HM , Breitbart W, Editors. *Handbook of psychiatry in palliative medicine*, Oxford: Oxford University Press. 2000: 357-73.

methods of healing: material and spiritual.⁸ Cure resulting from the treatment of disease is the material dimension of healing while the process of healing the person through discovering meaning and purpose which facilitates the restoration of hope and wholeness is basically a holistic phenomenon. The former is in the domain of science while the latter is in the arena of spirituality. Spirituality is concerned with sacred human values, altruism, and ultimate purpose of life in relation to the Creator. Researchers have carefully avoided inclusion of spirituality or religion in their vocabulary fearing that it would not be scientific or because of their own displeasure with religion. Material healing is through material means such as the use of medications and other physical remedies. The spiritual method of healing is through prayer and turning to the Creator for assistance. Both means should be included in medical practice.

Medicine and the soul: are they related?

There are two realms of existence: inner and outer.⁹ The outer realm consists of the interaction with the outside world. The inner realm includes one's interaction with the inner and transcendental world. Science is concerned with the outer world while religion is more concerned with the inner world. Science and religion are relevant to one another and both reach out for truth: science through the power of intellect, research and technology while religion teaches through divine revelation and knowledge. Likewise, there is a relationship between the body and the soul. The body can be perceived as the physical frame through which the soul expresses its power. The body is also believed to be the throne of the inner temple.¹⁰ However, the inherent condition of the soul is not subject to change due to physical ailments or infirmities.¹¹ William Osler (1910) stated that "Nothing in life is more wonderful than faith - the one great moving force which we can neither weigh in the balance nor test in the crucible... Faith has always been an essential factor in the practice of medicine."¹²

8. Abdu'l-Bahá, Bahá'í World Faith, Bahá'í Publishing Trust, Wilmette, Illinois, 1956, p. 375

9. Yawar A. Spirituality in medicine: what is to be done? *JR Soc Med.* 2001 Oct;94:529-33.

10. The Bab, Selections from the Writings of the Bab, Baha'i World Centre, Haifa, 1976, p. 95.

11. Lights of Guidance, Baha'i Publishing Trust, New Delhi, 6th #385, 1999, p.113.

12. Osler, W. *Aequanimitas*. London: HK Lewis, 1906. Cited in Rosen, HD. Modern Medicine and the Healing Process. *Humane Medicine* 5:18-23, 1989.

Integrating Spirituality into Medicine

The history of the relationship between religion and medicine goes back to ancient times.: “From the early dynasties of China to the aboriginal empires of the Americas, holy men in ancient societies ministered not only to the spiritually fallen, but to the physically ill as well. In western civilization, the earliest hospitals were built, staffed and maintained by religious orders.”¹³ In ancient Greece and Egypt, temples also served as healing centres where the clergy were also healers of the ailments of body and soul.¹⁴ Thus science and spirituality were known to be interrelated.

While in ancient societies religion and medicine were intertwined, in recent centuries, in the West, the separation between medical science and the church created a wall of mistrust which impeded a close collaboration. In the East, however, there continued to be a spirit of collaboration and fostering of integration for the betterment of the sick and suffering. During the last two decades in North America there has been an upsurge of interest in the role of spirituality in developing compassionate care and the doctor patient relationship.¹⁵ As a result, a growing number of faculties of medicine have begun to provide seminars and courses on spirituality in their medical education curricula in the United States and Canada.

In the West, in spite of the divide between religion and science, there were many positive developments under the religious establishments. The first hospital in Western civilization was built by the religious orders during the 4th century in order to provide care for patients who were unable to afford private medical treatment.¹⁶ In the centuries that followed, religious institutions built hospitals, provided medical training and licensed physicians to practice medicine. This affiliation of the medical establishment with religious orders had ceased by the end of the 17th century.¹⁷

13. Modjarrad, K, Medicine and spirituality. *JAMA*, June 16, 2004;291 (23):2880

14. Alexander, FG and Selensnick, ST: *The History of Psychiatry: Thought and Practice From Prehistoric Times to the Present*, New York: Harper & Row, 1966.

15. Modjarrad, *op. cit.*, p. 2880.

16. Koenig, HG. Religion, spirituality and medicine: How are they related and what does it mean? *Mayo Clinic Proc. Proceedings*. 2001, 76(12)1189-1191.

17. Koenig HG, McCullough ME, Larson DB. *Handbook of Religion and Health*. Oxford University Press; 2001.

A similar development took place in the field of nursing, as it too grew through religious orders which staffed most of the hospitals of Western countries, including North America until the early part of the 20th century.¹⁸ The trend of religion's separation from medicine has slowly begun to change momentum, with a growing interest in integration during the past two decades. Over 1600 studies have been published on the association between spirituality and health. The majority of these studies concluded that a significant relationship exists between the two.¹⁹ Mueller *et al* (2001) in their extensive research and review of studies published between 1970 and 2000 about the relationship between religion and medicine reported the following: "Most studies have shown that religious involvement and spirituality are associated with better health outcomes, including greater longevity, coping skills, and health-related quality of life (even during terminal illness) and less anxiety, depression, and suicide."²⁰

Spirituality is closely connected to the purpose of life and a growing literature suggests a relationship between religion and health.²¹ The Gallup polls reported that 95% of Americans believe in God.²² Some patients affected by the disturbing effects of illness may question their purpose in life. In order to restore their health and hope, their questions should be responded to.²³ Restoration of health is a medical act, but restoration of hope is largely a spiritual phenomenon. Prayers are important both for spiritual and material healing. If the healing is in the best interest of the patient, it will be granted. However, it depends on the Will of God. If the divine wisdom does not decree it, healing will not be granted and there is a wisdom beyond our comprehension.

18. Koenig, HG., *op. cit* note 16 *supra*.

19. King DE, Blue, A, Mallin, R, Thiedke, C: Implementation and Assessment of a Spiritual History Taking Curriculum in the First Year of Medical School. *Teaching and Learning in Medicine*, 2004;16(1):64-67.

20. Mueller, PS, Plevak, DJ, Rumman TA: Religious involvement, spirituality and medicine: implications for clinical practice. *Mayo Clinic Proc.* 2001, 76:1225-1235.

21. Mansfield, *Op. cit.*, pp. 399-409.

22. Gallup Jr., G: Religion in America. 1990. Princeton, NJ, Religious Research Centre.

23. Foglio, JP, Brody, H: Religion, Faith and Family Medicine. *J Fam Pract*, 1988;27(5):473-4.

Interrelationship of religion and medicine

According to traditional science, only phenomena which can be reliably observed, measured or assessed, based on evidence, were the proper domain of scientific endeavour. Freud discouraged clinicians from taking religion seriously because in his view it was immature or wish fulfillment.²⁴ But with increasing clinical observation and research in the field of psychiatry, religion was reported either to contribute to the risk of developing certain types of psychopathology or to protect individuals from other types of psychological disorders.²⁵

Although clinical influences of religious and spiritual beliefs vary from patient to patient, the world view of their relevance to clinical diagnosis and treatment of psychiatric disorders is increasingly evident. Whether religion presents a risk for or a protective influence against an illness largely depends not on the sacred teachings of a religion but rather on whether it is based on a liberal or rigid interpretation of the original religious scriptures. For example, religious belief about abstaining from consumption of alcohol or mind-altering drugs has a protective effect against medical and psychological complications from the use of these substances. But if such a religious teaching is interpreted that consumption of any drug (including prescribed medication) must be refused, this would reflect an unrealistic generalization and thus would pose a serious risk to the patient.

In Judaism, Christianity and Islam, the meaning of sickness and suffering and the issue of healing and treatment have been explained.

In Judaism, healing is based on the fact that one's body belongs to God and it is an individual's right and responsibility to seek treatment to alleviate pain and suffering. In Judaism, the doctrine that suffering can be the cause of salvation does not exist. The Torah asserts that God uses illness as a form of punishment, but God also is the ultimate Healer. In Judaism the sick must consult physicians and pray to God.²⁶

24. Josephson, AM, Wiesner, IS: Worldview in psychiatric assessment. In: Josephson, AM and Peteet, JR, Editors. *Handbook of Spirituality and Worldview in Clinical Practice*, Washington, DC: American Psychiatry Publishing Inc. 2004: 15-30.

25. Koenig, HG. *Handbook of Religion and Mental Health*. San Diego, CA. Academic Press. 1998

26. Puchalski, CM, Dorff, E, Hendi, Y.: Spirituality, religion and healing in palliative care. *Clinics in Geriatric Medicine*, 2004, 20:689-714

Certain Protestant denominations of Christianity view all suffering and disease as the consequence of original sin. Among the Fundamentalists, Pentecostals and some Evangelical Protestants, it is believed that psychiatric illness occurs as a result of personal sin. Although this belief is not shared by most of the mainstream Protestant traditions, however the majority of Protestants consider that sin and loss of faith contribute to anxiety and depression. In fact some of them view suffering as God's punishment for personal sin. The implication of religion in medicine should be recognized by physicians as such a belief about sin and suffering may complicate the treatment plan.²⁷

More conservative Protestants have difficulty in separating spiritual health from mental health. They perceive psychiatric illness as a symptom of a spiritual problem which is rooted in one's relationship with God and must be addressed through obedience.²⁸

Christians of Catholic persuasion believe that human life from conception to death is sacred because, according to the Bible, human beings are created in the image of God. Therefore, abortion, contraception, sterilization and embryonic stem cell cloning are in conflict with one's relationship with God. Prayer is very important in the life of a Catholic as it shapes the personal relationship of the believer with God. Catholic patients may experience very severe feelings of guilt and seek confession for their sins.²⁹ In the Christian tradition "healing is so strongly rooted in Christ that it forms the foundation for caring in the Catholic health care system."³⁰

According to Islam, human beings do not carry a burden of original sin nor is a human infant born in sin, but rather in a state of moral purity.³¹ Likewise, disease is seen neither as a consequence of sin nor as a divine punishment nor due to the wrath of God. Humans are tested by affliction as part of a purifying

27. Servis, M.E.: Protestant Christians. In: Josephson, AM and Peteet, JR, Editors. *Handbook of Spirituality and Worldview in Clinical Practice*, Washington, DC: American Psychiatry Publishing Inc. 2004: 63-75.

28. *Ibid*

29. *Ibid*, pp. 84-85

30. Puchalski *et al*, *Op. cit.*, pp. 689-744

31. Abou-Allaban, Y: Muslims. In: Josephson, AM and Peteet, JR, Editors. *Handbook of Spirituality and Worldview in Clinical Practice*, Washington, DC: American Psychiatry Publishing Inc. 2004: pp. 111-123

process and passage to eternity.³² In Islam suicide is expressly condemned in the Qur'an. Traditionally, suicide has been underreported and only a few Islamic countries report suicide occurrences.³³ There is an explicit text in the Qur'an and a Hadith on the subject of suicide including the verse "And kill not yourself" (Quran 4:29). Based on Islamic law, an individual does not "own" his life and thus cannot terminate it.³⁴

In the Baha'i Faith there are specific statements about not only the sanctity of life and the practice of medicine, but also about the methods of healing and the responsibility of physicians as healers. Harmony between science and religion is one of the hallmarks of the Baha'i teachings. Patients must seek medical treatment. There is a special emphasis on the spiritual as well as the material aspects of treatment and healing. Life is viewed as a journey and death, like birth, is another stage in the development of the soul toward eternity.

CONCLUSION

As Koenig (2004) pointed out, there are several factors which support the relevance of spirituality and religion to medicine as follows:

- Religious practice including prayer is one of the most common approaches to coping with disease and distress. It can contribute to remission from depression.
- Religious beliefs can influence medical decisions such as accepting or rejecting life sustaining procedures in a critical state of illness.
- Faith community is an important source of social support for medical patients and their adherence to therapy.
- Many patients have spiritual needs which, if not met, may lead to serious consequences. Taking a spiritual history will help physicians to recognize patients' spiritual concerns.

32. *Ibid.*

33. Pritchard, C, Amanullah, S: An analysis of suicide and undetermined death in 17 predominantly Islamic countries contrasted with the UK. *Psychological Medicine*, Mar. 2007, 37 (3): 421-430.

34. Puchalski *et al*, *Op. cit.*

Some physicians' reluctance to address the spiritual concerns of their patients may be due to a number of reasons including their own perception of spirituality, lack of time or training on such issues and fear of imposing their own values on patients.³⁵

Religious and spiritual values offer a healthy perspective on life and interpersonal relationships and thus contribute to the well-being and betterment of humankind. They help strengthen basic trust and foster compassionate care and moral responsibility. They offer a broader perspective of life and its meaning and infuse a sense of hope, purpose and contentment. This feeling is reinforced by reliance on divine assistance when facing adversity beyond one's control. One of the basic teachings of religions, love and unity within human society, reinforces a greater care and empathy, especially for the sick and suffering. It also fosters forgiveness which serves as a healing medicine against psychological conflicts and aggression.

Medical education should include in its curriculum the interrelationship of science and spirituality and prepare young physicians to become healers of the soul as well as of the body. Indeed, the human body, this physical frame, is the temple of the soul and as such, both need protection.

35. Koenig, HG: Taking spiritual history. *JAMA*, 2004, 291:2881.