Body, mind, and spirit are integrally connected. Medical training in the Western world has been strong concerning the more easily measured physical aspects, and on the mental needs it has been virtually mute on how to minister to the spiritual needs of our patients. Learning the spiritual aspects of medical care is not a typical part of the medical school curriculum, and yet it is emerging as something that our patients want and expect us to do as part of our caring for them. Herein I discuss the role of spirituality in medical practice, how it relates to alternative medical practices, methods to use to grow spiritually, and ways to apply your spirituality to medical practice.

Why are you in the field of health care? Is it for the prestige? Interesting problems to solve? Financial security? To satisfy the demands of family? To help people who are ill? These are questions that everyone who entered medical school has consciously or subconsciously addressed, but questions that we rarely consider in the midst of a demanding practice. To answer them we must examine our core values and be honest with ourselves about our motivation for being in the health care field. If helping people who are ill is a primary reason for you, then the rest of this article may make some sense. If it is not, then it will seem total bunk and you may as well not read further.

We will assume, then, that helping people is a primary goal for you, and that earnestly pursuing that goal provides you with satisfaction. Let us contemplate for a moment on some of the sources of dissatisfaction in our role as a health care provider. Many may come immediately to mind, such as paperwork, insufficient time to interact with patients, patient dissatisfaction, failure of patients to follow through with our recommendations, and finally, the limitations on our abilities to really help a person.

OUR HUMAN LIMITATIONS

We work hard to stay current with the newest surgical methods, new physical therapy modalities, the newest medications, and better ways to use the old medications. The volume of literature about the technical aspects of medicine is more than enough to totally consume all efforts to stay current. And yet we know in our hearts that even this would not be enough. There are some problems that are just not fixable by our skills and tools. There is a limit.

We all have tried to care for people who, despite our best efforts, skills, and intentions, just are not getting better. We have prescribed all the right medicines. We have done all the right tests. We are missing something. Unfortunately, we are not able to help everyone to the extent we want. We are frustrated and saddened when a disease like melanoma defeats our efforts to control it.

There are times too, puzzling times, when we know that we cannot help, and yet the patient gets better anyway, despite what we have done. Why? The answer eludes us, but obviously there is more to our care than we are capable of understanding. This is what we sometimes call psychosomatics. This is the territory of spirituality.

WHAT IS SPIRITUALITY?

Spirituality is difficult to define. It can be regarded as that part of a person’s being that involves the intangible nonphysical world. It is influenced by our core value systems, our psychological makeup, our religious beliefs, and our emotional subconscious memories. Spirituality cuts
across all the major world religions. Each of us can probably think of spiritual people who do not participate in organized religion, and we can think of people who attend worship services regularly who are not particularly spiritual. There is a rapidly growing body of literature on spirituality. For example, Dossey in his book discusses in detail the role of prayer in medical practice.

How are we to understand how spirituality works? It is impossible to really measure prayer or other aspects of spiritual practice.

**OUR SCIENTIFIC UNDERSTANDING**

But must we understand how something works to use it skillfully? No. Just as we can learn the use of tools without knowing how they work, like a microwave oven, CD player, automobile, or computer, we can also apply skills of spirituality to our medical practice without understanding them. It takes knowing how and when to use certain skills to make them effective tools for us.

In every aspect of medical care there comes a time, a level of understanding, when, if we are absolutely honest we say, I do not know why. The reality is that science-based medicine can only go so far in caring for people. The unspoken scientific paradigm that permeates modern medical care says that everything can be explained by the scientific model if only we do more research. That is a flawed model. Everything cannot be explained. The Heisenberg uncertainty principle says that at a certain level we will never be able to know with certainty how the physical world works. There is something more. It can be called faith, and that is where spirituality is applied.

Just as we use the electrocautery machine effectively, so too we use other skills effectively; eg, a friendly smile, a handshake, a warm pat on the shoulder, or a prayer. Many of these techniques are eloquently discussed in a book by Shelley and Shelley in a chapter entitled “Zen and the Art of Patient Maintenance.” We can scarcely imagine the benefit of such skills to a patient. There are no double-blind studies for testing this, but we know instinctively that it is crucial.

**RELATIONSHIP OF SPIRITUALITY TO ALTERNATIVE HEALTH CARE**

Why do patients seek alternate forms of health care? Although alternative therapies can be expensive, especially when not covered by health insurance, they are not usually as expensive as conventional treatments. The alternative therapies are generally regarded as “natural” and therefore benevolent. People want to avoid the drugs with potentially harmful adverse effects, preferring treatments perceived as less toxic, although they may be less effective. Alternative treatments often sound true and relate more directly to people’s personal experiences. For example, we can relate to the need to flush the toxic wastes from our liver since we flush the toxic wastes from our toilets.

The treatments in many alternative health care systems are based on intuitive reasoning. Intuition appeals to our spirituality directly for guidance and validation, and so frequently alternative health care practitioners will refer to spirituality and draw on spiritual foundations for validation and credibility. Alternative therapies and spirituality are often, then, linked—to the extent that we accept or reject the alternative health care method we accept or reject spirituality. The practitioner who claims to be scientifically based becomes unwilling to apply spirituality because that would appear to mean accepting alternative therapies. In reality alternative therapies have no monopoly on spirituality, and spirituality is as much the provence of science-based medicine as any other area. One way that our scientific paradigm refers to spirituality is in the term *psychosomatics*.

**PSYCHOSOMATIC MEDICINE**

Psychosomatic illness is readily accepted as valid, but there is no good way in the scientific paradigm to deal with it. It does not readily become the subject of scientific investigation because it cannot be quantified and measured easily. When we cannot explain something we tend to refer to it as psychosomatic, and leave it at that. We acknowledge the spiritual, but deny it at the same time, because we have had no training or experience in what to do in that arena. By ignoring the psychosomatic we neglect the spiritual sides of our patients.

Although there are limits on our scientific skills, there are other skills that can be developed to help our patients’ spiritual skills. The rest of this article looks at some practical ways to develop spiritual skills.

**METHODS TO SPIRITUALITY**

In the following sections I examine what you can do by and for yourself to grow spiritually and progress on your own spiritual path; what you can do spiritually for the patients in your medical practice; what you can do spiritually with your patients; and what you can help the patient do for himself/herself in the area of spirituality.

For Ourselves

There are many methods to develop and practice a spiritual life. There are some practices that are virtually universal to all major religions such as worship, prayer, meditation, and fasting, although there are obvious cultural differences. I would suggest reading the book *Celebration of Discipline: The Path of Spiritual Growth* by Foster. Foster is a Quaker with profound suggestions for living a spiritual life.

There is a caveat. There is potential for abuse of power. Spirituality should be used for good, but can be used in many ways for evil purposes. Seek the good. We little realize the power we have.

To help others spiritually you must be as integrated and centered as you can be. Of course, perfection is not attainable. It takes time and effort to develop spiritually. The spiritual life is a journey, and that journey is different for each and every individual. Seek your own journey, and be aware of where you think you are on that path. Develop the skills for your spiritual journey through study, prayer, meditation, worship, and community.
Study. Select carefully the materials you choose. There are many to choose from, but they should have proved the test of time. Read the Hebrew Bible, the New Testament, the Koran, the Way of Life of Lao-Tzu, the Talmud, the writings of the desert fathers, and other classics of religion. Nurture the spiritual part of your intellect as much as you would the scientific. But remember that the intellect is not enough.

Prayer. You must develop a prayer life. But what exactly is prayer? There are many forms of prayer, some are appropriate in the medical setting and some are not. I like to think of prayer as a conversation with God. In a conversation you must do your share of listening, and so it is with prayer. Prayer is not just talking. Listen in prayer as much as you talk. Include praise and thanksgiving in prayers before you ask for things. Intercessory prayer is the type of prayer that asks for something—the team to win, the person to be healed, or the car not to break down. Be careful with intercessory prayer to ask for things that are possible. We cannot ask that purple be green, or that triangles have 4 sides.

I like the serenity prayer very much that says,

God, grant me serenity to accept the things I cannot change, courage to change the things I can, and the wisdom to know the difference; living one day at a time, enjoying one moment at a time; accepting hardship as a pathway to peace; taking, as Jesus did, this sinful world as it is, not as I would have it; trusting that You will make all things right if I surrender to Your will; so that I may be reasonably happy in this life and supremely happy with You forever in the next. Amen.

I also like the prayer of St Francis:

Lord, make us instruments of your peace.
Where there is hatred, let us sow love;
where there is injury, pardon;
where there is discord, union;
where there is doubt, faith;
where there is despair, hope;
where there is darkness, light;
where there is sadness, joy.
Grant that we may not so much seek
to be consoled as to console;
to be understood as to understand;
to be loved as to love.
For it is in giving that we receive;
it is in pardoning that we are pardoned; and
it is in dying that we are born to eternal life.

Meditation. Meditation means opening our subconscious, our soul, to the influences of higher powers. It is distinct from prayer, but similar, and there are many forms of meditation practice. Herbert Benson, MD, has taught the relaxation response for many years. In this simple but effective form of meditation you concentrate solely on breathing and emptying the mind of other distractions. There are many sources of instruction in meditation, including books and seminars.

Worship. True worship involves prayer and meditation, but it also involves participating in spirituality with others, and there is great power in doing this.

Community. You must seek help. Just as you cannot learn medicine from a book you also cannot learn spirituality. This is not easy for physicians, who are constantly looked to and relied on as the authority figures. But all of the previous activities alone will not be sustained and directed without the help and support of a religious community. Now that “community” may be a spiritual advisor, or a pastor, or a rabbi, or it may be a Bible study group or congregation, but our spiritual growth needs to be nurtured by others, or it will be nothing. So seek the help of like-minded people. Seek for them and you will find them.

For the Patient

Admit that we are not omnipotent. The more honestly we admit this the more content we will be. Sincere humility will be appreciated by most patients, and be regarded as a strength rather than a weakness. Hubris, the opposite of humility, is probably the base cause for most lawsuits.

Pray for your patients. The most powerful thing we can do in our medical practice is to pray. Prayer helps us be the vessel and agent for the higher power to bring needed healing, and it helps us to be open to what the specific techniques of healing should be, whether it be prayer, or a healing service, or sweat lodge, or the latest corticosteroid cream, or methotrexate, or psoralen–UV-A. Prayer turns the ultimate responsibility for the patient’s welfare over to a higher power, relieving us of the burden of being more than we can be.

I do not believe that it is necessary to ask patients for permission to pray for them. Ask in your prayers for help and guidance so that your medical skills might be best applied to the situation. Ask for what is best for the patient. Usually we think we know but sometimes what we think is best turns out not to be. The “Thy will be done” prayer is as effective as directed prayer.

In the morning as you look at the schedule for the day you might pray for specific people. Pray that they be improved, pray that they lose their anger, and pray that they understand their medical problem. Pray for yourself; that you might be a good listener to your patient’s problems, that you apply the correct therapies, and that you be alert to the signs and symptoms of disease.

In the evening when office hours are over take a copy of your schedule and pray for the people you have seen. Pray that they may understand their problems and be motivated to do the right things. Pray for their other needs—the patient whose father is dying or whose wife just had a mastectomy or who is having trouble with his/her parents. Ask for healing of their whole self, not only their specific problems.

With the Patient

Know your patient. One aspect of American society that complicates dealing spiritually with a patient is the plurality of our religious beliefs and practices. Many of our patients have well-developed spiritual lives, but many are antagonistic to spirituality. Many have half-baked poorly organized inconsistent belief systems. Trying to pray with a person who is an avowed militant agnostic is not go-
ing to be a beneficial experience for either of you. It takes time and trust to know who you are dealing with. It cannot be done quickly, but it can be done.

One way to know your patients is to notice the jewelry that they are wearing. The cross necklace that a person is wearing may start a conversation about his/her beliefs.

Maugans has proposed the mnemonic device “SPIRIT” to help in remembering what to ask. S stands for Spiritual belief system; P, Personal spirituality; I, Integration with a spiritual community; R, Ritualized practices and Restrictions; I, Implications for medical care; and T, Terminal events planning. This spiritual history may take many visits to collect.

Pray. Offer to pray with or for the patient. This must be done with care and tact, but when properly done will be a powerful way to help. When people know that they are prayed for they receive a strength that is not measurable or explainable, but is real. You may tell the patient what you will be praying for, or just simply that you are praying for him/her.

Declare Your Spirituality. I believe it is inappropriate to actively proselytize in the office setting. To try to persuade someone to your personal beliefs is a misuse of the power entrusted to us as physicians. However, I think it is appropriate to indicate in some way our spiritual persuasion, perhaps by wearing a lapel pin cross or by a Star of David on the wall. These stand as silent invitations to discussion that the patient can accept or reject without potential repercussions from you. They give patients permission to bring up their spiritual concerns.

For the Patient to Do

Offer instruction in prayer or meditation. Patients may not know how to pray. With your experience in spiritual discipline you can teach and guide them. Tailor the advice to the spiritual background of the patient. If you force your spirituality on the patient it will not work. He/she will seek another physician. If you offer your spirituality, it can be received with joy.

Let your patients tell you what to do. Listen to their inner voice. Most of the time it will be the correct one.

Give your patient permission to pursue other forms of health care. Many will pursue alternate forms of health care whether you let them or not. Knowing them and what they are doing gives you all the more effectiveness in their care. And granting permission to be open with us also gives us more credibility in the patient’s eyes. Now we are caring for them and giving them every chance to get better, not just the chances that our methods might give.

For You to Do Now

Where to start: Seek ye first the kingdom of God. If you do not have a background in spiritual concerns and are not part of a religious community, then begin your spirituality now. Now is the acceptable time. Do not put this off. You can do it. Say a prayer now. Even if it does not help a single patient it will help you. Pray. Meditate. Study. Worship. Seek community.

Seek reconciliation with other forms of alternative health care in your community to learn spirituality from them. If they reject you, it may be because they have been so long and so often rejected by the medical monolithic establishment that they are shy of consorting with it. I have experienced the hostility and rejection of alternative health care workers who have been hurt by rejection from the medical establishment. Give them time and earn their trust. This can only be done through genuine respect. What if you do not have genuine respect? Work on it and find it. Apply the tests of sincerity and effectiveness. Reject the shysters. Be honest and open with those who sincerely believe in what they are doing. Belief is a powerful thing.

CONCLUSIONS

Throughout the ages there have been men and women who were both highly religious people and highly skilled healers, and they applied their spirituality to their healing practices. But there has been an ever increasing split between those talents. Religious and spiritual ways of thinking have been steadily removed from scientific-based medical practice as we have come to know it in the 20th century. Thus, we have a tendency to dismiss the skills of a shaman just because modern scientific medicine is not being applied.

Can science-based medicine recapture the role of healer? Are we healers or are we medical technicians? How do we view ourselves? If we do not think of ourselves as healers we become technicians, manipulating the tools of our trade, and we cease to be real and complete healers. As technicians we will lose the respect that we had as healers.

Each of us is capable of becoming a healer, although that power comes not through our own power or initiative. We are capable of bringing peace and comfort to people who seek our help and advice, and this extends beyond the prescribing of medications and the dispensing of advice. It means caring for people and their concerns, of taking time to set an example for them.

Why seek spirituality? Because it works. How does it work? I do not know. I do not know at the molecular level how cortisone works, or what electrons look like. They work whether I understand them or not, and so does spirituality. When the spiritual needs of patients are sincerely met they will do better and receive better care. More important, the health care giver, the physician, is also going to be more whole, more healthy, and more integrated in body, mind, and spirit. Spirituality is an area to pursue both for your patients and you.

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