

## **Spirituality in Medicine: Is OM and its Education Concerned with the "Spiritual" Aspect of Medicine?**

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The DAOM course of study provided an opportunity to evaluate both the educational programs and practice of Oriental Medicine (OM), specifically as it relates to our tradition of a mind-body-spirit continuum. In a late 2003 response to a question on the doctoral admissions form, this writer expressed concern that, in order for OM/TCM (Traditional Chinese Medicine) to be accepted within mainstream medicine, much of its *Art* and *Soul* has been lost in favor of a biomedical justification for our endeavors. Due to Oriental Medicine's philosophical roots, which includes the concept of harmonization within the "Great Mystery" to gain deeper access to healing energy, we as practitioners commonly *claim* to treat patients *holistically*, offering simultaneous treatment of mind, body, and *spirit* levels because we see them as *one*. However, the rush to market our professional treatments within the current healthcare system does not allow for questions into the deeper *Why* of it all—or any inquiry into the meaning of our journey together—and what part, if any, that our traditional medicine will play in the larger picture of *integrated* medicine. Use of a biomedical foundation to validate what we do, in order to identify it as a "billable procedure," is usually the first order of the day. Is there any part of that approach that focuses on the *spiritual*? What is the meaning of a "spiritual life" in "medicine"? Equal concern will be given here to the analysis of these questions, as well as the question of *how* we educate ourselves to consider this mind-body-spirit tradition.

Currently the United States is home to one of the most expensive *healthcare* systems on the planet. Conventional medicine, with its gauntlet of

"excellence in all things all of the time" strives to maintain its preeminent position, with one negative by-product being the upward spiral of dollars required to deliver it. The system, while providing a level of *care* to a broad spectrum of our society, is fueled largely by profit margin, and survives essentially due to the individual *neglect* of mind, body, soul, and spirit, as well as the unprecedented levels of stress which accompany our lives. *Care* (Perez, 2004) is a qualitative concept in this case, a quality of life (QOL) issue. Thus, creation of an integrative medical system is a significant concept well worthy of our attention for many reasons, which increase dramatically if we wish to have a determining role in what part OM will play in the integration process and its development.

Within the DAOM program's Integrative Medicine component, the concept of spirituality in medicine was introduced in a series entitled *Integrative Pain Management*. In these meetings, questions were raised regarding the concept of *spirituality in medicine* by a number of the guest speakers. During this seminar-like opportunity, we were able to see/hear what variable services the guest speakers currently provide to those who can afford healthcare in Los Angeles. Here in L.A., there seems to be a new *hybrid* medical practitioner, trained primarily as an allopathic physician who is also willing to discuss possible "alternatives" with the patient, thereby engaging the *concept* of Integration. The remaining question is how determined they are to develop such a system. It appears at this point the term "Integrative" is used to provide some neutral ground between allopathic/bio-medical practitioners and all other providers offering so-called *alternative* answers to functional healthcare. Additionally, due to their continued *internecine* struggle with the HMO's/insurance companies for market share, these physicians, according to Dr. R.N. Remen, in her 2001 paper entitled *Recapturing the soul of medicine: physicians need to reclaim meaning in their*

*working lives*, have discovered a loss of connection to "Soul." In the interest of professional *survival*, many in conventional medicine are trying to "incorporate" other modalities, such as acupuncture, to "increase the quality of care," thereby continuing to control the "medical" field. Others, like Remen, want to find light in the dark tunnel that conventional medicine has become.

In the Integrative Pain Management segment, a number of presenters, particularly those of allopathic medical background, claimed an interest in *spirituality in medicine*. One of the guest speakers, Dr. James Gagné M.D., originally planned to offer a full lecture on that topic. Verbal ownership is also made of this elusive dynamic by practitioners of OM/TCM. The basic idea is that the energy carrying us forward in our life is considered to be most authentic if based on, or connected to, a "spiritual" or *higher* energy. Many systems of thought have been conceived to help bring *meaning* to our lives and our daily work; mostly they are *religious* in basis. Of late there is realization, as noted by Dr. Remen (2001), that within the current version of our intensely impersonal and competitive medical system science and technology are not adequate to meet all of the consumer demands for health, namely, the more complex qualitative notion of *healing*. Previously, concepts of healing and spirituality have not been recognized by medical science, and there is now a demand for an expanded scope of medicine to include spirituality. They are, like Dr. Gagné and Dr. D.P. Sulmasy in his 1999 journal article, asking: *Is medicine a spiritual practice?* Or, what in medicine *is* spiritual?

Dr. Gagné considers spirituality in medicine an area of importance on his website (<http://drgagne.com>), which we were asked to visit before he spoke to us. There he presents a non-denominational concept of spirituality, "mindfulness," which is a concept that has been borrowed from spiritual

teachers who are most often Buddhist. In this case it is garnered for the treatment of pain and addiction, but it is also seen in various types of psychotherapy. For these more prosaic purposes it has been turned (Epstein 1999) into a stress management tool. Though it is wonderful in concept, this use of "mindfulness" could also be viewed as conventional medicine's latest gambit to keep their piece of the pie intact. By suggesting use of this "mindfulness" technique for physical healthcare they are *conditionally* usurping philosophical ideas from traditional *medicine such as ours* that we have "abandoned" in our efforts to be part of the "complementary care team." This helps to maintain conventional medicine's position as the complete arbiter of what constitutes healthcare.

We all want solutions to our problems as well as a feeling of deeper meaning in our life, but the collective ideas of what that means are wildly different. It is a commonly held belief that there is a "spiritual" energy/entity which, if we can contact or connect to it, will then bring us closer to our desires, thus increasing our capacity to treat more people, to gain more knowledge, to make more money, etc. But what do we actually *do* to access that energy? Do we make a web site? A phone call? Should we send flyers, flowers, or emails? Is it better to go to a church/temple/mosque to *be* more close to this special energy? Or, do we go within; if so, how?

On his web site Dr. Gagné suggests meditation as one possible way to make that connection, and he describes various methods. Since treatment of pain was the primary focus and specialty interest of this DAOM degree program, perhaps his expertise in pain management could provide us further insight? He offered to talk on several subjects, including spirituality in medicine, and he gave the opportunity to vote on the selections. Unfortunately, few voted for this, in favor of other topics, which prevented the group from having the opportunity to hear/discuss what he would have to say

on spirituality. This means that, despite intentions to the contrary, it was unheard.

Of course we in OM/TCM are not alone in this situation; many people are decrying this lack of interest in "spirituality in medicine" from both sides of "the aisle." But who would the digital database show as spending more time and effort in the quest for this elusive quality of *spiritual*? Using Dr. Gagné's website, a couple of search terms were formulated to see what might turn up in the public discourse. PubMed was searched with the term "spirituality in medicine" derived from Gagne's website. This produced 545 hits. Many of those citations were highly relevant to the topic. In total about 36 applicable citations were collected on spirituality in medicine, the present state of medicine, and/or about the mind-set(s) of those *people* working to help others in medicine. There were even some who distinguished "healing" from "curing," which previously was a rare distinction in allopathic circles (Novack, Epstein, & Paulsen 1999).

One of the papers (King, et al. 2005), entitled *Spirituality & Health Care Education in Family Medicine Residency Programs*, was a survey study done in 138 allopathic residency programs asking various questions about *spirituality* and its importance to medical students. Also included were some questions on how much time was allotted in their program for actual *learning* about "spirituality." One could assume that the questions were probably based on a *religious* understanding of spirituality most likely derived from within the Judeo-Christian viewpoint. 92% of the survey respondents (directors of said medical residency programs) stated they thought that some education on spirituality was important and even *necessary*, for medical education. However, in contrast, only 31% of those programs actually devoted any significant curriculum *time* (an avg. 6 hrs per 2-3 yrs) to the topic. Nevertheless the King, et al., findings were highly interesting and applicable to

any advanced learning program--for instance our OM doctoral level education programs. Based upon this information, it was decided to use the same search terms to conduct an impromptu survey using search engines of TCM/OM websites to discover what information concerning *spirituality* exists there and to make a comparison of the findings.

The reason this question is appropriate for OM/TCM advanced education is as previously stated: OM lays verbal claim to treating mind-body-*spirit* as one of its *core* therapeutic premises. As such we in OM higher education should be able to *ask* how we do this. If indeed we do treat spirit-mind-body as one, how can we endeavor to learn more about it? Is there room for investigation within our advanced OM education programs of this area which we have historically claimed as ours? Currently we have 1 or 2 classes in the Master program to introduce "Oriental Philosophy" as the theoretical spiritual *foundation* for our practice. What do we have now for the Doctoral level? Along those lines can we reflect on how many of us have a *regular* "practice" for instance in Tai Qi, or regular meditation "exercise" of some sort? These examples would be very introductory prerequisites to address more advanced levels of "spirituality."

To see how we in the OM community compared with conventional medicine, the following sites were searched with the terms "spirituality in medicine" as well as a second search with term "healing." Blue Poppy, the Institute of Traditional Medicine (itmonline), AcupunctureToday.com, and Acupuncture.com.were searched on 1/1/06, by entering their web addresses in the Google search engine.

## **Results:**

1. *Blue Poppy*--search terms "spirituality in medicine" gave return of: "no matching records found." Search terms "healing" provided a large number of returns but they mostly pertained to, for example, fracture healing, as well as several with titles like "herb toxicity." The directional nature of the search

question(s) was not clearly understood.

2. *Itmonline*--search term "spirituality in medicine" provided 3 pages of hits. The first was on a Native American healing ceremony, the second was about TCM treatments for MS, and another was one on coffee and its use by monks throughout the world to help them stay awake while meditating. While this last one would make coffee a spiritual *tool*, it is not really about the *study* of "spirituality."

The search term "healing" gave 143 pages of hits, again beginning with the Indian ceremony link. The next four choices seemed to be from a Catholic exposition on *prayer* entitled "Body Theology," which appears to be a transmission of the story of Jesus rather than an investigation into spirituality. After that the list of returns outlined the basic biological repairs that TCM treatment offers.

So, whereas there were some examples found on what could be thought of as "spiritual" information, there were really no posted citations looking more deeply into the question of what *is* spirituality, or what place it has in OM/TCM.

3. *AcupunctureToday.com*--search with "spirituality in medicine" returned 11 hits which mostly appear to be word-as content, thereby providing data showing mention or use of the word "spirituality." The number one hit was an article from *AcuToday* entitled *Is Chinese Medicine a Religion?* by B. Carter and Z. Rosenberg. This article suggests that Acupuncturists should leave their "religious" beliefs at home to help "mainstream" our medicine. They state that the *expression* of religion should be done somewhere other than the office because the sensitive nature of *religious* beliefs can interfere with treatments, and further ask *Is "Qi" spiritual? That answer appears to be "No, because if it is Christians might be offended to know that . . ."*

This type of article just muddles the thinking on *spirituality* because it confuses "spiritual" with "religion" and/or "religious beliefs." It should be noted here that it was the *AT server* that selected this article in response to the search terms, and maybe the authors have no intention to discuss *spirituality* beyond asking about the spiritual nature of "Qi" and discussing the place of *religion*, as distinct from spirituality, in the TCM office. Secondly, the article is applying conventional medicine's standard for its definitions of professionalism: that our professional "product" should be delivered in a non-denominational manner.

Whether one agrees or disagrees with the opinions about the place of *religion* in the OM/TCM office, the Carter/Rosenberg article is not really a *dialogue* on "spirituality" in our medicine; it is instead a *polemic* on the proper place of *religion* in our profession. Therefore it does not provide clarification to this investigation of *spirituality in medicine*.

A few of the other AT.com hits were announcements for seminars which again are the word-is-content type. Included was a review of a book by L. Jarret which described OM cosmology.

A search for the term "healing" brought 1418 hits from the AT.com engine, but quick review showed the first few to be the basic word-as-content type citation, along with ads for TCM conferences, and some articles written by individuals. The articles were mostly promotional in nature and not an investigation into what specifically constitutes "healing" in our medicine or to *healthcare* in the sense of a mind-body-spirit continuum.

4. *Acupuncture.com*--the search term "spirituality in medicine" provided result of: "no matches found." The search of term "healing" provided a few results: one of them was an article by L. Jarret entitled *Nature of cure & healing* which referenced the topic of mind-body-spirit in terms of application to an OM treatment, which is again a recount of our viewpoint rather than a *look into it*. Also there was a brief article by B. Eichelberger on *What is Qi Gong?*, which was a promotion for his practice. After that the relevance percentages for the search returns dropped significantly.

5. *Entrez PubMed*--searched with terms "spirituality in medicine" returned 545 hits on 28 web-type pages, 7 of which were reviewed. Thirty-six relevant citations and 4-5 full text articles were downloaded. These were discussions of such question(s) as, what (Hiatt, 1986) is the spiritual in medicine? What (Torosian & Biddle 2005, Zinn 1993, Suchman & Matthews 1988) is healing and the role of the physician in healing? Is (Dijoseph & Cavendish 2005, Bishop 2003, Byrd 1988) medicine spiritual and/or what is the role of prayer in helping people heal? What (Egnew 2005, Gadow 1991, Younger 1995) is the nature of suffering in the human experience? These were challenging, core issue questions that were examined with formal methods.

To maintain the impartial intent of this project, PubMed was also searched with the term "healing." This search returned 88,490 citations on 4425 web pages; seven pages of them were scanned. Almost all referenced fracture healing, wound healing, or basic biological repair. However, at the top of page 2 in the twenty first citation, there was a 2005 article entitled *Sensibility to the Unconscious (Balint approach)* by Supe, S. et al. The article examined the patient-doctor interaction as an important part of the healing process; an unconscious dynamic provided by the physician, the medical potency of which should be understood by the physician. Cited in #83 is a 2006 study entitled *Effect of belief in 'psychic healing' on self-reported pain in chronic pain sufferers*. The basic finding was that psychic healing didn't work, but it also found that if one believed in its efficacy, it would improve treatment outcomes. In essence, the term "healing" was largely not understood by the Pubmed search engine.

## **Discussion:**

The intention here is not to imply that the exploration of spirituality is mutually exclusive to OM, or to cast stones on these authors or web pages. This informal study of web data indicates that, at least within the "public face" of the OM community, there is a larger and mostly *untouched* question as to what is the deep "spiritual" core of our medicine. We need to ask ourselves: what is the essence of our *medicine*? What is the nature of our collective focus as we practice? To be specific: are we indeed advocating for the *classical* treatment of the mind-body-spirit continuum or are we drifting toward the relatively mechanical single-point *specialties* of allopathic medicine? How should the "spiritual" be approached in our profession and in higher OM educational programs?

Based on the findings of this review, *some* allopathics are doing a better job with the actual *investigation* of spirituality in medicine, at least in the public forum. It seems, according to the data, that we are relatively asleep at the "spiritual switch." For example, if our friends in conventional practice are staking web page space to discuss this topic while we of the OM/TCM genre, in the interest of *Integration*, are mostly examining herb-drug interactions, we are shifting our focus from what we are trained to do and instead trying to fit into an allopathic hierarchy. Ultimately we are also

missing an opportunity for deeper exploration of one of our medicine's *base* premises: the treatment of mind-body-spirit simultaneously. We make the claim of holistic care for the mind, body and spirit, yet the evidence shows there isn't much willingness on our part to investigate how this "Great Mystery" is accessed by our use these ancient medicine techniques. If we made no such assertion, there would be no need to investigate *how* we do this. Are we willing to further investigate spirituality in our medicine and our educational programs, or will we look towards another system for our answers?

Progress, or change, is inevitable, and the concept of *integration* is important and worthy of our full attention. The question of spirituality in medicine is only one key point to illustrate issues uncovered by the *interaction* of two systems of *medicine* that may be in the process of integrating. We need to be aware of how that process is conducted, particularly with regards to concepts such as spirituality, so that we do not use these concepts carelessly; without regard for their meaning or effect. In addition, if we surrender some of the fundamental parts of our traditional medicine in order to grasp the "proven" bio-medicine—especially for the financial benefits that billable "procedures" bring—we in OM are following the allopathic path, and not our own. We cannot continue to say that we provide *holistic care* without a willingness to investigate *how* we provide this. In addition, we need to be mindful that our attention not be taken from the *practice of medicine* in favor of the dollar driven *business of medicine*.

Objectively speaking the medicine carries us, we don't carry it. Similarly, the "profession" is carried by OM's classical insights to human healing which are still in use today. Therefore, shouldn't we try to comprehend the whole insight, not just the part that we can "prove" or the "billable" part? If we claim as practitioners that we are "spiritual" by our very

nature, or that OM or "Qi" is *inherently* "spiritual," or that spirituality is too complicated to *study*, or too private a matter to include in medicine, these evasions may cost us dearly because it indicates a lack of willingness to look "inside" our medicine.

So how can we unite and bring this *ALL* together? How can we join our collective but now separate "bio-spiritual-medical" efforts to help people coalesce into one Integrative force? And further, how to bring each of our lives, our work and play, into one singular piece; to have it be "connected" to the greater whole, to have it "be spiritual" in a clearer fashion--and with that to recapture the soul and direction of our medicine? The allopathic experience of soul disconnection should come as no surprise; it certainly has squandered a great deal of talent from both sides of the medical "aisle" which could instead be used for helping others. Must we follow the directive of conventional medicine, or can we generate a new system from within our unique medical style —and align ourselves with allopathic medicine as independent but integrated partners? Might this integration process be an opportunity for profound learning? We would benefit from asking ourselves these questions, and also how there can be an Integrative medicine system if we don't know our own table and its place settings well? Ultimately we need to ask: are we in OM concerned with what is the *spiritual* in our medicine and its education? Can we try to understand its purpose or meaning within our daily lives? Or is it indeed something more – is what we call spirituality actually the *Unknowable*?

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