

A Discussion of Spirituality and the Teaching of Spirituality in an Osteopathic Medical Curriculum

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“All His [God’s] works, spiritual and material are harmonious. His law of animal life is absolute. So wise a God had certainly placed the remedy within the material house in which the spirit of life dwells. With this thought I trimmed my sails and launched my craft as an explorer.”¹

Abstract

Spirituality has been woven into the tapestry of osteopathic philosophy since its inception. Andrew Taylor Still, founder of the osteopathic profession, viewed spirituality not as a hypothetical abstraction, but as an inseparable, palpable part of body unity, which he described as mind, matter, and motion. Dr. Still said, “God manifests Himself in matter, motion, and mind. Study well His manifestations.”² By experience, physicians are well aware of the inseparable nature of spirituality and health. As osteopathic educators, we discuss with our students the importance of evaluating the patient’s mind, body, and spirit, yet the question arises, do we provide them with specific information on just how this is accomplished? Giving only superficial references to spirituality in the curriculum deprives students of the essence of osteopathy. It is our obligation to provide them with the vision of the osteopathic profession including its spiritual heritage. This would be in keeping with Dr. Still’s original concepts.

This paper will review the role of spirituality in osteopathic medicine. The author will first attempt to define, in its broad nonsectarian form, the mysterious word “spirit” as de-

scribed in many forms of healing arts. Second, he will explore Dr. Still’s osteopathic philosophy with emphasis on his frequent references to spiritual concepts. From that vantage point the writings of Dr. William Garner Sutherland and his students in osteopathy in the cranial field can be viewed as a natural outgrowth of osteopathic philosophy. Finally, the reader will look at spirituality as it relates to contemporary osteopathic medicine and provide suggestions for further integration of spiritual concepts into the curricula of our osteopathic colleges.

A Discussion of Spirituality

The word “spirit” means the breath of life, the animating principle giving life to physical organisms.³ Spirit has been described as that aspect or essence of a person (soul) that gives one power and energy and motivates the pursuit of virtues such as love, truth and wisdom.⁴ Spirituality may be viewed as an internally focused belief and relationship with the transcendent/higher power/God.^{4,5} It contributes to a person’s sense of wholeness and wellness. Spirituality is described by some as the ability to find

peace and happiness in an imperfect world.^{6,7} Spirituality has to do with one’s search for the meaning of life and is central to personal identity.⁸ It refers to the inner core or essence of human beings.⁹

Elements of spirituality include a sense of coherence offering meaning to human existence, a feeling of transcendence, a sense of connectedness, and a conception of spiritual energy. This spiritual energy has many names in various cultures such as prana, ch’i, ruach, spiritus, breath of life, and the life force and has been measured with instrumentation by Dr. Harold Saxton Burr and Dr. Valerie Hunt.^{10,11} It is believed by many that all diseases are caused by a break in the flow or disturbance in the human energy field. This disturbance is transferred to organ systems causing functional and ultimately destructive changes.¹²

The terms “spirituality” and “religion” have been used interchangeably and there is no consensus about boundaries between them. They are not, however, synonymous terms. Religion implies a specific set of beliefs about a higher power often associated with particular language to describe the spiritual experience and a community sharing beliefs, rituals



and teachings.¹³ Religion may be an expression of spirituality but not all spiritual people are religious.¹⁴ Spiritual development is analogous to a jigsaw puzzle in which no one puzzle piece is more important than any other and the purpose is for them to be joined into a unified whole.¹⁵ Religion may be likened to the edge and corner pieces of the puzzle; if they are joined first they provide a framework and focus for spirituality allowing each puzzle piece to join more efficiently. This framework may also allow one to visualize the unified whole before all pieces are in place. Spirituality may or may not be expressed in religion. The extrinsically religious person may use religion as personal security, self-justification or sociability while the intrinsically religious person internalizes religious beliefs and lives by them regardless of social pressure or possible consequences.¹⁶ "Religion is the bridge to the spiritual, but the spiritual lies beyond religion."¹⁷

Ancient Healing Traditions

Before reviewing the spiritual aspects of Dr. Still's osteopathic philosophy, it would be helpful to consider some of the ancient healing traditions in order to better understand how nineteenth century western medicine evolved. A broad survey of anthropological and medical literature shows that for centuries, cultures worldwide have made the cure of the body and soul a fundamental, central expression of their religious beliefs and attitudes towards the powers of the universe.¹⁸

Look first at shamanism, from whose personage the modern doctor descends. The shaman distinguished themselves through altered states of consciousness, the shamanic journey, in which they would obtain power or knowledge in order to help the community, or to provide healing. Disease

was considered to arise from the spirit world and the purpose of shamanic healing was to nurture and preserve the soul. Shamanic methods of diagnosis and healing are similar from culture to culture, i.e. the shaman enters the patient, becomes the patient and restores the sense of connectedness with the universe. The shaman viewed health as an intuitive perception of the universe and all its inhabitants as being one fabric. Any distinction between body, mind, and spirit was illusory. Body was mind and mind was spirit.¹⁹

Greek thinking, as propagated by Plato, recognized the need for curing the soul in order that its body might heal. He viewed healing as a way in which divine creative energy seized and possessed human beings. He stressed healing disease by treating the whole person. By the fifth century B.C.E. Greek medicine as articulated by Hippocrates was taking the form of science as well as craft. Disease was explained in terms of natural causes rather than being based on mythology. The concepts of mind and body became distinct entities. In the fourth century B.C.E. a cult was formed to worship Asclepius, the Greek god of healing. The Temple of Asclepius, became an institution of refuge and healing. The sick person came to sleep in a bed within the temple called a "clinic" and asked for a vision or dream from the gods to show them the way to healing. Various symbolic acts contributed to the healings, such as animal sacrifice and ritual bathing. One ritual involving harmless snakes is still symbolized in the medical profession today by the caduceus. Around 300 B.C.E. Roman medicine was heavily influenced by the cult of Asclepius, and as a result, astrology, magic, herbs, divination, and purification all became commonly used healing techniques.^{20,21}

Judaic religion stressed the importance of wholeness of human beings and emphasized health and healing.

In fact, healing miracles were expected of all true prophets.²² Jewish ideas on healing as expressed in the Torah and later in the Talmud, shared with Egypt and Mesopotamia the association of disease with the wrath of God. Suffering could be a godsend and a trial.²³ If one turned away from God, for example, in such behavior as gluttony or sexual promiscuity, He would bring curses which would adversely affect the health of mind and body.²⁴ While blood was probably seen as the vehicle of the soul, life lay in the breath.²⁵ According to the Kabbalah of Jewish mysticism, the true nature of divinity was seen as unity. This esoteric discipline of ancient origins saw God manifest symbolically as ten sefiroths, or "numerations," depicted as a tree with roots in the depths of the Creator and branches in the created world. The Divine essence of God, the En Sof, was likened to sap running through the branches of a tree giving it life.²⁶ It was also described symbolically as Absolute or Divine light taking on different qualities or colors within the sefiroths and the created world.²⁷

From 313 C.E. when emperor Constantine established Christianity as the official imperial faith of the Roman Empire, the naturalistic basis of Hippocratic medicine was transforming into the idea of healing being associated with religion. Religion had always shared common ground with medicine. Etymologically the words "holiness" and "healing" stem from a single root; the idea of wholeness. In early Christianity, more demarcation between body and soul, subordination of medicine to religion, doctor to priest was seen. Christian views of sickness drew from various traditions absorbing aspects of eastern ascetism, which honored soul or spirit above flesh as well as Jewish traditions.²⁸ Healing was often associated with a sacramental approach where some word, laying on of hands or material elements such as oil or wa-

ter were believed to convey the power of spirit through the healer. Words or touch were seen as outward manifestations of spiritual energy.²⁹ By the fifth century C.E., asceticism and monasticism were prevalent Christian practices and these communities were becoming the predominant providers of medicine in Europe and virtually all physicians were from the ranks of clergy.²¹

Secular European medicine began in the late Middle Ages but under strict control of the Roman Catholic Church. What followed was five hundred years of tension between the church's authority and efforts of secular medicine to break free. After the Protestant Reformation in 1517 and the French Revolution in 1789, the church was losing authority over the population at large, marked by a breakdown of the power of religious orders over health care systems. By the nineteenth century, scientific method was the foundation of the medical model. What began as the shamanic worldview was challenged by Newtonian-Cartesian dualism that divided the individual into body, mind, and spirit.²¹

Spiritual Writings of A. T. Still and W. G. Sutherland

Andrew Taylor Still formulated his philosophy of osteopathy when the Spiritualism movement was enormously popular in America. Spiritualism joined transcendentalism with the teachings of Emmanuel Swedenborg, a Swedish scientist and mystic. Spiritualist philosophy included a reverence for nature, belief in the divinity of human beings, and emphasis on the intuitive powers of the mind. Dr. Still turned to Spiritualism around 1867, and it was to constitute a prominent and lasting place in his thinking. In response to what he considered hypocritical behavior of preachers of his time he became

outspoken in his disbelief in a personal God as well as his distaste for organized religion.³⁰ He claimed to see an aura around his patients or vibrations emanating from them, which assisted him in diagnosis.³¹ He once told an early osteopath, "You do not need a medium to get into communication with the Infinite. You have this Infinity in yourself... recognize [it] and cultivate it."³²

It is likely that Dr. Still was influenced as well by Native American spirituality while working with his father at the Wakarusa Mission in Kansas. It is known that he assisted his father in doctoring the Shawnee for a variety of infectious diseases and studied closely the Shawnee's own medical treatments, later writing that they were no more ridiculous than that of contemporary physicians.³³ It has also been theorized that he may have adopted Native American bone setting techniques to develop osteopathic manipulative treatment.³⁴ Although the parallels of Native American spirituality and Dr. Still's osteopathic philosophy are apparent, the actual extent of its influence upon his own spirituality is uncertain.

Dr. Still stated that he did not invent osteopathy in 1874. Instead, he discovered a universal truth; the law of matter, mind, and motion. This triune nature of mankind was also described as a physical body, a mental body, and a spiritual body. He likened the human body to a machine run by an invisible, calm force called life and considered this life force as an animating principle responsible for uniting the terrestrial or material body with spiritual energy. The union of these forms creates a human being. Once joined, the material body is empowered with motion while the celestial body receives knowledge (mind) and wisdom (spirit). The connecting thread in this union of physical, mental, and spiritual bodies is the life force. The synergism of this relationship cannot be over emphasized.

There is a transmutation of physical matter into a life substance.³⁵ Dr. Still called the body a second placenta, which was made for creation of a greater being. He believed that death is only birth from that second placenta so that one may enter a higher school and continue spiritual development.³⁶ Speaking of these bodies as separate entities is artificial. Dr. Still clearly stated that the physical, mental, and spiritual bodies were an inseparable whole inclusive of the rays of God's wisdom. He considered human form to reflect divine form when it is exhibiting free, unimpeded motion, and motion as the physical manifestation of the life force.³⁷

Dr. Still saw human beings as a miniature universe and understood the interconnectedness from worlds to atom. He introduced the concept of consciousness at the cellular level in his description of blood corpuscles being endowed with the mind of God, each one knowing just what is expected of it.³⁸ This concept of the universe as a complicated web of relationships between various parts of a unified whole bears a striking resemblance to the beliefs of Eastern mysticism as well as to the modern theories of quantum physics.³⁹ Dr. Still believed that sickness was an effect caused by obstruction of flow of the life force.⁴⁰ In osteopathic treatment the physician was restoring the unity of life and matter so that life-giving currents could have free play. He encouraged the physician to look for life to appear when proper connections were made and in so doing to find health in the patient.⁴¹

Dr. Still's osteopathic philosophy is remarkably similar to the vitalistic philosophy described by Dr. Domenick Masiello:

"Vitalism maintains that there is in living things the presence of an entity or organizing principle that imparts powers not possessed by inanimate objects and which is not reducible to

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the mere sum of its parts of the parts of the living system. The vital entity or principle that animates an organism is called Life. Life is not made up of nonliving substance and Life is capable of an existence apart from the organism."⁴²

From Dr. Still's spiritual concepts, one enters into the evolution of his philosophy through the writings of Dr. William Garner Sutherland and his students of osteopathy in the cranial field. As osteopathy grew, it became apparent to Dr. Sutherland that it had lost the spiritual essence of Dr. Still's teachings. Through metaphors such as the Tide, the Breath of Life, and liquid light, inherent cranial motion was seen as a materialization of what Dr. Still called life, or the life force. This Intelligent potency was thought to be found in cerebrospinal fluid and considered as unerring with a tendency towards normality.^{43,44} Dr. Rollin Becker taught that life may be experienced as the "primary physician within" which was always expressing health.⁴⁵ He felt that when palpating the primary respiratory mechanism the physician was in direct contact with a physical manifestation of the life force. Palpable change in physical form came from this spiritual body. Dr. Sutherland described a process of transmutation which is a rhythmic balanced interchange between the Breath of Life and physical matter. He offered no explanation of the nature of this interchange.^{46,47} It calls to mind Dr. Still's description of cerebrospinal fluid as a river of life for maintenance of health and that by taking matter down to the point where it is no longer divisible it becomes a fluid of life which easily unites with atoms.⁴⁸ This fluid may be considered as that which flows through the electromagnetic field of the body.⁴²

Quantum physics has shown that at the subatomic level matter is actually energy in wave-like patterns of probabilities of interconnection.^{15,49,50}

Matter disappears into nothing but oscillating fields and waves of rhythm.⁹ The universe is a continuous field of energy in which matter is constantly being created, transmuted, and destroyed, and where all parts are interconnected.¹⁵ In reviewing Dr. Still's and Dr. Sutherland's spiritual philosophies attention has been focused on the element of spiritual energy. While this is not the only element of spirituality, it is certainly the foundation upon which all other elements are built.

Spirituality in Contemporary Medicine

Although western medicine originated in spiritual institutions, ironically, the spiritual dimension of the individual has received the least attention in contemporary western medical thinking.¹⁵ At the same time, in our highly technological culture, public opinion is showing a heightened interest in spirituality over the last decade. A 1996 poll of 1,000 U.S. adults showed 79% believed that spiritual faith can help people recover from disease and 63% believed that physicians should talk about spiritual faith with their patients.⁵¹ In a survey of 203 hospital patients in Pennsylvania and North Carolina, 93% believed in God and 94% thought that spiritual health was as important as physical health. Seventy percent said that physicians should consider their patient's spiritual needs.⁵²

Like the general public, medical communities are becoming more interested in spirituality. Of 290 family physicians surveyed in 1996, 99% were convinced that religious belief can heal and 75% believed that prayer promotes patient recovery.⁵¹ The literature shows consistently positive relationships between measures of religious commitment and health, such as lower blood pressure, lower rates of depression, stronger immune systems, longevity, better health outcomes after physical

illness, healthier life styles, and a stronger sense of well being.^{53,54,55,56}

The medical community is extensively studying prayer and meditation. There is considerable overlap in their definitions. For example, prayer may be viewed as a matter of the heart or a person's attempt to communicate with the Absolute and, in this regard, prayer and meditation show more similarities than differences.⁵⁷ Two of the most common forms of prayer are intercession – asking something for someone else; and petition - asking for oneself. The effects of intercessory prayer were studied in a random double blind study of 393 coronary care unit patients. One hundred ninety-two patients received prayer from participating intercessors praying outside the hospital and 201 patient controls received no prayer. The prayer group had a significantly lower severity score and required less ventilatory assistance, antibiotics and diuretics than the control group.⁵⁸

Myriads of forms of prayer exist including confession, forgiveness, adoration, thanksgiving, invocation and lamentation. Prayer has been called the most fundamental and primordial language humans speak. "Prayer starts without words and often ends without words."⁵⁹ Dossey describes prayer as "empathetic, loving, compassionate, intentionality."⁶⁰ Some people may not pray in the conventional sense, but live in a deeply interior sense of the sacred or what has been called a sense of prayerfulness; simply being attuned with a Higher Power or a feeling of "unity with the All." Prayerfulness is a willingness to stand in mystery and, in so doing, tolerate the ambiguity of the unknown.⁶¹ Many experiments in prayer over the past three decades have involved people of various religious persuasions. There appears to be no correlation in private religious affiliation and the effects of prayer. Although people attempt to separate prayer and meditation, the human body

appears to be wiser and less dogmatic.⁶²

Meditation produces a state of deep relaxation and, at the same time, a wakeful and highly alert state. Basic types of meditation are as diverse as their cultural origins. In ancient Buddhist practice, meditation is described as mindfulness. From the Buddhist perspective, the day-to-day waking state of consciousness is seen as being limited and resembling an extended dream rather than wakefulness. Mindfulness implies paying attention to the present moment and nurturing an intimate relationship with it. This form of meditation is fundamental in Buddhism, Taoism and yoga and permeates the works of people such as Emerson, Thoreau and Whitman and Native American wisdom.⁶³ LeShan has described several paths of meditation including a path through the emotions which involves ceaseless striving on the ability to love and an understanding of the importance of love in approaching God. This is seen in the paths of Hasidic mysticism and in that of Christian monastics. Meditation through routes of the body involves learning to be aware of one's body and bodily movements to reach a heightened awareness, as represented by Hatha Yoga, T'ai Chi, Qigong, Dervish dances of Sufi mystical tradition and western traditions such as the Alexander technique. Meditation may also involve the path of action in which one learns how to perceive and relate to the world during the performance of a particular skill; examples being aikido and karate in Zen tradition, rug weaving of Sufi tradition and singing and praying of Judeo-Christian tradition.⁶⁴ Meditation has been said to open the mind to energy of the Higher Self. A mantra, or sacred word, is the repetition of a word or phrase to clear the mind of conscious thought lifting consciousness to a higher spiritual level of being.^{65,66}

Mantra repetition, as in transcendental meditation, has been described

as passive meditation whereas active forms of meditation include creative imagery and visualization.⁶⁷

Meditation may be considered a serious reflection involving not only the mind but also the heart and indeed one's whole being. Meditative thought leads to internal prayer and in so doing culminates in contemplation and communion with God.⁶⁸ The mechanism of action of these varied disciplines of prayer and meditation may be similar producing the "relaxation response."^{69,70,71}

Studies of transcendental meditation show significant declines in heart and respiration rates, renal and hepatic blood flow and reduced oxygen consumption.⁶⁹ Benson documented that, during meditation, Tibetan monks could dry wet icy sheets on their naked bodies in temperatures of 40 degrees Fahrenheit.⁷² A study has shown that nursing home residents who had learned transcendental meditation performed better on many measures of learning and mental health than did a control group.⁷³ Kabat-Zinn has studied mindfulness meditation on generalized anxiety disorder and of 22 subjects, 20 reported decreased anxiety/depression scores.^{69,74}

Spirituality in Osteopathic Medical Education

From its beginning, osteopathic medicine has been a patient-centered rather than a disease-centered model. Allopathic medical education has been shifting its focus towards the patient-centered model in the last few years. Courses in spirituality and medicine which have recently been developed in many medical schools help students to learn to compassionately listen to their patients, and to care about their suffering, beliefs, fears, hopes, and those things giving meaning to life.⁵³ A recent pilot program of 66 pharmacy students showed 94% of students felt a knowl-

edge of spiritual belief is important in caring for patients.⁷⁵ Drs. Wallace and Morris of the University of Health Sciences College of Osteopathic Medicine have developed an excellent course titled "Spirituality in Patient Care" with the objective of making students more aware of the interaction of a patient's spiritual beliefs and healing, obtaining a spiritual history, and being aware of spiritual resources and support systems for patients.⁷⁶

Courses on spirituality often reflect particular philosophies and curricula of individual schools, but they often share some key concepts:

- Spiritual assessment as part of the history and physical
- Review of research in spirituality
- Chaplain and other spiritual counselors as members of the health team
- Emphasis on communicating compassionately with the chronically ill
- Students exploring their own belief systems
- Major religious traditions are reviewed and how they may affect health care choices and coping skills.⁵³

Teaching Concepts of Spirituality in an Osteopathic Medical Curriculum

As an example of how to introduce students to the topic of spirituality in osteopathic medicine, the author offers a synopsis of his one-hour lecture at the West Virginia School of Osteopathic Medicine on this subject. In relation to the previous discussion, the lecture content will necessarily be redundant. This material may be viewed only as a starting point for further discussion and integration of spirituality into osteopathic medical curricula and it is his hope that this will



stimulate the interest of other osteopathic educators to incorporate such concepts into their own curricula.

The objectives of the lecture were as follows:

1. Definition of the word “spirit”
2. Discussion of the elements of spirituality
3. Review of spiritual aspects of Dr. Still’s philosophy
4. Discussion of how spirituality and religion relate to contemporary osteopathic medicine
5. Addressing spiritual issues of patients and physicians

1. Definition of the word “spirit”

Spirit has many definitions in various cultures, such as prana (Ayurvedic), ch’i (Chinese medicine), ruach/wind/spirit (Jewish mysticism), Spiritus/pneuma/breath (Galen), vital force (Hahnemann), Life (A.T. Still, MD), Breath of Life (W. G. Sutherland, DO), Life Force (Robert Fulford, DO). Spirit is defined as the breath of life, the animating principle giving life to physical organisms.³ Dr. Still believed the human body consisted of the material body, the spiritual body, and the mental body which was “far superior to all vital motions and material forms, whose duty was to manage the great engine of life.”⁷⁷ He considered that life was capable of existing apart from the organism, as it was more than just an organizing principle. Life had purpose, could communicate with each of us and was ever present. Life was more than simply animation of nonliving substance.⁴²

2. Discussion of the elements of spirituality

Spirituality has to do with the spirit or soul and gives power and energy, motivating people to pursue virtues such as love, truth and wisdom.⁴ It is the ability to find peace and happiness in an imperfect world.^{6,7} It con-

tributes to a person’s sense of wholeness and may be considered an internally focused belief and relationship with a higher power.^{4,5} Spirituality has to do with the search for the meaning of life and is often central to personal identity. It is manifested in the experience of joy, love, forgiveness, and acceptance. Elements of spirituality include meaning and purpose to life, transcendence, connection with others, and the concept of spiritual energy. What is the effect of illness on the meaning and purpose to life? It may lead to a spiritual crisis experienced as meaninglessness and hopelessness. Illness may challenge the person’s sense of self and world by a change of body image, pain, or interpersonal relationships. It may challenge a person’s existing perspective on life and its meaning. It may prompt a spiritual journey and be an opportunity to redefine values and to seek out the person’s greater purpose. Patients with chronic pain, for example, have the choices of resistance, submission or transcendence of their suffering. They may seek a part of self that is not in pain and still function and enjoy life.⁸

Transcendence is another element of spirituality and involves a profound and potentially transforming experience. This is evident when patients rise above a limiting condition such as terminal disease so that they feel part of a greater whole.⁸

Another element of spirituality is one’s connection with others. Relationships are fundamental to human experience and contribute to personal resilience. Illness can profoundly affect one’s relationship with others and with God. It may separate the patient from other people so that they experience feelings of alienation, hopelessness and suffering. The doctor-patient relationship involves sharing in the illness experience with compassion and caring and in so doing contributes to the patient’s sense of connectedness. It is a spiritual en-

counter with great healing potential.⁸

The final element of spirituality to be considered is spiritual energy. This is a spectrum of energies often unrecognized by modern scientific methods. It has many names in various cultures such as prana, ch’i, etc. Wellness is considered a balance in this energy field while illness is viewed as blockage of energy flow.⁸ Quantum physics has shown that at the subatomic level and interstellar levels time and space are not absolute. Matter is actually energy in wave-like probabilities and interconnections.^{15,49} The universe is a continuous field of energy in constant flux. The observer and observed cannot be separated. Quantum physics in many ways parallels Eastern mysticism, that is, the worldly aspect is superficial to a more fundamental spiritual aspect.³⁹

3. Review of spiritual aspects of Dr. Still’s philosophy

Now, consider spirituality in osteopathic philosophy as proposed by Dr. Still. He viewed spirituality not as a hypothetical abstraction but as a harmonious, resonant, inseparable part of body unity he called mind, matter (body), and motion (spirit or life).^{78,79} He saw God manifest Himself in these elements and challenged us to study well His manifestations.¹ He saw man as Triune and that the spiritual, mental, and physical bodies are interwoven; not out there somewhere, but intertwined into every cell, every tissue, every organ, every system, everybody. Dr. Still saw life in motion and viewed life much more than simply an organizing principle. He considered life as the essence of wisdom in nature and viewed life and mind as immortal. He called the body the second placenta. All material bodies had terrestrial life and all space had ethereal or spiritual life. From terrestrial life came motion and power and from celestial bodies came knowl-

edge and wisdom. He called the unity of these lives in human beings biogen.³⁵ The implications of his philosophy are profound. It suggests that when a physician touches a patient, he/she is touching the patient's spirit as well as their mind and physical body. This applies to all therapeutic interventions whether it be prescribing medicine, surgery, counseling, or osteopathic manipulative treatment.

4. Discussion of how spirituality and religion relate to contemporary osteopathic medicine

In discussing spirituality, one must also define religion and consider the relationship between the two. Religion is any specific system of belief, worship, conduct, etc. often involving a code of ethics and philosophy. It is not the same as spirituality and there is no consensus about the boundaries between them.¹³ Organized religion is one way of expressing one's spirituality. Medical literature is showing a positive relationship between religious commitment and health. Many religions teach respect for one's physical body. It offers social support and fellowship. In general, religions discourage unhealthy behaviors, such as drug or alcohol abuse, smoking, and risky sexual behavior. Religiousness promotes low risk lifestyles and healthy diets. Finally, it enhances supportive relationships and nurtures a sense of connectedness. Dr. Harold Koenig, Director of Duke University Center For Study Of Religion/Spirituality And Health has published many studies showing the association of strong religious faith and health such as lower diastolic blood pressure, lower rates of depression, better health outcomes after physical illness, stronger immune systems, lower rates of cancer and cardiovascular disease associated with longevity, healthier lifestyles, and a stronger sense of well being.⁵⁶

Now, consider the concept of heal-

ing. The words holiness and healing stem from a single root and express the idea of wholeness. All healing arises from within an individual as osteopathic physicians know the body has the inherent capacity to heal itself. Healing and cure are not the same thing. Healing is not something we can bottle and release on command, but is a process that may take weeks, months, or years. It comes from a spiritual yearning for unity or wholeness.¹⁵

There are spiritual disciplines that may have positive impact on the health of patients. The effects of intercessory prayer will be considered first. Robert Byrd, MD studied the effects of intercessory prayer on 393 coronary care unit patients. Approximately one-half of the patients received prayer from intercessors outside the hospital. The other half received no prayer. The prayer group had significantly less ventilatory assistance, antibiotics, and diuretics. The study concluded by saying that prayer had a statistically significant positive effect on patients.⁵⁸ Dr. Larry Dossey has said, "Love is the most crucial factor identified to account for the impact of prayer."⁸⁰ Meditation is another spiritual discipline shown to have favorable effects on health. The relaxation response developed by Dr. Herbert Benson involves two steps, first silently repeating a word, phrase, prayer, or phrase and secondly focusing on breathing, passively disregarding every thought. This form of meditation has shown to reduce blood pressure, relieve anxiety, control chronic pain, and to offer other health benefits.^{63,70,71}

5. Addressing spiritual needs of patient and physician

How does one facilitate discussions with patients about spirituality? This begins with the spiritual history of the patient being integrated into the history and physical. One can explore the patient's definitions of spirituality and religion. Do they have any

spiritual beliefs and if so are their spiritual needs being met? Determine how their belief system is affected by their illness. Carefully assess whether or not they wish to discuss the spiritual and religious implications of their health care.

One can meet the patient's spiritual needs in several ways. First, simply be trustworthy and kind, treating the patient as a person, always maintaining hope, and assisting the patient in determining what it means to live. It is not necessary for the physician to share the patient's religious or spiritual beliefs, but it is imperative that the physician understands and respects their belief system.¹⁵ Be open to learning from the patients and their beliefs. It is also necessary to understand the mechanisms for identifying and mobilizing spiritual support for the patient from their families and community needs to be understood.⁴ In addressing an American Medical Association convention, Rabbi Abraham Hershel said "To heal a person, one must first be a person."¹³ Patients are first and foremost persons. Is it not time that one recognizes that physicians are also first and foremost persons? One of the most important aspects of spirituality is that the doctor-patient relationship is a sanctuary that can only be effectively entered with a sense of love, humility and awe.

Conclusions

The positive correlation of spiritual health to mental and physical health should not be ignored. The benefits of prayer, meditation, spiritual and religious commitment are receiving significant attention in the medical literature. Are osteopathic educators giving their students adequate information about this voluminous body of research? Students will positively benefit from a broad-based introduction to the spiritual aspects of osteopathic medicine. One

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can begin by openly discussing the profession's rich spiritual heritage with emphasis on the experiential nature of spirituality in osteopathic medicine. A study of the research relating spirituality to health is as important as looking at the latest double blind study of another nonsteroidal anti-inflammatory drug. In fact, it is vastly more important for the maturation of students. It is essential that students be taught to comfortably explore a patient's spiritual nature by learning how to obtain a spiritual history, by understanding the relationship of spirituality and health, by respecting the belief systems of their patients, and by knowing when to mobilize support of the spiritual community and support groups for their patients.⁸¹ Perhaps the most important aspect of spirituality for the student and physician is to understand the relevance of their own spiritual development. The osteopathic physician needs to communicate with the students as fellow travelers. "The growth and development of a physician should be nurtured by the most loving and perceptive environment that is humanly possible."⁸² Dr. Fulford said that love is the energy that expresses the spiritual force."⁸³ Our predecessors recognized the presence of divine love within us. As physicians, we should nurture that divine love.

"Therefore be at peace with God, whatever you conceive Him to be."⁸⁴

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