

MEDICINE AND RELIGION¹

WHEN I received your Secretary's invitation to address the Midland Catholic Medical Society, I was moved to accept by the fact that the very title of your Society showed that you expressly associate medicine and religion, or rather medicine and a particular outlook on religion; and I felt that, if it could be done without impertinence, it might be helpful to trace some of the consequences of such an association.

While you are medical men and women engaged in medicine, but so engaged with a definite theological and religious outlook, I would open my remarks by referring to the converse case of a theologian who approaches his theological work from a standpoint fixed towards science. At the time when your invitation reached me, I had just come across a passage in a Protestant theological work which I had had occasion to consult, in which the writer shows how certain of his convictions in the sphere of modern medical science have patently affected his theology. Discussing Christ's reference to the possession of individuals by evil spirits, this theologian assumes that Christ was accepting beliefs now outworn, the general beliefs of His time in regard to demon-possession, that 'in fact, in matters of human science, our Lord's information did not extend beyond what a man, born and educated as He was,

¹ An Address delivered to the Midland Catholic Medical Society, December 11th, 1938. We have printed this Address in the precise form in which it was delivered, feeling that the circumstances of its delivery are pertinent to the whole thesis. Though we do not necessarily sponsor the latter in its entirety, it undoubtedly presents an important point of view that has not been, perhaps, sufficiently investigated from a Catholic point of view and may lead, we hope, to further discussion in these pages. The author, as many will know, is a distinguished physician and scientist, and is the Medical Officer of Health for Birmingham.

might naturally have acquired.' The theologian has drawn that conclusion through his acceptance of modern medical views of disease. He is regarding Christ's interpretation of the origin of particular types of disease as unsound on the assumption that the modern medical interpretation of such disease is sound. Granted that either Christ or modern medicine must be right, the theologian whom I am quoting comes down on the side of modern medicine. Now I assume that Catholics would conclude, on the contrary, that if one of these two must be wrong, then modern medicine must be that one. If so, if Christ's view of such disease, and of disease in general, is a true one, then we should be looking at the principles of modern medicine to see where they have failed to penetrate to the truth.

My argument, then, is that, if the prior acceptance of a medical outlook can influence one's theology, similarly the prior acceptance of a particular religious outlook should affect one's medical science and practice. Let me put it more concretely. We are to accept the interpretations of disease which seem to be implied in Christ's words and miracles of healing, and we are to seek what co-ordination is possible between such interpretations and those of medical science. To the extent to which co-ordination is not possible, we must be prepared for an alteration in the interpretation of disease adopted by medical science. The subject thus involves as much a challenge to a Catholic audience as it would to a Protestant one, though the emphasis of that challenge would fall at a different point; and I enter on it here with, I believe, a much greater prospect of sympathetic understanding than I should before an ordinary medical gathering.

It is evident that were Christ justified in His interpretation of disease as being caused by sin here, by lack of faith there, by possession by evil spirits elsewhere, we should reach a type of medical thought and practice vastly different from that taught to those of us who have been

trained in Protestant medical schools. Whether the training is fundamentally different in Catholic medical schools is beyond my knowledge. If not, then there would seem here to be a challenge to Catholicism; and my desire is, within the limits of a half-hour talk, to attempt some response to that challenge. That means, not a denial of truth painfully acquired by medical science, but an extension of that truth to a more inclusive scope. Medicine has learnt much of the factors of infection from without, of constitutional, of dietetic, of glandular secretory factors from within, which can bring about states of disease in body or mind. That harvest of knowledge still must remain. It is true, or substantially true; and it must somehow be wedded with the religious standpoint that, behind disease and perhaps even behind the very kinds of disease which we associate with constitutional weakness and endocrine disturbance and bacterial invasion, there can be other factors, supernatural factors, factors of sin or of lack of faith, factors of evil spirits even less likely to be welcome to the modern medical mind.

It can be claimed that there have been two main trends in medicine within recent years, one of the influence of mind, the other of the influence of internal secretions, on the bodily health. The two tendencies on the whole have been in opposite directions. The work of the psychiatrist has shown over a steadily expanding field how the devious workings of the emotions affect the will's control of the body, giving disease which we can understand more clearly when we translate 'disease' into 'unease' of body, the unease which the man in the street will expect to follow uneasiness of mind. We have certainly gone a very considerable distance towards grasping how sin and lack of faith can react on bodily health, though the average practitioner of medicine fights shy of a frank recognition of that fact, even while in practice he utilizes it in establishing in the patient a restoration of faith, either in a person—himself—or in an attainable ideal—that of health. The work

of the endocrinologist, on the other hand, however true in its conclusions, tends all too easily to lead to a depressingly materialistic conclusion that we are the slaves of our internal secretions, depending for our mental and our emotional life on the juices which, by their mysterious and otherwise independent activity, the linked action of our secretory glands may happen to give us. Yet in that phrase, 'may happen to give us,' we may be begging the issue. For the endocrinologist may conceivably learn from the psychiatrist that the sins of fear or hate or lust or avarice may be the strings which, behind the scene, are moving those glands which appear so terrifyingly independent and robot-like, so much of an inward Frankenstein, so closely analogous on the material plane to evil possession on a spiritual plane.

The first step, then, is for us to recognise the whole man as such in every condition of disease or unease, whether of body or of mind. Body and mind will each react on the other. Disturbance of mind will influence the body, disturbance of body will hamper and hinder health of the mind. Where we find a condition which superficially appears to be one of disease of the bodily system, even while we are dealing directly with the cure of the bodily disease itself, we should deliberately search for disturbances of emotion or of thought which may have paved the way for that bodily disease or which are encouraging its continuance. Conversely, while dealing with the cure of disease of the intellectual or the emotional nature, we should not omit to look for the aberrations of bodily function which may have so hindered the working of the mental mechanism as to cause its breakdown; or which, having themselves resulted from a primary dislocation of mental health, may now be hampering the return to a mental normal.

Such a viewpoint is one acceptable to medical science, however difficult it be to apply in practice. But it does not sufficiently cover the ground. It still does not make

the medical interpretation square with Christ's interpretation of disease. It covers in a sense, though imperfectly and without sufficient depth of meaning, the part which sin and lack of faith can play in disease. It does not cover that sort of faith which, in Christ's contact with men, could restore sight to a blind eye or hearing to a deaf ear under conditions which suggest a restoration of altered tissues into normal tissues rather than a restoration of health to paralysed function. It does not cover those cases of cure of the personality by the uprooting of evil spirits in possession. Our viewpoint, then, has perhaps attained the limit of what might be called natural healing; but it has not extended to supernatural healing. It has looked on the individual as body and mind. It has not accepted him, except vaguely and implicitly, as a creature of body and mind and *soul*: and if of soul, then by that spiritual essence capable of reacting towards spiritual forces, good and evil, outside himself. It would appear that, to give scope to those interpretations of disease indicated in Christ's dealings with the sick, medical science must learn to regard the individual not merely as a unit of body and mind. While through his material nature he has kinship with the material universe and through his intellectual and emotional nature he is linked up with his fellow human beings, through his spiritual faculties he is mysteriously a denizen of a spiritual universe, inhabited by personal spiritual beings, good and evil. It is from that last conception that medical science shrinks, as one beyond her domain; and it is true that here the doctor needs the company and the guidance of the priest if he is to understand and to act aright. It may be that the order should be reversed: that this is the province of the priest, assisted by the doctor in those aspects where the physical and the mental nature are playing their several parts in the full picture of disease of personality.

We are, then, at the boundary line between matters medical and matters religious. Can we, however, find any

considerations which can link up this supernatural world with the conceptions which modern psychiatry is beginning to bring to us? The nearer we can bring the medical interpretation to Christ's interpretation of disease, the easier the leap from one to the other. For example, were the evil spirits possessing the persons cured by Jesus wholly extraneous to the individual? Or were they separated portions of that individual's divided personality, speaking for themselves in the presence of the commandingly integrated personality of Christ? Or is there any sense in which both alternatives can be true? The psychological work with which we are familiar on the existence of divided personalities gives a natural starting-point for speculation. While it is, I suggest, beyond cavil that psychological methods can demonstrate the splitting of the personality of certain sensitive and mentally tortured subjects into portions more or less segregated from each other, it seems to me that milder passing phases of such a process—the first dim suggestions, only rarely to materialise in the full-blown process—can, not infrequently, be seen in the child and the adolescent, in the quick, almost violent, swing from confidence to timidity, from independence to over-dependence, which must surely be familiar to those in contact with the young. It would seem not unlikely that, as we advance towards that maturity of life which for the greater part ever eludes our full attainment, we are perpetually subject to the desire for integration and to the danger of disintegration of personality.

May it not further be true that the process of integration so far as it is true and basic, is one of attachment to the company of spiritual goodness, the family of God; and that the process of disintegration is one of detachment into the company of spiritual evil, the forces of the Devil? The Protestant doctor tends, I think, to accept the first, to shrink from the second suggestion: to accept the division of personality; to avoid the linkage with extraneous spiritual powers. Is that as true of the Catholic doctor? It

is tempting, for example, in the extreme example of disintegration of personality afforded by the Gadarene demoniac in the Gospel story, to look on him as 'possessed' by a legion of personalities split off from his own tormented nature; and we incline to leave our interpretation at that point. But is it possible that, in the process of allowing such fragments of the personality to break off and to carry on a substantially separate existence, the individual is in fact surrendering them to the unseen forces of evil personified in the Devil? Is it conceivable that, as each individual has it within him to be restored into the family of God, to become a child of God, so in the opposite direction he can surrender himself, or a portion or portions of himself, to be of the company of Satan, so that, while possessed by evil spirits which are segregated parts of his own personality, he is *ipso facto* possessed by evil spirits which are part of the great company of spiritual evil? If that were so, it would appear that, in that spiritual universe with which through his spiritual faculties the individual is in contact, there is ever a struggle proceeding, in the one direction into an integration with the Spirit of all good, in the other into a disintegration which shall enable ever growing sections of his personality to be split off and absorbed into the company of the spirits of evil. There, behind the everyday scene of health and disease in which medical science feels so much at home, we may imagine this background of vast supernatural happenings in which medicine is all at sea and only the agencies of religion can be of service.

We have referred to another group of conditions which modern medicine must include if it is to cover the ground explored in Christ's healing of the sick. That is the group of conditions where, so it would appear, diseased tissue or scar tissue recovers normal specific function, an eye blind from birth suddenly becomes capable of sight, or a deaf ear becomes capable of hearing. To me it appears more natural to assume what the Gospel accounts seem to imply,

that there was truly a recovery of specialised faculty in a tissue apparently beyond recovery, rather than a mere recovery of function in a non-functioning organ. But on such a basis we are involved in a radical alteration of our view of the physical substance of the body, and are driven to recognise that the inertia which keeps matter in a given state can be lifted, supernaturally, suddenly, to change that state into one quite other, with widely different functions and powers. The miraculous must be allowed its place in our conception of the possibilities of healing. Matter is not necessarily the fixed and frozen entity which we conceive it to be. Matter can be changed into other matter at the word of command, if it be an almighty word of command. Lourdes opens out its potentialities, and the most modern physics sees life and meaning beginning to appear in some of its subtle blendings of matter and energy, of particle and wave, of mass and radiation. Is there not a suggestion in all this of a servitude to which matter as well as man is subject, such that 'every creature'—matter together with man—'groaneth and travaileth' in that 'servitude of corruption'; a suggestion that, as man's spirit can be released from that servitude by the act of God, so also at a different level matter, the matter in bondage to a restricted function, can be released into the greater freedom of function of matter of a different content? Does not Christ's resurrection-body, with the unique qualities of its material substance, imply the need for medical science to recognise in matter itself a meaning and a potentiality at present scarcely imaginable? Not the negative meaning of Prospero's thought, where all, the cloud-capp'd towers, the gorgeous palaces, the solemn temples, the great globe itself, all shall dissolve, and leave not a rack behind—not that negative, but a positive meaning, whereby the matter of man's body and of the material universe can and will be freed from some inward bondage to serve functions unattainable by matter in its present servitude.

To the outlook of the vast majority of Protestant doctors, such a conception of the background of medicine, vague though it be, implied in the good and the evil potentialities of man's spirit and of the matter of his body, is likely to be entirely foreign. Perhaps from many Catholics it will invoke only some degree of theoretical agreement, largely divorced from any application in practice. Yet to the Catholic in particular, if I have been right in assuming his attitude towards Christ's words and deeds, there is here a fundamental challenge. Some such background as we have outlined is necessarily implied if we are to accept the consequences of regarding Jesus as the complete Master of the meaning of life which we know Him in His earthly life to have been. We have to retain the truths which medical science has acquired, the truths to which I have briefly referred, of the influence of heredity, of infection from without and of changes within the physical and mental system making for ill-health; but we have to see those daily influences at work against a background of the individual's supernatural life, which may make them prepotent or impotent for harm. In the painting in of that background to our conception of medicine, and in the consequential alteration of perspective in medicine as a whole, lies that challenge to our medical profession, Catholic and non-Catholic alike, which it has been my purpose to suggest to you.

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