

## **James L. Holly, M.D.**

### **Faith and Health - Prayer and Healing**

**By: James L. Holly, MD**

An increasing number of scientific articles are appearing concerning prayer in the treatment and management of illnesses. In 1872, F. Galton requested that an evaluation be made on the efficacy of prayer. The Archives of Internal Medicine published an article in 1999 entitled, "A randomized, controlled trial of the effects of remote, intercessory prayer on outcomes in patients admitted to the coronary care unit." This article concluded, that patients who were prayed for had fewer complications and had better outcomes than those who were not prayed for. These results were found even though the patients had no idea they were or were not being prayed for. In 1965, The Journal of Chronic Disease published a report entitled, "The objective efficacy of prayer: a double-blind clinical trial." And in 1969, Medical Times published "The efficacy of prayer: A triple-blind study." Both confirmed the benefit of prayer for the sick.

Another scientific study which supports prayer as a positive force in medicine was done by Randolph C. Byrd, M.D., of San Francisco, California and published in the Southern Medical Journal in 1988. This study, a double-blind experiment in which neither the patients nor those who were administering the experiment knew who was in the control group and who was in the experimental group, offers conclusive evidence that prayer does indeed work. In the study Dr. Byrd, a cardiologist, followed the progress of 393 coronary care patients over a ten-month time period. The patients were randomly assigned to either a group which was prayed for or the control group which was not prayed for (Byrd 826).

The patients who received prayer were five times less likely to require antibiotics and three times less likely to develop pulmonary edema, a condition in which the lungs fill with fluid. In addition to this, twelve of the control group required a mechanical ventilator be used while none of the prayed for group required this procedure. "Of the multiple variables measured, congestive heart failure, cardiopulmonary arrest, pneumonia, diuretics, antibiotics, and intubation/ventilation were seen less frequently in the prayer group".

Women at an in vitro fertilization clinic had higher pregnancy rates when total strangers were praying for them. The fertilization study -- conducted at a hospital in Seoul, Korea -

- found a doubling of the pregnancy rate among women who were prayed for, says Rogerio A. Lobo, MD, chair of Obstetrics and Gynecology at Columbia University School of Medicine in New York City. His study appears in the September, 2001, issue of the Journal of Reproductive Health. The randomized study involved 199 women who were undergoing in vitro fertility treatments at a hospital in Seoul, Korea, during 1998 and 1999. All women were selected for the study based on their similar age and fertility factors.

Half the women were randomly assigned to have one of several Christian prayer groups in the U.S., Canada, and Australia pray for them. A photograph of each patient was given to "her" prayer group. While one set of prayer groups prayed directly for the women, a second set of prayer groups prayed for the first set, and a third group prayed for both groups. Neither the women nor their medical caregivers knew about the study -- or that anyone was praying for them. "We were very careful to control this as rigorously as we could," Lobo said. "We deliberately set it up in an unbiased way." That meant not informing patients they were being prayed for, so it would not influence the women's outcome. Whether the patients were praying for themselves -- or if others were praying for them -- "we don't know," he says.

The majority of mankind prays for the sick at one time or another. The prayers may differ in content, in the manner in which they are offered, or to whom they are addressed, but both religious and nonreligious people alike offer prayers for recovery when they are sick. One should never be discouraged from praying even under the most difficult and troublesome conditions. Prayer should not be reserved for times of crisis, but a crisis is a good time to pray. The Talmud, the Jewish Rabbinical commentary on the Old Testament, states: "even if a sharp sword rests upon a man's neck, he should not desist from prayer."

While associated with other religious activities in addition to prayer, faith has health benefits. The National Medical Association reported in November, 1994, that there was less depression, little or no smoking and infrequent alcohol consumption, all positive attributes, in more than five hundred African-American men studied by Wayne State University in Detroit, who were active in their religious faith. The researchers identified a number of indicators of true religious commitment, including overall religiosity and church attendance.

East Carolina University reported in the November, 1994 issue of Southern Medical Journal that maternity patients with a strong religious commitment, and their newborns, had fewer medical complications than maternity patients without a religious affiliation.

In an Australian study of patients with cancer of the colon or rectum reported in the November 1993, Journal of the Royal Society of Medicine, 715 cancer patients were compared with 727 "controls" without cancer. The researchers found that the respondents who saw themselves as most religious were less likely to have cancer than those who were not as religious. In other words, self-perceived "religiousness" was a statistically significant protective factor against the disease! Another finding in this study

was that self-reported or perceived religiousness was associated with median survival times of sixty-two months. In contrast, those patients who reported themselves as "non-religious" had a median survival time of only fifty-two months.

A number of studies have associated a deep religious faith with an ability to cope more effectively with cancer, including breast cancer. In Nurse's Forum, September, 1993, researchers at the University of Texas Health Science Center at San Antonio published a study about the impact of deep faith on the condition of women with breast cancer. They found that with a group of Anglo-American patients, "intrinsic religiousness" was a strong predictor of spiritual well-being and hope- both of which are important factors for successfully coping with cancer.

A commitment to maintain significant social ties, including marriage and religious community involvements -and a willingness to act on such commitments-can have tremendous beneficial effects on health. A study on this issue, involving more than 1,100 healthy men and women aged seventy to seventy-nine, was reported by Yale epidemiologist, Lisa Berkman, at a January 1995 meeting of the American Medical Association. She confirmed that strong emotional support and social ties can help lower blood pressure and enhance survival after a heart attack. Berkman also found that significant social ties, including close friendships and family relationships, improved the levels in the brain of the chemicals norepinephrine and cortisol, which have been associated with excessive stress.

Prayer and faith are not talismans or lucky charms, but they are intrinsic to the human experience. The Christian faith is filled with illustrations ancient and modern of the miraculous healing of illnesses through faith and prayer. As a physician, who is a Christian, I would recommend faith and prayer to all of my patients. While we utilize the best and the finest medical technology, we must never forget that it is God Who is the Giver and Sustainer of life. Worship, praise, gratitude, prayer and faith are all healthy because mankind was designed by God to practice each one of these as a part of a healthy mental, spiritual and physical life.

Practice your faith and pray for yourself and for others who are ill.

Remember, it is your life and it is your health.