

# An old prayer for modern medicine

## A. Mark Clarfield

**A**s I pen this piece hurtling through the air at 600 mph somewhere over the Atlantic Ocean, it might seem obvious why I would want to write on the effect of prayer on health. But allow me in the modern spirit to declare my biases: although proud of my Jewish heritage, I am not religious or very observant, and I do not (at least at this point in my life) believe in the effect of prayer, whether intercessory or personal, on human health.

I am an unbeliever even though some members of the medical community seem willing to entertain the idea that faith can have an effect on healing.<sup>1-6</sup> Recent examples include articles in 2 major medical journals.<sup>5,6</sup> In the *New England Journal of Medicine*, a group of hospital chaplains asked, "Should physicians prescribe religious activities?"<sup>5</sup> The *Annals of Internal Medicine* published a systematic review of evidence relating to what the authors termed "distant healing,"<sup>6</sup> summarizing 5 randomized placebo-controlled trials of intercessory prayer. Two of the studies reviewed showed a statistically significant effect on at least 1 outcome in the patient being prayed for,<sup>7,8</sup> and 3 showed no significant effect.<sup>9-11</sup> The authors of the meta-analysis called for "further study."

Curiosity about the efficacy of prayer is not new. In 1872, an anonymous essay<sup>12</sup> (later attributed to Henry Thompson, an eminent London surgeon) in the renowned *Contemporary Review* provoked a storm of contentious writings relating to the "Prayer Gauge Debate," which smouldered for several decades. Entitled "The 'Prayer for the Sick' — Hints Towards a Serious Attempt to Estimate Its Value," the essay was prompted by the medical profession's irritation at being excluded from a service conducted at St. Paul's Cathedral to give thanks for the Prince of Wales' "miraculous" recovery from typhoid after a public day of prayer. General prayers for the sick were customarily offered every Sunday in the Anglican service of the day.<sup>13</sup> To Thompson's mind, however, the prayers for individual ill people that appeared in the *Book of Common Prayer* were a somewhat different matter, and might offer the material for "a study of which the absolute calculable power of prayer ... can almost certainly be ascertained." He offered an interesting proposal, one that was consistent with today's evidenced-based approach to the pursuit of health and healing:



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[O]ne single ward or hospital, under the care of first-rate physicians and surgeons, containing certain numbers of patients afflicted with those diseases which have been best studied, and of which the mortality rates are best known, whether the diseases are those which are treated by medical or surgical remedies, should be, during a period of not less, say, than three or five years, made the object of special prayer by the whole body of the faithful, and that, at the end of that time, the mortality rates should be compared with the past rates and also with that of other leading hospitals, similarly well managed, during the same period.<sup>12</sup>

With a laudable fear of beta error and concern for adequate statistical power, he added:

Granting that time is given, and numbers are sufficiently large, so as to ensure a minimum of error from accidental disturbing causes, the experiment will be exhaustive and complete.<sup>12</sup>

Unfortunately for posterity, the trial was not carried out. Such an experiment had to wait almost 100 years for Joyce and Welldon's double-blind trial of the efficacy of Christian prayer on 48 patients with psychological or rheumatic disease.<sup>9</sup> No significant effect was found.

The 19th-century prayer controversy was a struggle between the established Church and its intellectual opponents. On the one side was the likes of conservative Bishop Samuel Wilberforce; on the other, Darwin's bulldog, Dr. Thomas Huxley, a giant in the new phenomenon of "science" and inventor of the term "agnostic."<sup>14</sup>

Thompson's proposal provoked lively debate in the newspaper columns of the day. Academia entered the fray, and a year after Thompson's article appeared the subject was the topic for the Burney Prize, a prestigious essay competition at Cambridge University. As Turner writes, "Sermons and tracts echoed the arguments of the debate for almost a decade. More than forty years later religious encyclopaedias still discussed the proposal even though it had never been carried out."<sup>13</sup>

An influential nontrial, indeed.

The debate was more than an intellectual disagreement. It symbolized a larger question: Should scientists and physicians, or men of the cloth, set the agenda in matters affecting public health? Nor was it only a dispute between believers and atheists. Some stalwartly religious people also believed it wrong to make state-sanctioned pleas to the deity. For example, in 1853, Lord Palmerston turned down a request from the Scottish Churches to designate a fast day to reverse a cholera epidemic. Palmerston was not an irreligious man, but he felt that since the causes of cholera were understood, such a petition should be refused:

The Maker of the Universe has established certain laws of nature for the planet in which we live, and the weal or woe of mankind depends upon the observance or the neglect of those laws ... and it is the duty of man to attend those laws of nature and to exert the faculties which Providence has thus given to man for his own welfare.<sup>15</sup>

Charles Kingsley, a sanitary reformer and liberal clergyman, went even further. He felt that the Lord had already responded to prayers for a stay of cholera by revealing the origins of the disease through the work of scientists; thus, new prayers would be "unappreciative of divine knowledge so revealed."<sup>13</sup>

One of Thompson's supporters was Darwin's first cousin, Francis Galton — travel writer, amateur meteorologist, noted statistician and eugenicist. Galton attempted to prove by means of comparative vital statistics that "sick persons who pray, or are prayed for, recover, on the average more rapidly than others."<sup>16</sup> His approach was quite modern. "There are two lines of research," he argued, "by either of which we may pursue this inquiry. The one that promises the most trustworthy results is to examine large classes of cases, and to be guided by broad averages."<sup>17</sup> Striking out against bias, and anticipating the invention of the blinded randomized controlled trial, he continued: "the other [method], which I will not employ ... is to deal with isolated instances. An author who made much use of the latter method might reasonably suspect his own judgment — he would certainly run the risk of being suspected by others — in choosing one-sided examples." Like Thompson, he understood the importance not only of using a control group, but also of choosing the comparison subjects carefully.

With respect to an examination of vital statistics, Galton tried to demonstrate that public prayers had no effect on longevity. The most prayed-for members of society, he reckoned, must be ruling monarchs; yet he calculated that the mean age of death of English sovereigns was only 64.04 years whereas, on average, members of the aristocracy lived 67.31 years, and the gentry even longer — 70.22 years.

Not surprisingly, when Galton's thoughts on the uselessness of prayer were reprinted in a new book, *Inquiries into Human Faculty and Its Development*, more than a decade after the beginning of the Prayer Gauge Debate, criticism was expressed in many of the leading publications. Taking a view not unlike that expressed by Sloan and colleagues today,<sup>5</sup> *The Spectator* argued that there was more than one type of prayer and that the prayers of individuals were private and thus beyond the reach of "statistical investigation."<sup>18</sup>

In his anonymous proposal, Thompson had, either defensively or polemically, appealed to such piety by offering "to those ... who conscientiously and devoutly believe in the efficiency against disease and death of special [intercessory] prayer ... a field for the exercise of their devotion. I offer an occasion of demonstrating to the faithless an imperishable record of the real power of prayer."

Despite the high-sounding claims that issued from both sides of the prayer debate, this conflict was not simply a battle between the forces of Light and Dark. Rather, scientists and physicians were seeking to attract the prestige, recognition and, above all, the power that had until then been enjoyed almost exclusively by the clergy. What can we make of our return to this old debate? Is the pendulum

beginning to swing back? Perhaps the increased interest, especially among patients, in alternative methods of healing (of which prayer is only one) offers a glimpse of a new cultural battle looming on the horizon. It may well be that physicians have succeeded in appropriating the sacerdotal mantle without offering patients (the laity?) enough of the “spiritual” side of medicine. In so doing, we may be at risk, like the 19th-century Established Church, of losing our flock.

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## A rule of thumb

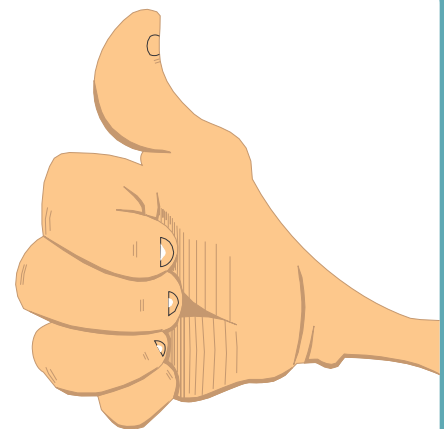
A British scientist has put her thumb on an unanticipated side effect of young people's love of all things electronic.

Dr. Sadie Plant of the Cybernetic Culture Research Unit at England's Warwick University says people aged under 25 are using their thumbs much more than previous generations because they have been raised with a steady diet of Internet, computer game and cell phone use (see [www.motorola.com/mediacenter/news/detail/0,1958,534\\_308\\_23,00.html](http://www.motorola.com/mediacenter/news/detail/0,1958,534_308_23,00.html)). Plant travelled to cities around the world and observed that young people are using their thumbs to do things that used to be the domain of the index fin-

ger, such as pointing and ringing doorbells. In Britain, she notes, youthful thumbs now type roughly 1.4 billion text messages on cell phones every month.

At an ergonomic level, more injuries to the thumb are occurring, but this number may increase as young people who spent their formative years playing computer games and sending text messages begin entering the work force. She says they will be primed for repetitive stress injury due to the amount of strain that they have already put on their hand and thumb muscles.

“While a generation ago teenagers wrapped themselves in the phone cord, almost as if it was the umbilical



cord, well, today the umbilical cord is cut,” says Derrick de Kerckhove, Director of the McLuhan Program in Culture and Technology, University of Toronto. “Today's kids are using cell phones and text messages — they are part of the ‘Thumb Tribe.’ ” — Peter Wilton, Willowdale, Ont.