

Leader's Guide

Episode 17

The Case for Practicing Medicine Christianly – Part 2

Summary

Of all the ways Jesus could have demonstrated His power, the most frequent display was through healing. He also commanded His disciples to go out for the purposes of preaching and healing, linking these two together in a way that should make us want to go and do likewise. Overall health must include spiritual health, or else the benefits will be short-lived. There are many demonstrable benefits for those of our patients who are walking with Jesus, and we can help our patients more fully appreciate the physical blessings connected with spiritual health.

Speaker



Farr Curlin, MD, is the Trent Professor of Medical Humanities and Co-Director of the Theology, Medicine, and Culture Initiative (TMC) at Duke University. Dr. Curlin's ethics scholarship takes up moral questions that are raised by religion-associated differences in physicians' practices. He is an active palliative medicine physician and holds appointments in both the School of Medicine and the Divinity School, where he and colleagues offer Christian theological formation to those with

vocations to healthcare.

Discussion Questions

1. What from this video inspired, edified or challenged you?
2. During the course of your study of the *Faith Prescriptions* resource, has your ability to address your patients' spiritual needs increased? What changes have you seen?
3. Dr. Curlin makes a strong case for integrating our personal (spiritual) and professional lives, and for viewing all patients and colleagues as spiritual beings. How do the following Scriptures speak to his points?

- a. ***Luke 9:2*** – Jesus’ charge to His disciples as He sent them out to share the Good News. His two charges were to proclaim the kingdom of God and to heal. Clearly Jesus linked these two callings in a foundational way.
- b. ***Matthew 9:1-8*** – Jesus healing the paralytic. Jesus provided both physical and spiritual healing for the man. The physical healing provided evidence that Jesus had dominion over the spiritual realm, as well.
- c. ***Matthew 25:34-40*** – Jesus explaining His presence as we serve and minister to our patients and others around us. He says our provision of care for the needy is reflective of how we care for Jesus Himself.

4. **Dr. Curlin states regarding the practice of medicine, “We should make use of it, it’s a gift of God, but don’t put our hope in it, as if it is the physician who saves.” See if you can create a statement to a patient that would communicate this reality to a patient in a way that honors Christ. (Perhaps give each participant time to create a statement, then allow multiple people to read what they came up with).**

Example: “Mrs. Jones, my surgical team and I will do our very best to provide the treatment you need to be restored. But ultimately, we are trusting in the Lord to bring about your healing, and we encourage you to do the same. May we pray regarding your treatment?”

5. **Do you believe the overall health of a patient includes their spiritual health? If so, what are some ways you demonstrate this belief to your patients?**

Anything and everything that a healthcare professional does to point to our spiritual condition, and how the gospel addresses that spiritual condition, is evidence that spiritual health is an integral part of a patient’s overall health. This does not mean a gospel presentation needs to occur with each patient every time, but there should be a self-conscious effort to move our patients in the direction of Christ.

6. **Dr. Curlin states, “We don’t treat the profession of science as somehow self-vindicating, as somehow beyond critique. Science does not give us direction about how to use technology.”**

- a. **Why might some believe science is self-vindicating?**
 - i. Some are so impressed with intellectual capacity that they see intelligence as a justification for moral respect. Yet some of the most evil people in history had brilliant minds but evil, unrepentant hearts.
 - ii. As more and more medical procedures are patient-driven, the ethical question of, “Should we?” is replaced by the technological question, “Can we?” This is a huge reason why we as healthcare professionals need to be Christ-centered advocates for our patients, especially when they want something that is not in their best interests.
- b. **What are some examples of how medical science, in the absence of proper moral grounding, has progressed in ways that make immorality more prevalent?**
 - i. Various forms of birth control, which leads people to believe sex before and outside of marriage is just an amoral choice.

- ii. Abortion, which is seen as the “solution” to an unwanted pregnancy, but in a large percentage of cases ends up causing additional moral guilt and additional spiritual damage.
- iii. Transgender treatment, both hormonal and surgical, which causes those with usually transient discontent with their gender to sometimes pursue irreversible traumatic treatment.
- iv. Fetal Tissue Experimentation - This disrespect for the personhood of a fetus results in further devaluing of life at every stage, inspiring a utilitarian attitude that opposes the fact that God creates man in His own image.

7. Dr. Harold Koenig states, “People who are a part of a faith community, people who attend religious services regularly, have enormous health benefits from that...And that gives physicians a really good reason for encouraging patients to engage in their faith community.” Have you ever shared with patients the empirical benefits of religious involvement? Why or why not?

Dr. Koenig and others have produced many, many empirical studies to show the benefits of religious involvement (see Additional Resources below). In addition, numerous physical and societal benefits are enjoyed by adherents of the Christian faith, such as the following:

- Prayer can be a great way to relieve anxiety (Philippians 4:6-7).
- When a husband and a wife hate divorce, as God does (Malachi 2:16), countless otherwise hopeless marriages can be redeemed.
- When children receive solid, disciplined training at an early age, they are more likely to grow into responsible adults (Proverbs 22:6).

8. What is one take-home item from today’s session that you hope to implement?

Additional Resources

1. Curlin FA, Hall DE. Strangers or friends? A proposal for a new spirituality-in-medicine ethic. *J Gen Intern Med.* 2005;20(4):370-374
2. Curlin FA, Tollefsen C. Conscience and the way of medicine. *Perspect Biol Med.* 2019;62(3):560-575
3. Curlin FA, Tollefsen C. *The Way of Medicine. Ethics and the Healing Profession.* Notre Dame University Press (forthcoming 2021)
4. Grace Prescriptions, Module 2 – *Are Spiritual Interventions Appropriate in Clinical Care?*
5. Grace Prescriptions, Module 3 – *The Case For Spiritual Interventions.*