MEDICINE AND THE CHURCH
MEDICINE AND THE CHURCH

BEING A SERIES OF STUDIES ON THE RELATIONSHIP BETWEEN THE PRACTICE OF MEDICINE AND THE CHURCH'S MINISTRY TO THE SICK

BY

Sir Clifford Allbutt, K.C.B., F.R.S.
A. W. Robinson, D.D.
Charles Buttar, M.D.
Stephen Paget, F.R.C.S.
Bishop of Bloemfontein.
Hon. Sydney Holland.

Prebendary Fausset, M.A.
Jane Walker, M.D.
T. B. Hyslop, M.D.
Ellis Roberts.
M. Carta Sturge.
H. G. G. Mackenzie, M.A., M.B.

EDITED, WITH AN INTRODUCTION, BY

GEOFFREY RHODES

WITH A FOREWORD BY THE

LORD BISHOP OF WINCHESTER

LONDON
KEGAN PAUL, TRENCH, TRÜBNER & CO., LTD.,
DRYDEN HOUSE, GERRARD STREET, W.

1910
FOREWORD

BY

THE LORD BISHOP OF WINCHESTER

FARNHAM CASTLE, SURREY:

July 4, 1910.

DEAR MR. GEOFFREY RHODES,

The appearance of your volume is very welcome. There is, I believe, a real need for such a work. You are to be congratulated on the results of the energy and patience which you have bestowed upon its preparation. You have a true reward in the support of writers so varied and conspicuous in distinction as those whose names you have been able to bring together.

You are enabling the whole reading world to judge for itself, how the subject of 'Spiritual,' 'Mental,' or 'Faith' healing, which during the past ten years has forced itself upon public notice, is being regarded by able, thoughtful, and impartial minds.
There is no doubt that scientific medical men are not going to pay attention to evidence of an unscientific character. They will not waste their time over it. Nevertheless, to phenomena duly attested, and to evidence scientifically recorded, they will give the most scrupulous attention. It is the detailed and accurate collection and classification of facts by those who are trained for the task and expert in its process, that must precede generalisations upon this new, or shall we call it, revived, branch of therapeutics.

Prejudice against it will be found to exist both in ecclesiastic and in scientific circles. Your book will help to dissipate prejudice by the spread of better-informed opinion. The time, indeed, is opportune. The *British Medical Journal* of June 18, 1910, has published a series of papers by men 'who could speak with the highest authority on the relations between mind and body, as exhibited in the phenomena of disease.' 'Their opinion,' as the *Journal* tells us, 'serves as an authoritative reminder that there are bodily ills which cannot be cured by pills and potions, but which yield to methods which, for want of a better word, may be called "mental"; that cures which, in a former day, would have been denied by unbelievers and accepted
as miracles by the faithful, really happen, and that they can be explained without invoking supernatural intervention.’ On the other hand, we are confident the Church of Christ will never identify itself with charlatan methods which might delude the poor and the ignorant into the superstitious idea that they can be more cheaply and effectively healed by a magic or thaumaturgic ministry, than by the knowledge and skill of trained and certificated doctors and surgeons. To quote our report in the Lambeth Conference of 1908, ‘Medical science is the handmaid of God and His Church’ (N.B. not of His clergy, but of that Body of Christ in which all true callings unite in serving), ‘and should be fully recognised as the ordinary means appointed by Almighty God for the care and healing of the human body.’

The temper of our age favours an inquiry conducted in a spirit which will neither disregard the requirements of science, nor rule miracles out of court as impossible. We need not be anxious as to the results. It looks, indeed, as if science were only just now awaking to the realisation of its possibilities through psychical treatment; and as if the Church had never yet realised to the full its responsibility and its power in ministration
to sickness, and its influence over the reason and the imagination.

'Suspect everything,' says St. Teresa, as quoted by Sir Clifford Allbutt, 'which weakens the use of our reason; for by such a way, we shall never attain to the liberty of the Spirit.' 'Prayer,' says the *British Medical Journal*, in the article quoted above, 'inspired by a living faith, is a force acting within the patient, which places him in the most favourable condition for the stirring of the pool of hope that lies, still and hidden it may be, in the depths of human nature.' Truly, it is a tribute to the intellectual temper of our day that two such quotations, the one from a medieval saint, the other from a leading article in our modern medical journal, can appropriately be adduced in illustration of the spirit in which you have edited your volume. I trust it will have many readers. That it may promote the wise and temperate study of spiritual and mental, as well as of physical, forces and disorders, is my earnest hope and desire. That it may also tend to correct shallow and superficial delusions on the part of ignorant persons who imagine that they can dispense with scientific knowledge, and ignore the facts of mortality in suffering, disease, and
death, is an expectation which I pray may be fulfilled.
Wishing, therefore, your volume all success,
I am, dear Mr. Geoffrey Rhodes,
Yours very sincerely,
HERBERT E. WINTON.
EDITOR'S PREFACE

I have to acknowledge my indebtedness to a host of kind people for help in compiling this book. First of all to the many clergymen and doctors who assisted me in finding suitable contributors for the different chapters, and then no less to the contributors themselves who, in spite of the exigencies of professional duties, managed not only to write for these pages but to take part in many editorial discussions often entailing lengthy interviews and correspondence.

The Bishop of Winchester's work in connexion with this book has not been confined to the Foreword which appears under his name. I have had the benefit of his Lordship's advice and help throughout, and he has spared the time to read all the essays in manuscript.
My thanks are also due to Sir Thomas Barlow and Sir Clifford Allbutt for assistance in reading the proofs of the medical chapters.

Messrs. Macmillan and the Editors of the *Hibbert Journal* and the *British Medical Journal* have kindly allowed me to make extracts.

G. R.
# CONTENTS

<table>
<thead>
<tr>
<th>Section</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>FOREWORD</td>
<td>v</td>
</tr>
<tr>
<td>By The Lord Bishop of Winchester.</td>
<td></td>
</tr>
<tr>
<td>EDITOR'S PREFACE</td>
<td>xi</td>
</tr>
<tr>
<td>INTRODUCTION:</td>
<td></td>
</tr>
<tr>
<td>Part I</td>
<td>1</td>
</tr>
<tr>
<td>Part II</td>
<td>31</td>
</tr>
<tr>
<td>1. The Relationship between Medicine and Religion</td>
<td>33</td>
</tr>
<tr>
<td>By Sir T. Clifford Allbutt, K.C.B., M.D., LL.D., F.R.S., Regius Professor of Physic at the University of Cambridge.</td>
<td></td>
</tr>
<tr>
<td>2. Religion and Medicine in the Hospital</td>
<td>43</td>
</tr>
<tr>
<td>By Hon. Sydney Holland, Chairman of the London Hospital.</td>
<td></td>
</tr>
<tr>
<td>3. The Surgeon, the Clergyman, and the Patient</td>
<td>45</td>
</tr>
<tr>
<td>By F.R.C.S.</td>
<td></td>
</tr>
<tr>
<td>Medicine and Religion</td>
<td>49</td>
</tr>
<tr>
<td>By Charles Buttar, M.D., Sometime President of the Harveian Society.</td>
<td></td>
</tr>
<tr>
<td>The Patient</td>
<td>67</td>
</tr>
<tr>
<td>By Stephen Paget, F.R.C.S.</td>
<td></td>
</tr>
</tbody>
</table>
THE RELATION OF PRIEST AND DOCTOR TO PATIENT . . . . . . . . . . . 79
By Jane Walker, M.D., Physician, New Hospital for Women.

FAITH AND MENTAL INSTABILITY . . . . . 101
By Theo. B. Hyslop, M.D., Superintendent of Bethlem Hospital.

MEDICAL ASPECTS OF MENTAL HEALING . . . . 115
By H. G. G. Mackenzie, M.A., M.B.

OUR LORD'S ATTITUDE TOWARDS SICKNESS . 173
By W. Yorke Fausset, M.A., Vicar of Cheddar and Prebendary of Wells.

THE PRINCIPLES OF MODERN CHRISTIAN HEALING . . . . . . . . . . . . . 203
By W. Yorke Fausset, M.A., Vicar of Cheddar and Prebendary of Wells.

THE CHURCH AND MENTAL HEALING . . . . 225
By Ellis Roberts.

THE EUCHARIST AND BODILY WELL-BEING . 243
By Arthur W. Robinson, D.D., Vicar of All Hallows Barking, Examining Chaplain to the Bishop of London, and Rural Dean of the East City of London.

PRAYER AND MENTAL HEALING . . . . . 267

THE METAPHYSICS OF CHRISTIAN SCIENCE . 287
By M. Carta Sturje.
INTRODUCTION

PART I
MEDICINE AND THE CHURCH

INTRODUCTION

I

In the Middle Ages practically the only homes of learning were the monasteries. Here all the knowledge of the time was taught and all the studies carried on, so that under the same roof the theologian, the chemist, the artist, and the artificer sat side by side, and consequently each drew from and modified the study and practice of the other. In England, at least, the dissolution of the monasteries changed this order, and though the brilliancy of the Renaissance for a time obscured the loss to society in general, in the backwater of the eighteenth century both religion and medicine drifted into distinct circumscribed professions. The dawn of the nineteenth century saw an enormous revival of interest and study in both directions, but the new-found energy with which the two spheres of
learning were pushed forward, proved in the end inimical to the highest interests of the community, for religion and medicine found themselves carried farther and farther apart.

Before the stress of life became as severe as it is to-day, most common complaints could be overcome by rest and ordinary treatment. But under modern conditions of extreme complexity healing can no longer be conducted on such simple lines, and as time has gone on the effects of this divorce of medicine and religion have made themselves felt.

In correspondence with a more highly organised state of society, man has become a more highly organised being. He has developed faculties in excess of the man of, say, fifty years ago, and the exercise of these faculties, that depend for their operation on the nervous system, entails a strain on that system to which it was not exposed half a century back. The more elaborate the machinery the more ways in which it may get out of order. Man to-day is prone to a dozen nervous complaints whose existence our forefathers were happily able to ignore. Owing to climatic and other conditions that need not be discussed here, these nervous disorders first forced themselves on public attention in the United States of America. The overworked
business or professional man has no time in the rushing life of the great growing cities of America for rest. Carried off his feet by the tide of prosperity, he becomes the slave of his inventions instead of being their master. His sense of proportion becomes atrophied and he fails to maintain a correct balance between thought and action. A purely materialistic medicine that ignores thoughts and feelings as being outside the scope of diagnosis is powerless to prescribe for such a case. And it is small matter for astonishment that patients of this description have been drifting into the hands of Christian Science and kindred cults in their search for relief. These systems of philosophy or religion (if such they can be called) lack, however, that element of completeness without which no guide of human conduct can maintain its hold. And as it becomes realised that these irresponsible and often mercenary societies are propagating views diametrically opposed to the common-sense conceptions of the patients, their power will be broken and the cures cease. Meantime Christian Science undoubtedly does overcome some cases of nervous trouble, but these in no sense outweigh the mischief done by its followers in denying the sick medical care. We must clear the ground
before we can commence building, and it may be well to examine briefly the 'faith and works' of Christian Science before proceeding to discuss the relationship between Medicine and the Church.

Opening Mrs. Eddy's handbook at random we come across these two explanatory statements:

(1) It is not scientific to examine the body in order to ascertain if we are in health.

(2) To employ drugs for the cure of disease shows a lack of faith in God.

There is nothing new, of course, in these two statements, nor anything peculiar to Christian Science in them. They are put forward by the majority of persons with these views, whether they belong to the Peculiar People or to Christian Science.

With Christian Science, as with all these unorthodox and irregular religious healing societies, it is almost impossible to find any matter that is sufficiently definite to enable one to form any conclusion of their objects. They talk glibly about having effected cures of various kinds of diseases, but on their own showing there is absolutely no evidence to prove that the individual ever had that disease or any other form of disease. Mr. Stephen Paget has very kindly allowed me to make one or two extracts from his in-
valuable work dealing with Christian Science. He has, at great pains, collected cases of Christian Science cures as reported in their own official publications. It is only necessary to read a few of these to see the absolute hopelessness of getting at the bottom of them, not merely from a medical standpoint but from the point of view of common sense. I would ask any person of average intelligence to read the following five testimonies to healing that Mr. Stephen Paget extracted from Mrs. Eddy's weekly journal, the Christian Science Sentinel, and inform me if they convey any impression whatsoever to his or her mind:

'Mrs. R.—Healed of "sense of fatigue, and throat trouble."' Also, when knocked down by a bicyclist, she "suffered no pain at all, and had little sense of shock."

'Mrs. E.—Was healed of the pain of a burn. "The healing went on rapidly, and in a very short time all manifestation of the trouble disappeared."'

'Mr. W.—Cured of drinking and smoking, and of "stomach and throat trouble."' ¹

'Mamie D.—"I seemed to have burned my hand very badly." Healed.'

¹ A good case of a drunkard converted. The healing of the stomach and throat troubles, of course, followed the giving-up of the drink.
'Mrs. P.—"Many physical ailments have been met and overcome by Truth."'

And yet if they will refer to Mr. Paget's book they will find hundreds of similar instances. In an appendix to the second edition of his work Mr. Paget quotes the whole of the correspondence in connexion with the absent treatment of the Hon. A. Holland-Hibbert's mare, in 1900. This curious correspondence needs no comment.

The following is an account in extenso of an alleged cure by Christian Science taken from an article in the Twentieth Century Magazine, published in Boston, U.S.A., October 1909.

The contribution in question is from the pen of the editor, Mr. B. O. Flower. I leave my readers to form their own opinion on this remarkable testimony.

'On the morning of the dedication of the Chicago Church, November 14, 1898, I was in my bedroom in the third story of our house (the house is three stories and basement). I was getting ready to go to the morning service, and my little daughter, five years old, was playing about, when suddenly I felt a silence. I instantly noticed that the child was no longer there and that the window was open.

'I looked out and saw her unconscious form on the ground below, her head on the
cement sidewalk. Instantly I thought, "All is Love."

'As I went downstairs the entire paragraph in "No and Yes," page 19, beginning, "Eternal harmony, perpetuity, and perfection constitute the phenomena of Being," came to me and took up its abode with me, and with it the clear sense of the great gulf fixed between the child and the lie that claimed to destroy. The child was brought in, and as she was carried upstairs she cried. As she was laid down, the blood was spurting from her mouth, and had already covered her neck and shoulders. I instantly said, "There is one law—God's law—under which man remains perfect," and the bleeding immediately stopped. The child seemed to relapse into unconsciousness, but I declared, "Mind is ever present and controls its idea," and in a few moments she slept naturally. During the morning she seemed to suffer greatly if she was moved at all, and her legs seemed paralysed, lifeless. In the afternoon, all sense of pain left, she slept quietly, and I went to the afternoon service rejoicing greatly in my freedom from the sense of personal responsibility.

'When I returned she sat in my lap to eat some supper, with no sense of pain, but still unable to control her limbs, which
presented the appearance of entire inaction. At eight o’clock she was undressed without inconvenience, and there was no mark on her body but a bruised eye. During the day she had not spoken of herself. At eleven o’clock when I went upstairs, I found her wide awake and she said: “Mamma, error is trying to say that I fell out of the window, but that cannot be. The child of God can’t fall; but why do I lie here? Why can’t I move my legs?”

‘The answer was, “You can move them. Mind governs, and you are always perfect.” In a moment she said, “I will get up and walk.” It seemed to require one or two trials to get her legs to obey, but she rose, walked across the room and back and climbed into bed. . . . She then sat up, ate a lunch, fell into a natural slumber, and woke bright and happy in the morning.’

The Archbishop of Canterbury gave a solemn warning in connexion with this question at a recent conference at Lambeth Palace, and the following statement from the medical side is important.

‘Christian Science seems to present one fundamental point of difference from all other forms of spiritual healing. This is, that whereas the cures said to be wrought at Lourdes and other shrines are attributed to the
direct action of Christ, exercised at the intercession of His Virgin Mother or His Saints, Mrs. Eddy and her disciples claim, as far as we understand the teaching—which is not only obscure in itself, but often inconsistent—to cure disease by the same power of healing that was given to Christ. In the sacred book of the sect we read:

‘Our Master healed the sick, practised Christian healing, and taught the generalities of its divine Principle to His students; but He left no definite rule for demonstrating His Principle of healing and preventing disease. This remained to be discovered through Christian Science. A pure affection takes form in goodness, but Science alone reveals its Principle and demonstrates its rules.’

She tells us that ‘when God called her to proclaim His Gospel to this age, there came also the charge to plant and water His vineyard.’ What she calls her ‘sacred discovery’ was made in 1866, and since then it has become widespread in America and in this country. It does not commend itself to the Latin mind, which is nothing if not lucid and logical. Its methods and results are fully discussed by some representatives of the most advanced

medical thought in the present issue of the Journal, and we have nothing to add to what they say. To anyone who wishes to see the whole case against Christian Science put most clearly and convincingly from the medical point of view, we cordially recommend Mr. Stephen Paget’s book on the subject.\(^1\) It is attractively written, well ‘documented,’ and informed with the true scientific spirit.

We need say only one thing more about Christian Science, which, to speak plainly, is a repulsive subject, inasmuch as it shows, in a way no other form of spiritual healing does, the depths of degradation to which the human mind can sink under the weight of superstition. That it cures cases of the kind that have been healed at all sorts of shrines—pagan, Christian, Buddhist, Mohammedan—from time immemorial, it would be idle to deny. That it brightens the lives of some persons who have no aim in life, and have nothing to do but evoke pains and ailments by thinking of their health, is also true. But, none the less, its pretensions go far behind anything that is credible, except by such as accept Tertullian’s paradox, *Credo quia impossibile*; and, instead of courting the light as

other methods do, it seems to love the darkness. We have asked over and over again for facts that would convince a trained mind, but none are forthcoming. Christian Science may, indeed, be described as faith with the least possible amount of works and the largest possible number of words. Here are fair specimens of the kind of facts which forms all the evidence vouchsafed to us of its healing efficacy; they are taken from the Christian Science Sentinel of May 28, 1910, p. 777:

'A short time ago I was taken sick with fever. My mother asked for Christian Science treatment for me, and I was almost instantly cured. I have been reading "Science and Health, with Key to the Scriptures," by Mrs. Eddy, and have been benefited in business and in health ever since. I am very grateful for Christian Science, and thankful to God, whence all good comes.

'Fred. Werth, Dallas, Tex.'

'Some time ago I was attacked by stomach and bowel trouble. A Christian Science practitioner was called, and my ailment soon left and I was again able to resume my duties. I am very thankful for the good done me and others, and praise God for speaking to us through Mrs. Eddy.

'Tillie Werth, Dallas, Tex.'
There is nothing new in Christian Science except the colossal impudence of its pretensions. Mark Twain spoke in ignorance when he said:

'The Christian Scientist has taken a force which has been lying idle in every member of the human race since time began.'

We have shown that it was not left to Mrs. Eddy to discover this force, and that, so far from lying idle, it has been active in temples and churches, at shrines and tombs, for thousands of years. In one thing Christian Science has probably a unique record of achievement: beyond any sect or system that we know of it has succeeded in exploiting human imbecility and turning airy nothing into solid cash.¹

'Every false system of philosophy, of ethics, of morals, and of religion is floated on the vast ocean of conduct, of character, and of conviction by some element of truth. This corresponds to a water-tight compartment in a vessel which is in danger of being sunk, through dishonest contracts, imperfect mechanism, ignorant seamanship, or the stress and strain of storm. But for this compartment, the ship would disappear in the gurgling green of the ocean. In the moral Order, and in all our controversies, there is this unsink-

¹ *British Medical Journal*, June 18, 1910.
able truth. It keeps afloat all with which it is for the time united, until the balance is lost. Then the system is submerged. But the truth sails on.' In the case of the system we have had under examination this truth is the power of the mind over the body and the efficacy of faith. Christian Science undoubtedly cures certain kinds of neurotic troubles, just as it may do incalculable harm by teaching that scientific medicine is not only useless but mischievous. If its followers confined themselves to merely enunciating the truth on which the flimsy superstructure is founded little could be urged against them. As we have seen, however, by a careful examination of their official records, they contradict the cardinal doctrines of the Christian Churches, and encourage a disregard for all bodily complaints that is not merely foolish in the extreme, but where the sufferings of others are concerned, distinctly brutal, and in either case often leads to the most disastrous results.

This indictment is a serious one. But then the claims of Mrs. Eddy's supporters are so portentous that they cannot be lightly dismissed, and we must not forget that, as the Bishop of Birmingham points out in a letter printed further on in this volume, both the Church

1 Dean Lefroy on Christian Science.
and the medical profession have played into the hands of Christian Science by ignoring the facts that Mrs. Eddy has been occupied in distorting. However much it may have been possible in the past for the doctor and the parson in dealing with the less nervous, more easy-going type to look upon him as composed of two distinct and separate parts, body and spirit respectively, having no intimate relationship and amenable to quite different influences, such a view of men and women is to-day out of the question. To entertain it for a moment is to court failure. Mind and matter act and react upon one another, and more than this, without faith all human enterprise would be stultified. Faith plays no less important a part in medical treatment than it does in the more commonplace affairs of life. This aspect of the question cannot be better expressed than it has been recently by Professor Osler.

'Nothing in life is more wonderful than faith—the one great moving force which we can neither weigh in the balance nor test in the crucible. Intangible as the ether, in-

1 'From the Regius Professor of Medicine, Oxford.
'Nov. 18th, '09.
'Dear Sir,—
'The question as you say bristles with difficulties, but no doubt in the stirring of the pool healing in some form or another will be the outcome. You are of course at liberty to use any writings of mine.—Sincerely yours,
W. Osler.'
eluctable as gravitation, the radium of the moral and mental spheres, mysterious, indefinable, known only by its effects, faith pours out an unfailing stream of energy while abating nor jot nor tittle of its potency. Well indeed did St. Paul break out into the well-known glorious panegyric, but even this scarcely does justice to the Hertha of the psychical world, distributing force as from a great storage battery, without money and without price to the children of men.'

Three of its relations concern us here. The most active manifestations are in the countless affiliations which man in his evolution has worked out with the unseen, with the invisible powers, whether of light or of darkness, to which from time immemorial he has erected altars and shrines. To each one of the religions, past or present, faith has been the Jacob's ladder. Creeds pass; an inexhaustible supply of faith remains, with which man proceeds to rebuild temples, churches, chapels, and shrines. As Swinburne says in that wonderful poem, *The Altar of Righteousness*:

God by God flits past in thunder, till his glories turn to shades:
God to God bears wondering witness how his gospel flames and fades.
More was each of these, while yet they were, than man their servant seemed:
Dead are all of these, and man survives who made them while he dreamed.
And all this has been done by faith, and faith alone. Christendom lives on it, and countless thousands are happy in the possession of that most touching of all confessions, 'Lord! I believe; help Thou my unbelief.' But, with its Greek infection, the Western mind is a poor transmitter of faith, the apotheosis of which must be sought in the religions of the East. The nemesis of faith is that neither in its intensity nor in its effects does man find any warrant of the worthiness of the object on which it is lavished—the followers of Joe Smith, the Mormon, are as earnest and believing as are those of Confucius!

Again, faith is the cement which binds man to man in every relation of life. Without faith in the Editor of the Journal I would not have accepted his invitation to write this brief note, and he had confidence that I would not write rubbish. Personally I have battened on it these thirty-six years, ever since the McGill Medical Faculty gave me my first mount. I have had faith in the profession, the most unbounded confidence in it as one of the great factors in the progress of humanity; and one of the special satisfactions of my life has been that my brethren have in many practical ways shown faith in me, often much more than (as I know in my heart of
INTRODUCTION

hearts) I have deserved. I take this illustration of the practical value of the faith that worketh confidence, but there is not a human relationship which could not be used for the same purpose.

And a third aspect is one of very great importance to the question in hand—a man must have faith in himself to be of any use in the world. There may be very little on which to base it—no matter, but faith in one's powers, in one's mission, is essential to success. Confidence once won, the rest follows naturally; and with a strong faith in himself a man becomes a local centre for its radiation. St. Francis, St. Theresa, Ignatius Loyola, Florence Nightingale, the originator of every cult or sect or profession, has possessed this infective faith. And in the ordinary everyday work of the doctor, confidence, assurance (in the proper sense of the word) is an asset without which it is very difficult to succeed. How often does one hear the remark, 'Oh! he does not inspire confidence,' or the reverse! How true it is, as wise old Burton says: 'That the patient must have a sure hope in his physician. Damascen, the Arabian, requires likewise in the physician himself that he be confident he can cure him, otherwise his physic will not be effectual, and promise withal that he will certainly help him, make
him believe so at least. Galeottus gives this reason because the form of health is contained in the physician's mind, and as Galen holds confidence and hope to be more good than physic, he cures most in whom most are confident'; and he quotes Paracelsus to the effect that Hippocrates was so fortunate in his cures not from any extraordinary skill, but because 'the common people had a most strong conceit of his worth.'

Faith is indeed one of the miracles of human nature which science is as ready to accept as it is to study its marvellous effects. When we realise what a vast asset it has been in history, the part which it has played in the healing art seems insignificant, and yet there is no department of knowledge more favourable to an impartial study of its effects; and this brings me to my subject—the faith that heals.

Apart from the more specific methods to be dealt with faith has always been an essential factor in the practice of medicine, as illustrated by the quotations just given from Burton. Literature is full of examples of remarkable cures through the influence of the imagination, which is only an active phase of faith. The late Daniel Hack Tuke's book, 'The Influence of the Mind on the Body,' is a storehouse of facts dealing with the subject. 'While in
general use for centuries, one good result of the recent development of mental healing has been to call attention to its great value as a measure to be carefully and scientifically applied in suitable cases. My experience has been that of the unconscious rather than the deliberate faith healer. Phenomenal, even what could be called miraculous, cures are not very uncommon. Like others, I have had cases any one of which, under suitable conditions, could have been worthy of a shrine or made the germ of a pilgrimage. For more than ten years a girl lay paralysed in a New Jersey town. A devoted mother and loving sisters had worn out lives in her service. She had never been out of bed unless when lifted by one of her physicians, Dr. Longstreth and Dr. Shippen. The new surroundings of a hospital, the positive assurance that she could get well with a few simple measures sufficed, and within a fortnight she walked round the hospital square. This is a type of modern miracle that makes one appreciate how readily well-meaning people may be deceived as to the true nature of the cure effected at the shrine of a saint. Who could deny the miracle? And miracle it was, but not brought about by any supernatural means.\(^1\)

\(^1\) *British Medical Journal*, June 18, 1910.
If, then, faith is so important an adjuvant to ordinary medical treatment, we see at once that religion that stands for faith in its highest and purest form should represent a tremendous recuperative force. We have said that medicine and religion had become estranged—the one given over to a rigid materialism, and the other so busy with men's souls that it forgot their bodies altogether. This book is a humble attempt to bridge over the gulf. There is a great movement that has its roots in history that is already written and that will go on into the far distant future, around about us. It is a movement that stands for Idealism and Optimism. It is the harmonising of all kinds of human experience into one great philosophy. Scientific medicine is coming to reconsider its position and to realise its responsibilities. This synchronises with a broadening of the basis of Christian teaching. Without abandoning any of the cardinal tenets of their faith, the churches are coming to see that Christianity is a much more wonderful truth than they had ever dreamed; and, instead of there being any conflict between Christianity and science, science, like all work for the good of humanity, must be an integral part of the Church's service to mankind.

Medicine and religion had a common origin
in pagan temples, and we have already seen that in medieval times all such learning was the monopoly of the monks. Healing by means of influence on the mind of the patient is no newer a branch of the art than surgery or treatment by drugs. History abounds with instances of cures effected at shrines by means of relics, and by saints. Of all modern pilgrimage shrines the one in the Pyrenees is by far the most famous. That cures actually take place at the Grotto of Our Lady of the Immaculate Conception at Lourdes is undeniable. The cases have been medically diagnosed and the certificates may be examined in the Record Office at Lourdes where such documents are preserved. Whether such cures differ in character from other cures by what is termed suggestion is an open question. In fairness to those who believe them to be due to the direct intervention of the Almighty it is perhaps only right to give here the opinion of Mr. Butlin, the President of the Royal College of Surgeons, who recently said:

‘When such cures take place in the presence of vast masses of people, although it may be possible to explain all the steps through which the emotion has produced the “cure,” how can we be surprised that the people
fall on their knees before God and bless His holy name for the miracle which He has wrought?

'I defy anyone to read Zola's story of the cure of Marie le Guersaint, written by a sceptic (Zola's "Lourdes"), without being moved by it and without feeling convinced that all true Catholics who were present, priests and people, with the unhappy exception of the Abbé Pierre Froment, truly believed that Almighty God had been moved by the intercession of Our Lady of the Immaculate Conception to display His divine power by instantaneously restoring the health of the poor girl who had lain paralysed upon a couch for seven years. In the eyes of all who witnessed it, it was a miracle, for every medical man who had seen her had, with one exception, believed her to be suffering from a damaged spinal cord. There is therefore no excuse, in such a case as this or in ninety-nine out of one hundred cases which are cured by faith, to impute dishonesty and deliberate deception to the priests and the people who proclaim such cures to be the work of God. From the little I have seen of the priests actively engaged in the grotto at Lourdes, I can feel no doubt that the most of them honestly believe that the cures which they have seen are genuine. I would no more think
of accusing them of deliberate deception than I would accuse my own relative of it.'

We have spoken of a great movement, that tends to bring into closer co-operation all human effort and to consecrate it to one ideal—the service of mankind.

We are here more particularly concerned with a smaller movement that exists within the greater. It has made itself felt at Church Conferences and at Medical Councils. It is a movement to bring the medical profession and the Church into a closer practical connexion to fight disease. That such an intimate co-operation is not only desirable but possible, the thoughtful chapters contributed to this book by eminent authorities go to show. As regards the general principle underlying this joint work for the sick, the Archdeacon of London recently gave expression to what would appear to be the feeling of the leading ecclesiastics and foremost physicians in his charge to the clergy of his archdeaconry in the following words:

'Religion and medical science should always co-operate, while the ultimate responsibility must lie with the accredited physician.'

When the scheme for the present volume was drawn up over a year ago, it was felt that

1 *British Medical Journal*, June 18, 1910.
some authoritative statement was needed to guide the public in thinking out the topical questions of Spiritual Faith or Mental Healing. There has, in recent years, been an endless series of books issued from the European and American presses on this subject. Some of these publications being obviously the handbooks of societies whose name spelt their own condemnation, thinking people passed them by, but, on the other hand, much literature of a very misleading character has been placed on the market and purchased by many in the belief that they were learning from it the official views either of the Church or of the medical profession, or of both. The qualified medical practitioners of this country do not lightly decide to give expression to their views on therapeutics in books issued to the general public, and whenever they circulate opinions it may be taken for granted that they are the result of patient investigation of facts and of carefully thought out conclusions deduced from those facts. If one may be allowed to indicate in a general way the position taken up by the doctors who have written for the following pages, it is one of scepticism towards quasi-miraculous healing as a practical means of combating disease, but at the same time it is an attitude of
extreme cordiality towards the minister of religion—in his capacity as a messenger of hope and expert in peace of mind. Of all the weighty evidence that has been gathered together to build up this book, the opinion of Sir Clifford Allbutt forms no unimportant section. Few of us can escape sickness altogether, and although some illnesses may be blessings in disguise, nevertheless our desire for health is only second to our desire for life, and it is right that it should be so. 'The highest spiritual life depends on the best bodily health,' Sir Clifford Allbutt tells us. The Bishops at Lambeth admitted with regret that 'sickness has too often exclusively been regarded as a cross to be borne with passive resignation, whereas it should have been regarded rather as a weakness to be overcome by the power of the spirit.' That there exist potentialities of healing apart from physic to-day no one can refute, but it is to be feared the Church and the medical profession have much lost ground to recover, through having in the past ignored those psychic forces that are now the object both of scientific inquiry and of theological study. The marvellous chemical discoveries of the past few years have revolutionised scientific conceptions. New theories of matter and of energy are being
framed to explain the result of new researches. The wonders of radio-activity have converted the scientist from a materialist who believed in nothing unrevealed by test-tube or microscope, into an idealist prepared to argue from the unseen to the seen. Just as there are in the world of physical science forces whose existence we are only now beginning to recognise and whose capabilities are still unknown to us, there are undoubtedly psychic forces in man that are capable of development, but of whose exact nature we at present are ignorant, although we can trace their effects.¹

¹ The biologist who used to expect to discover the source of life by dissection and analysis would be rather astonished at the modern tendency among scientific men to substitute doctrines of 'energies' for 'atoms.' As Dr. Putman has pointed out, the modern physicist scarcely feels the need of atoms for the world of his conception. We may even go a step further. 'Energy' is 'immaterial,' 'consciousness' is 'immaterial.' May they not accordingly have a common denominator?
campaign lightly. Much counsel is needed before the allies can give battle.

The respective spheres of action of the cleric and the doctor have to be mapped out; so that all the efforts of the one may support and never hamper the other.

It will be seen that the medical contributors, not unreasonably, seriously deprecate any attempt on the part of the minister of religion to invade the province of medicine. Such intrusion is none the less dangerous because it may be unintentional. All 'treatment,' whether it be by means of drugs, surgery, or hypnotic suggestion, must necessarily be a matter for the doctor and those working under his immediate direction: and for them only. In so far as he may be concerned with physical disabilities the priest must inevitably defer to the physician.

At the same time the value of spiritual ministrations in sickness is emphasised on every page of this book.

'Probably no limb, no viscus is so far a vessel of dishonour as to lie wholly outside the renewals of the spirit,' says Sir Clifford Allbutt. But we may go further than this in certain directions. Remembering that the health of mind and body are mutually dependent, and that troublesome thoughts may bring sickness
in their train, we see that there may exist sicknesses that are not amenable to medical treatment only. These are among the ills that the *British Medical Journal* has told us cannot be cured by pills and potions alone.

Dr. Jane Walker writes pertinently on this, under the heading of 'The Relationship of Priest and Doctor to Patient.' As she points out, when a character has to be remoulded, it is the priest rather than the doctor who can best help the patient.

'A true and philosophic religion raises the mind above incidental emotionalism and gives stability,' says Dr. Hyslop: this is the standpoint adopted by all the eminent theologians who have written for this book.

Mental and physical pain is part of the evil in the world. It makes a great difference, however—it may be all the difference between sickness and health—whether we allow trouble to break down our self-control and weaken our will, or whether we face it boldly with a supreme serenity of spirit, strong in a knowledge of greater things.
INTRODUCTION

PART II
INTRODUCTION

II

In the course of gathering opinions from various authoritative sources on the subject dealt with in this book, I received communications from Sir Clifford Allbutt, the Hon. Sydney Holland, and a well-known surgeon, which, though they do not constitute separate treatises, are so important, not only in view of the distinction of the authors, but of the broad survey of the subject that they afford, that I venture to print them as part of the general introduction.

In the case of Sir Clifford Allbutt’s paper I have supplemented it by an important extract from one of his recent writings.

THE RELATIONSHIP BETWEEN MEDICINE AND RELIGION

The response you are good enough to desire can be but brief, crude, and, I fear, too blunt; but I have not time for careful consideration. I can only indicate a few points
which occur to me offhand, and taking much for granted. For instance, I must avoid any discussion of those antinomies which meet us at every side of human conceptions, and be content to accept the common uses. The chief of these (for the moment) is that of the material and spiritual; without forgetting that they melt at their borders the one into the other, and that we meet with corresponding ambiguities, yet I must take them as distinct fields of human life. In our interesting personal conversation you may remember that I expressed the opinion that, on the whole, our prayers must not be for material but for spiritual things. And, speaking on the whole, sickness is a material thing. In the stories of our Lord's miracles it has always struck me that He regarded His miracles—I must use the word for brevity—apologetically. The disciples were not to tell any man of them; or again, a miracle was performed under a compelling sense of the overwhelming faith of the pleader, which was the main thing. Faith, prayer, were to be for the needs of the soul, not of the body. For instance, the father seeing his child in diphtheria would please God better—so the experience of His world tells us—by spending his first hour in seeking the physician with
INTRODUCTION

his antidote rather than in prayer for a divine intervention. And when time came for prayer he would pray not for a suspension of natural law but for unity of his own will with that of the Father, and for the child's spiritual welfare. Into the origin of evil do not fear that I shall enter; it is one of the antinomies which I have said that we must avoid, at any rate at present: I can only now say that disease is a material effect to be combated by material means, and not by religious processions or intercessions.

This being my view, I would try to eliminate notions of the priest as medicine man; they are essentially pagan, though to this day they more or less unconsciously influence our thoughts on the present subject.

But, it may be said, strange healings do take place under religious influences; and this is true. And at no time in history were such miraculous cures more frequent and wonderful than in the temples of Aesculapius or of Serapis. Modern cures, whether of the Eddyites or at Lourdes, or the like elsewhere, when compared with those of the Roman Empire fall into insignificance. Now a careful study of all reported cures of this miraculous or miraculoid kind, a study illustrated for us many years ago by Charcot, proved to him,
and proves to the expert observers of to-day, that they all—palsies, convulsions and the rest, often inveterate cases—are and have been cures of one disease, and of one only, namely hysteria; a malady which in its protean manifestations mocks all and any particular diseases. I say this of the genuine cases; but the majority of such wonders recorded turn out on inquiry (like the 'Grimsby' case) to be grossly exaggerated or wholly false. The 'miraculous cures' then, so far as they are genuine, are cures by suggestion: they take their place with cures of the same kind of disorder by panic, such as an alarm of fire; by 'hypnotism,' or by any other over-mastering impression which startles or transports the balance of the bodily functions from one centre of equilibrium to another higher and more stable one.

So much for the 'miracles'; which owe nothing to any sacerdotal magic, and to the physician are part of a familiar experience, and of a familiar interpretation. But giving up the hysterical cases—which, by the way, is to give up a good deal—and admitting that disease is in the body a material thing, and one not properly matter for the pleading of prayer, except in the spiritual sense of submission to the Divine order, between these
positions is there a sphere in which spiritual influences—whether by a clergyman or a Biblewoman or a gentle friend—may so infuse peace and confidence into a sick man as to promote even in the body a renewal, a conversion, or an economy of energy which should make for recovery? Certainly; and here, I think, is the restricted, if still important, sphere of religion as medical.

To consider this aspect of the matter we must go back for a moment to certain principles. From the letters of Teresa—that noble saint—we may learn much of the greatest value to us in the present inquiry. We may learn from her to distrust the 'ecstasies and melancholies' which—as she said—were 'the perils of conventual life'; she roundly denounced all that 'letting one's self go, outside the control of reason,' which has its origin in 'sick brains.'

'If I were with you,' she wrote to a certain Prioress, 'you would not have so many extraordinary experiences.' Now Teresa not only apprehended, but thoroughly understood, that the highest spiritual life depends upon the best bodily health. She tells us that she supported her own vigils with plenty of meat (viande) and sleep. High and holy thought demands the greatest effort
of the healthiest body, of the brain most finely balanced and best nourished. The piety of the sick-bed is at best a passive piety, which on recovery is pushed aside again by the custom of the world; but herein it is that in sickness the soul flags and droops upon itself, and that the support of other sympathy is more precious. The sympathy we all depend on in health we need most when enfeebled by ailment. There is no delusion more terrible than that which lets a man run up a score of sins and negligences to be repented of under the discouragement of a sick-bed. In this melancholy, this debility, this disappointment, perhaps this remorse, energy is wasted which is sorely required for the conflict with disease. And even the man of religious life likewise—if in less degree, as one who has accumulated more inward light—is also disheartened to perceive that the fountains of spiritual contemplation are then less copious, and aspiration a wearier effort. He too needs help, if not to make, yet to reinforce, the happier conversations of his fuller life. In health the mind in solitude droops and wastes, and the sick-bed is a kind of solitude; the thousand and one stimulating impressions of common life cease, the impressions wane which should keep the mind and soul awake, and fill the wells
of energy. On the sick-bed, therefore, short times of encouragement and sympathy, periods not long enough to exhaust the scanty stores of energy, are precious; and if the physician be jealous—as it has been said—of the priest, it is lest he should expend these stores more in priestly functions than in 'angels' visits' of love and hope which would unite and reinforce the vacillating and fading forces. Thus also prayer at the bedside and the short communions should be of love and hope, not particular requests for material relief or cure. The kindly physician himself may be a vehicle of much of this encouragement; but—as I said to you before—he should avoid even the semblance of attending to anything beside his own business of material aid and general human sympathy. The most pious patient, openly or inwardly, resents the divided mind. The instinct of self-preservation is not lost even in those nearest to God.

So when all is said and done on this subject I fear that matters for me remain much where they were before; but they may lead to a more intimate understanding of the several parts of the spiritual and the medical visitors, and to a completer sympathy between them. If still it be urged that an imposing ceremony may, by a measure of the
'suggestion' so effective in the many-coloured hysteria, come to our aid in more noxious maladies, if no more than on the fringe of them, I should repeat that the advantage would be so indefinite, so relatively small, and so well to be attained by ordinary spiritual visitation, as not to be worth the peril of the moral perversion which hangs only too closely around these good intentions, the peril of imposing upon, even of bamboozling, the patient. We must remember the saying of Lavoisier, 'Medicine came into the world with a twin brother, called charlatanism.'

CLIFFORD ALBUTT.

Extract from Sir Clifford Allbutt's paper in the British Medical Journal, June 18, 1910:

'Spiritual gifts may or may not consist in the insertion of a new entity, they certainly do consist in a reanimation and remodelling of thinking matter in the uppermost strands of the brain, and probably of some other, perhaps even of all the other, molecular activities of the body. Probably no limb, no viscus is so far a vessel of dishonour as to lie wholly outside the renewals of the spirit; and to an infinite intelligence every accession of spiritual life would be apparent in a new harmony (συγγυμνασία) of each and all of the
metabolic streams and confluences of the body. On this conviction it is that the hopes and methods of faith healing depend. Conversely, every man who watches his own life must know this, as in time of weariness or pain he grieves over the drooping of his soul, that the highest spiritual life depends on the highest bodily health; but this health means, not health only of the belly, not only health of the heart and common brain, but also of the rarest and most exquisite textures of the cerebral web. If in a rude health of the grosser body these subtlest parts have not been exercised and cherished, the total harmony is diminished; highly efficient as, on lower planes, the particular body may be, it is defective in comprehensions, it is an inconsummate body. To this "materialism" of the body, even on its most spiritual planes of structure, we must not close our eyes lest in our search beyond knowledge we walk contrary to knowledge. "To pray well," said the noble Teresa, "one must eat well and sleep well." If into the last analysis the Pauline division between the carnal and the spiritual cannot be carried, if under the relations of other times and of other ideas we have to re-interpret it, yet still in its broader contrasts it points out a plain way of life and conduct—one so plain that the
perplexities of the middle terms may be left to the casuist.

‘It must be granted then, in respect of faith healing, that spiritual influences, divine directly, or indirectly through human mediation, may to some unknown power radiate from these highest currents downward through the more and more “material” planes, arousing them less and less as they have become more and more statical in order.

‘Once more; it is said that in his “subliminal self” man possesses a substance peculiarly divine, or a substance or means through which we may reach divine communion, or through which especially divine purposes may be fulfilled in us. It is true that we do not know even approximately the content of the individual man, the materials racially and personally acquired, the products of past experience, racial and personal, built sensibly and insensibly into his personality. May we not each of us be compared with a ship which began its voyage with no inconsiderable rudimentary equipment, then, calling at many a port, has gathered many kinds of stores and treasure? Of some of these stores, of some variety of them, the supercargo has a recollection, especially of those in frequent use; but, for the most part, the bills of lading had been
lost. Unlike a cargo, however, these contents are not a passive burden, but a system of coefficients; some on planes which we commonly call material, some on spiritual planes, some working on the surface, some working stealthily within; so that much tact and insight are necessary to unveil and to re-animate those agencies in whose abeyance disorder or ineffectualness may happen to consist. And the influences which are to effect these revivals must be akin in nature to these kinds respectively; some must be solidly material—such as splints or drugs—some must be religious, moral, and even intellectual, yet inspired by emotion, by appeal to hope and joy; and their instruments must be devotion, sympathy, gladness, reasonable persuasion, and even surprise.'

RELIGION AND MEDICINE IN THE HOSPITAL

No one who has been connected with one of our big general hospitals can doubt for a moment the advisability of the collaboration of the physician and the clergyman, each helping the patient from his own standpoint. It must not be imagined that I advocate any usurping of the duties of one by the other, but in the cure of certain types of disease,
and certainly in the cure of diseases that are primarily diseases of mind or character, the doctor should welcome the minister of religion as a valuable ally. In fact none can doubt that the minister of religion can bring a power to bear on the mind of a patient, which the doctor cannot.

Whatever his own personal belief may be, the medical man can of course only view religion from a philosophic or ethical standpoint. It is difficult for him to concern himself with dogma. The clergyman can help by administering suggestions of hope and encouragement. These suggestions can and do often come from other sources with equal results, but I think by virtue of his office the clergyman is specially qualified for the work.

There can be no doubt that cures of certain kinds of diseases have been effected by Christian Science and kindred faith-healing cults, all of which cures come under the head of healing by suggestion. I do not think that healing disease by suggestion is specially a Christian work, it can be achieved in many ways. But I think the average medical man likely to be more willing to seek the aid of a duly accredited minister of religion than a so-called 'Spiritual Healer' who is subject to no authority. But above and beyond all this
I think the quieting and encouraging influences of religion are of the greatest value in all illness, and I believe a greater use might be made of such power. 

**Sydney Holland.**

**The Surgeon, the Clergyman, and the Patient**

Possibly the gravest shock that a human being may receive, so far as it concerns himself or herself, is to be told that fatal disease is present in the system. So great may be the actual shock that many a medical practitioner shrinks from inflicting it, and purposely avoids direct allusion to the certainty of dissolution. Whether this is justifiable or no, depends very largely upon the susceptibilities of the patient and the tact of the doctor. But the word 'operation' is, by some, almost as much dreaded as the word 'death'; in fact even more, as it always implies to the lay mind the infliction of hours of pain, and days of discomfort, though this is far from being the truth in most instances.

'Rather let me die than make me undergo an operation' is the not infrequent remark of the highly-strung sufferer. And then comes in all the sympathy, tact, and good breeding of the surgeon. He will gently explain
matters, will show how the disease is such that nothing short of removal of the growth holds out the least chance of life or the avoidance of later severe pain, and will state, what is the truth, that the operation, short and sharp, will give years of freedom from suffering even if it does not completely remove all trace of the trouble. How bewildered the patient will feel! He has been hoping against hope that his malady is only a slight one, and that it may be 'dispersed' by some magic of physic, and now his hopes have been rudely mocked and shattered. Surely here, if ever, help from an outside source is needed and should be welcomed. But such help must be rational, based on truth, and fearing not the consequences.

Supposing the disease is cancer, what awaits him if the sufferer flies to the quack and is befuddled till all hope of successful treatment is gone? Or rushes to the Christian Scientist, who, with seeming bona fides, avers there is no such thing as a cancer cell! The eye that has seen it a hundred times under the microscope, and can recognise it amongst a hundred other varieties, does not exist in the purblind conception of such a 'Scientist,' for the cell is matter, it cannot exist, and neither for the same reasoning, if consistency is maintained, can the eye which sees the cell exist, for it also is material.
And still as the growth increases there is the lurking certainty ever protruding itself that after all the surgeon was right, and the days are slipping by. Would that friends could be true and friends indeed, and not in ignorance hinder these circumstances, not mere blind leaders of the blind.

It is here if anywhere the enlightened clergyman and the surgeon may join hands for the good of spirit and body. And then when a decision has been arrived at calmly and deliberately, and the time of the operation has been fixed, there is still work for both the minister and the surgeon to do. A quiet talk and prayer the evening before the ordeal, how it has often soothed the trembling soul, and invoked a night of rest and refreshment, enabling the patient to meet the trials of the morning calm, because mentally and physically there has been repose.

And the surgeon with his cheering word, and the anaesthetist with his quiet reassuring manner and conversation, both tend to allay any fresh alarm at that which is perhaps the most trying moment of all—the placing oneself unreservedly in the hands of the operator.

Surely, surely here is a period when the efforts of the spiritual are to crown the success of the material.

And then, observe how the quiet and
confidence, engendered by the combined efforts of pastor and doctor, continue during convalescence, causing that period to be shortened in many a case.

In a hundred different ways members of the two professions may work hand in hand, but each should be able to mutually esteem the other and give to each his proper place and function. They ought never to despise one another, because they ought never to encroach on one another's province.

Till the clergyman recognises that it is his duty to understand something of elementary physiology, if he is going to be a benefactor to spirit and body, and the medical practitioner is willing to admit that there are spiritual forces which can be brought to help the perfection of his work, so long is it the opinion of the writer that the sufferer who looks to both of them for aid will fail to receive his full due of assistance. May the time soon come when the rising generation of all classes may be so taught at school, and in church, that they will come to understand something of the composition and need of the tripartite nature of man, and may the day speedily dawn when the enlightened clerical and medical professions mutually work for the good of the whole, spirit, soul and body. F.R.C.S.
MEDICINE AND RELIGION

BY

CHARLES BUTTAR, M.D.

SOMETIME PRESIDENT OF THE HARVEIAN SOCIETY
WIDESPREAD interest has been taken of late in what is called 'Spiritual Healing,' or 'Healing by Spiritual means'; interest which is manifest from the popularity of such books as 'Religion and Medicine,' and 'Body and Soul,' no less than from the thoughtful articles contributed to this volume by many eminent authorities. Yet it may be observed that, although some of these contributors belong to the profession of medicine, it is doubtful if many medical men are acquainted with the objects and purpose of Spiritual Healing, and probably few of them regard the movement seriously. It is unwise, however, to adopt an attitude of indifference towards the aspirations of earnest men, so that it seems well to attempt to define the position of medicine with regard to such methods of healing, to investigate the cures alleged, to utter some warning as to possible dangers, and to inquire how far the results justify the movement, and to what
extent it is possible to adapt the processes of Spiritual Healing to recognised forms of treatment.

Spiritual Healing has been hailed with enthusiasm by certain members of the Church of England, under the impression that it constitutes a resumption of the early powers of Christianity as evidenced in the miracles of healing ascribed to Christ and His Apostles. A theological discussion as to the possibility of miracles occurring at the present day is outside the scope of this article, but it would be well to define the standpoint from which the medical man approaches all investigations connected with disease.

The researches of scientists are conducted by the methods of observation, experiment, and induction; it is the medical man's duty to observe symptoms, to experiment as to their cause, to investigate possible remedies, and to apply these to the relief or cure of disease. In recent times much has been done towards elucidating the influences of mind upon body and its diseases; but so far questions connected with the Spirit have been regarded as outside the scope of medicine.

The minister of religion, on the other hand, has been content hitherto to leave questions of physical health to be dealt with by the
doctor; he has not interfered to any extent in mental questions, and his chief concern has been with what is called the 'Spirit.' It would seem a little difficult to define the attributes of Spirit, or to draw a sharp line of division between spirit and mind; but, however this may be, spirit has usually been considered as opposed to matter, and no influence over the material diseases of the body has been ascribed to it. Whatever views the Church may have held as to the miracles of healing mentioned in the New Testament, she has to some extent kept them in the background; and it is possible that they might have remained there, but for the success obtained by certain irrational cults that have sprung into being, with the object apparently of abolishing both parson and doctor. The foundation on which all these sects are based would seem to be a passage in the Epistle of St. James, chap. v. verses 14, 15, which reads as follows: 'Is any sick among you? let him call for the elders of the Church; and let them pray over him, anointing him with oil in the name of the Lord: and the prayer of faith shall save the sick, and the Lord shall raise him up.'

Again this is no place to go into theological discussions, such as whether 'elder' can be taken to mean 'priest,' the views to be held
on anointing with oil, and so on. But it may be suggested incidentally that the term 'elder' is hardly likely to be accepted by either the Church or the medical profession as applicable to a person untrained both in theology and in medicine, whose claim to authority rests on his own assertion, and whose methods are only too liable to drift into what is known as 'quackery.' Even the Peculiar People, who rely upon the same text in support of their tenets, retain, I believe, some meaning of authority in the word 'elder'; and their position seems logically sounder than that of the believer in a self-styled 'Spiritual Healer.'

As regards the procedure of the Spiritual Healer, it would appear to consist in laying hands on the affected part of the body, at the same time offering up extempore prayers of a very impassioned character for the recovery of the sick. The treatment takes place in as impressive surroundings as possible, and at times a priest is called in to anoint the patient with oil. It is doubtful to what extent the practitioners of Spiritual Healing claim what are called 'special powers'; but it seems certain that the possession of these powers is sometimes alleged. Unlike the Christian Scientist, the Spiritual Healer does not despise medical assistance, though it is probable that
at the present time his treatment is sought chiefly by those to whom medical methods can offer no further hope of cure.

It has been indicated already that the first great difficulty experienced by a medical man, in discussing such a treatment as Spiritual Healing, is the definition of terms. Accustomed to deal with more or less concrete facts, a doctor has some sort of mental picture of an infectious disease, as the reaction of the physical body to the invasion of a germ or its poison; he can see and feel a tumour, and determine its relation to anatomical structures, though he may not know as yet the cause of its growth; he has learnt by experience the results of the removal of new growths.

In the region of the mind also he has investigated many phenomena; he is able to attribute many insane states to toxic influences; he has studied to some extent diseases known as 'functional'—a class that is becoming numerically less with the advance of knowledge; but he is not able to grasp to the same extent the meaning of the word 'Spirit.' The medical man recognises in many cases the influence of the temperament or character of the patient upon the course of the disease, and would prefer to treat one who takes a hopeful view of the future; just as he
desires quiet cheerful surroundings, and the avoidance of conditions that tend to irritate or depress. In so far as the ‘Spiritual’ attitude of the patient conduces to his peace of mind, its assistance would be welcomed by every practitioner of the healing art. But to regard this ill-defined attitude as not only influencing the character of the patient, but also as having a direct effect on all the ailments to which the body is subject, is a view that can hardly be accepted so readily. For example, it would seem to be inconceivable that Spirit could have the slightest influence on a parasitic skin disease such as ringworm.

This is an instance of a simple ailment due to a local extrinsic cause. Numerous other conditions might be mentioned, such as congenital malformation, aneurysms, valvular affections of the heart, and strangulated hernia in which curative influence of the Spirit is difficult to imagine. Even if a single well-authenticated miracle in a case of any of these affections could be produced, we should still be met by many difficulties; such as the question why a solitary sufferer, possibly not highly distinguished for his spiritual attributes, should be selected for the manifestation of this power. And all rational people would admit that the occurrence of such a miracle in
a case of strangulated hernia would not justify other patients in postponing operation in the hope of a repetition of this bloodless cure.

Thus there are limitations to the field of operation of Spiritual Healing.

In view, however, of the hopes raised amongst many good Christians that the Church may take part once more in healing the sick, everyone would wish to avoid offending the susceptibilities of enthusiastic and religious people. Still it is by members of the Church that the question of Spiritual Healing has been brought forward, so that it should be for the Church to define her meaning and wishes. In the nature of things it seems impossible to define 'Spirit'; and, perhaps, it would be wiser not to attempt the impossible, nor to endeavour to yoke spiritual forces to purely material conditions such as bodily diseases. But if certain cases are produced as cures by spiritual means, and if the co-operation of the medical profession is desired in investigating such cures, the Church must be prepared to accept scientific methods of inquiry, methods which do not permit of assumptions except as tentative explanations, to be given up when they fail to explain phenomena, or when they are replaced by simpler explanations.
If it should appear that the results of Spiritual Healing are attributable to ordinary activities of the human mind, and that no difference exists between cures by this means and those resulting from ordinary mental influences of the nature of 'suggestion,' then the Church must be prepared to abandon all miraculous explanations in these cases. From the medical point of view the main thing to be insisted upon is that all alleged cures must be submitted to the ordinary examination by observation, experiment, and induction.

At the present time the whole question of Spiritual Healing is in so nebulous a condition that it is not easy to obtain suitable cases for investigation. Much has been said and written on the matter; comparisons have been made with the cures said to be effected at Lourdes; even the Venerable Bede has been quoted as an authority on medicine. But when a request is presented for the production of actual cases for investigation by trained medical men, it is found that the sources of supply are few and very limited.

An examination of some of these cases appears to reveal the fact that so far no actual cure of any definite gross organic disease can be recorded. It must be remembered that to avoid any loophole for error the requirements
of a really scientific investigation are somewhat severe. In the first place the diagnosis of the disease must be absolutely certain. This frequently necessitates microscopical or bacteriological examination. A medical man is not always infallible in his opinion of cases; and it may happen that a condition that has been thought to be cancer turns out to be merely a comparatively harmless inflammatory thickening. Such a condition might have recovered by natural processes without any treatment; to attribute such recovery to any particular treatment that the patient might be undergoing at the time would be rash; to use such a case as an advertisement for that treatment would be dishonest.

In the second place, a fair comparison must be made between the results obtained by the method under investigation, and by other means of treatment. Warts may disappear rapidly under many forms of treatment, or with no treatment at all. To attribute the disappearance of warts to Spiritual Healing would be very unsafe argument.

Thirdly, a careful distinction must be drawn between the cure of a disease and the relief of subjective symptoms.

It is in this matter of subjective symptoms that Spiritual Healing appears to have obtained
the greater part of whatever success it can boast. There is some evidence that under this treatment pain may be relieved, and there is little doubt that patients attain a calmer, happier and more confident frame of mind, however hopeless their disease may be. Their outlook on life is improved, their thoughts are directed into other channels, and the pain is forgotten, or hindered from rising into consciousness.

Yet there are certain dangers connected with the process, to which attention should be called. It is well to remember that, in cases such as incurable cancer, false hopes are being raised, and the patient is deluded into a vain belief that he will recover. How far this is justifiable is a matter for philosophical discussion; moreover it is true that most doctors allow their patients to delude themselves with the same vain hopes. Still, it might be better that ministers of religion should strive for the spiritual welfare of their charges, rather than help directly to maintain these delusions as to physical conditions.

More important still is the possibility that treatment, that might be effective in the early stage of a disease, may be postponed until too late, in order that a trial may be given to Spiritual Healing. It is all very well to say
that ordinary medical means are recognised and that the follies of the Peculiar People and of the Christian Scientist will be avoided; but it must be remembered that a literal reading of the text of St. James undoubtedly may suggest to a deeply religious person that medical methods are of minor importance. 'The Prayer of Faith shall save the Sick': is it not possible that the sufferer may possess a grain of that faith that will remove mountains? And in the end that small focus of malignant disease, that might have been eradicated by the surgeon's knife, has extended and disseminated itself until all hope of cure is gone. And such results are more likely to follow while this treatment remains in the hands of untrained laymen. There is great danger that an earnest person, with limited knowledge both of theology and of medicine, may come to regard himself as superior to theologian and physician, owing to the fervour of his faith, combined possibly with a belief that he is endowed with special powers. It is on practical points such as these that the medical man is entitled to expect an expression of the views of the Church; and in this connexion it is permissible to hope that in the examination of 'special powers' the authorities of the Church will be content to be sceptics, in the
true sense of the word, until irrefutable proofs of the possession of these powers are produced.

In attempting to inquire how far the results obtained by Spiritual Healing justify the movement, the medical man is met by the difficulty that exists in obtaining evidence. It is true that there is a Society whose objects are stated thus:

1. For the cultivation, through spiritual means, of both personal and corporate health.
2. For the restoration to the Church of the Scriptural practice of Divine Healing.
3. For the study of the influence of Spiritual upon Physical well-being.

Investigation of the literature published by this Society does not throw much light on the methods by which these objects are pursued. A pamphlet entitled 'The Principles of Spiritual Healing' seemed to arouse hopes of elucidating the problem. Yet the author says, 'I do not know how "life" is affected by spiritual means, I observe that it is so.' There is no attempt to define spiritual means. Again, it is asserted that no one will ever find, at meetings of the Society, a parade of successful cases. Is the statement, then, of members of the Society to be the only evidence vouchsafed to inquirers? And how far is the second object of the Society to be carried? It must
be remembered that the Scriptural practice of Divine Healing was unassociated with the ordinary medical treatment. In 'The Principles of Spiritual Healing' it is asserted that miracles of healing did not cease; they have only become less frequent because faith is less intense. The second object of the Society is to restore to the Church this practice of healing; and it is difficult to see how the dangers suggested earlier in this article are to be avoided.

The fact of the matter is, that it is useless to attempt to adapt the processes of Spiritual Healing to recognised forms of treatment, until the exponents of the method cease to soar on the wings of the imagination, and descend instead to the more prosaic levels of reason. Nevertheless, there is no doubt that theologians equally earnest, but far more rational than the founder of the Society to which reference has been made, are anxious that something should be done by the Church to assist in the work of restoring the sick to health. These men do not aspire to work the miracles of Christ and the Apostles by laying on hands and anointing with oil, but they wish to retain for the Church some portion of the command 'Preach the Gospel; heal the sick.' This wish is entitled to respectful consideration by the medical
profession, and most certainly will receive it from broad-minded medical men. But inasmuch as the trained physician must be paramount in his own province of mental and bodily disease, it is the duty of the minister of religion to recognise that he is subservient in purely physical matters of health. By all means let him visit those of his own faith who are sick. Let his object be to inspire these patients with hope, directing the sufferer’s thoughts away from his disease to higher things. The laying on of hands and the anointing with oil may well be dangerous, unless used in a purely symbolic sense; for in the minds of the more ignorant such proceedings tend to occupy the same position as the treatment for King’s Evil in former times; and admirable though the spirit of reverence may be, it is not good to attribute miraculous powers to the object revered.

Therefore, let the clergyman be content, for the present, to leave the untrained practice of methods of suggestion to quacks; and investigation of so-called cures to the medical profession. At the same time, let the medical man avail himself of the services of the minister of religion in cases in which exhortation is likely to be of use; for in the field of functional nervous conditions, and slight
mental disturbances, the help of a priest of forceful character, reasonably controlled, may be of great service.

In concluding this article a summary of the suggestions offered for consideration may be made:

(1) The main function of the minister of religion should be concerned with what is called the spiritual side of man, and not with purely material conditions, such as disease.

(2) If ministers regard the Scriptures as imposing upon them duties in healing the sick, they should be content to be subservient to the physician in material conditions that are not included in their training.

(3) In dealing with phenomena as specific as diseases, the Church must be prepared to accept scientific explanations. It is useless to complain of the materialism of doctors in connexion with material physical disorders.

(4) It is not unlikely that the effects of spiritual healing will prove to be merely results of a form of suggestion.

(5) Results that can be described as curative will be found, probably, only in what are known as functional and neurotic conditions.

(6) It is most unwise to countenance untrained laymen in carrying on spiritual healing
in the name of the Church; for in the end the Church may find herself dragged at the heels of quackery.

(7) While much can be done by ministers of religion in encouraging sufferers from disease, or in distracting the attention of neurasthenics, and while such assistance should be welcomed by medical men, yet the Church should beware of attempting to attract believers by means of thaumaturgic displays of healing, which are open to explanation in other ways. The Church should not enter into competition with bone-setters, osteopaths, physical culture quacks, and other undesirable persons.

(8) Opinion on so-called 'special powers' should be suspended until alleged instances of their existence have been thoroughly investigated by competent trained experts.
THE PATIENT

BY

STEPHEN PAGET, F.R.C.S.
THE PATIENT

BY STEPHEN PAGET, F.R.C.S.

The Bishop of Birmingham wrote to me, last year, the following letter. He gave me leave to publish it in the second edition of a book of mine about Christian Science: and he gives me leave to publish it again here:

"... I should wish to make a little more of your admissions as to Mental Therapeutics. Thus—If, as you admit, there are so many functional disorders; and they are curable by mental influences; and religion is a great mental influence; and this influence ("Quietism") is much needed in such and other cases—I should demand of the Church that it should recognise, far more explicitly, this field of legitimate curative power, and control it, and claim it by showing the power to use it. The neglect of this sphere of influence by the Church plays into the hands of Christian Science. (All this could be associated with the revival of unction.)

'Also, I think the medical profession likes—in public—to ignore all this, and thus in its
turn plays into the hands of pseudo-theology. My criticism is that I want your "admissions" made the basis of a more positive claim both on the Church and on the medical profession.

'My own experience in the case of well-to-do people when sick or dying is that the medical profession is very much inclined to exclude religion in any form from sick beds till it cannot be of any use. I do most seriously want to reform (1) the Church, (2) the medical profession, in the light of what you admit.'

This wise letter says all, to my thinking, that need be said as to the duty of the doctor towards the cleric, and the duty of the cleric towards the doctor. It says not a word about the signs and wonders alleged by the Society of Emmanuel in London: and I hope that Dr. Gore, by his silence, condemns them, as not worthy of credence. I hope, also, and am sure, that in a few years we shall hear less about that Society. Meanwhile, I should like to say something about one aspect of this matter of 'spiritual healing,' which has not received so much attention as it deserves. We have heard all about the cleric, all about the doctor: and we are in danger, I think, of forgetting the patient. We have been tempted to believe that the patient, somehow, belongs to the cleric and the doctor. That we may clear our
minds of this mistake, let us put ourselves in the patient's place. Most of us, I suppose, know that place: I have been there half a dozen times. It is the centre of a great planetary system of kind people. Home love, and the affection of my friends, and the pleasant goodwill of the servants, and the wisdom and the gentleness of doctors and of nurses, and all prayers for my recovery, wheeled round me, each in its appointed course. There I lay, and was watched, like a big baby: and these activities of the spiritual life encircled me, day and night, till I got better. The point is, that it all came naturally to everybody. It was the habit of the home, it was our usual way of doing things. My friends did not suddenly begin to care for me: the doctors and the nurses did not suddenly begin to be gentle: the maids were not stung by the splendour of a sudden thought for my comfort: the use of prayer on my behalf was nothing new. Everybody was kind to me, because everybody in the house always is kind to me. They made me comfortable, and one prayed for me, because they are always making me comfortable, and one daily prays for me. All of us, except myself, were doing what we always do: and I was being what I always am. Illness, nine times out of ten, no more
changes a man than sleep and exercise change him. As by a long sleep, or a long day in the open air, we gain tranquillity, insight, and self-judgment, so, by an illness, we gain, if we will, a like measure of self-improvement. The same good thoughts come to us, as we lie idle in a sick-bed, which come to us as we lie idle, in holiday time, on a hillside. An illness, apart from its drawbacks, is in reality a sort of holiday, a dull but not unprofitable vacation, something halfway between a real holiday and what religious people call a retreat. There is no sudden change in the patient’s mind and outlook: only, there is more inlook, more self-doubt, more quietness of vision.

One day, I shall put myself in the patient’s place, and not come out of it: I shall not get well, but die. On that occasion, the love, sympathy, goodwill, medical attendance, and prayers, will be the same as before. They will swing round me once more, each in its proper sphere, these familiar angels and ministers of grace defending me. But, as I begin to stop, so they will begin to stop. It will become absurd, for my friends to call and ask after me; absurd, for the household to devise plans for my comfort; absurd, for the doctors to try to feel what is left of my pulse; absurd, for anybody to pray for my
recovery. Spiritual processes are blessed with plenty of common-sense: they leave off, when it becomes downright foolishness to go on. Let them leave what remains of me, and start again round another centre.

They who desire, extravagantly, to put 'spiritual healing' among the methods of the Christian ministry, seem to me to be losing sight of this fact, that common-sense is an essential part of the spiritual life. Common-sense tells me, that as I was intended to live, so I am intended to die. I cannot see any reason, human or divine, why I should live to old age, and die of that. I would rather not: anyhow, I see no reason why I should. God, who brought me into the world by my mother's pain, will some day put me out of the world, by my own pain. He is in no sense more on the side of life than on the side of death. I have been looking at the 'Order for the Visitation of the Sick' in the Prayer-book: and I am quite sure that nobody now could write anything half so sensible or so majestical. . . . Know this, that Almighty God is the Lord of life and death, and of all things to them pertaining, as youth, strength, health, age, weakness, and sickness. Wherefore, whatsoever your sickness is, know you certainly, that it is God's visitation. And the prayer for
a sick child, also, seems to me a very sensible and beautiful piece of writing. I find, also, a prayer for a sick person, 'when there appeareth small hope of recovery.' I have heard it read over one at the point of death, when there was no hope at all of recovery. 'We know,' it says, 'that, if Thou wilt, Thou canst even yet raise him up.' I hope that I shall not, when I am dying, hear this phrase. It rings false, to my thinking: it offends the natural dignity of a dying man. We doctors are blamed, now and again, for not telling the truth to patients hopelessly ill: but here is the Prayer-book, at the last moment, hardly more straightforward. All the same, this Order for the Visitation of the Sick is admirable; and I desire to contrast it with the following instance, how Christian Science treats the dying:

'Mrs.—— is a widow, and an old friend of mine. In February 1905, her only child, a boy of eleven, was in the last stage of a hopeless illness—mitral valvular heart disease, with rheumatism and dropsy. I had an opportunity of a few minutes' talk with the Christian Science "practitioner"—a sweet, gentle, earnest woman—and asked her if she really thought she would do any good. "Oh yes," she replied, with a smile of confidence; "I have never known a failure." "But," I suggested, "the
boy is very seriously ill:” and I explained the nature of his complaint. Still confidently smiling, the practitioner replied, “We have had worse cases than this.” I told her the best medical advice had been taken, and the doctors had all given the boy up. Upon which the lady remarked, with gentle emphasis, “God has not given him up.” That of course was conclusive, and I left her to do her best. I went away at ten o’clock, and then the Scientist seated herself by the patient, read to him from the Bible and Mrs. Eddy’s book, and exhorted him in some such language as this: “You must not think you are ill, my dear little boy. You are not ill: you can’t be ill. God would not make you ill. He made all things good, but not illness”—and so on, and so on. The boy, I am told, heard her patiently but wearily, and at one-thirty he died. Then the practitioner gathered up her books and papers and went away, and that is the end of the story.’

Here we have Christian Science in a favourable light: all the same, it is not a pleasant picture, these falsehoods told to a dying child. If it be not true that God ‘makes illness,’ and if it be not true that God ‘gives us up,’ then I attach no meaning at all to that Name.

Let us put ourselves at that point of the
case where there appeareth small hope of recovery. The doctors have given the patient up. God, in their opinion, has done the same. The cleric will not say that, not in so many words: Yet, he says, forasmuch as in all appearance the time of his dissolution draweth near, so fit and prepare him, we beseech Thee, against the hour of death, that after his departure hence in peace, and in Thy favour, his soul may be received into Thine everlasting Kingdom. The cleric does not pray for the patient's recovery. He does not expect anything to happen, save the patient's death. He will not point-blank deny the possibility of a miracle: but he neither asks for anything to happen, nor, so far as I can see, wants anything to happen: he only cares to be sure that the patient, who is fast going, shall go the right way.

It is here, on this edge of time between life and death, that the professional spiritual healer loves to perform. He desires to make something happen: he will not take it for granted that nothing will happen.

His position is logical, and may be held in absolute sincerity. Only, he is bound to tell us what, in his experience, does happen: and he is bound to tell us of every case of failure, or partial failure. And we are bound to examine, test, cross-examine, criticise, analyse, watch,
and almost spy upon every scrap of his work; and that in a spirit of hard and well-nigh brutal indifference to his belief in himself as a channel of divine intervention. What else does he expect of us? What else are we here for?

Among a pile of letters and pamphlets on my table is a tract called 'New Eyes in answer to Prayer.' It gives the case of Mr. Evison, of Grimsby. He had something the matter with his eyes. At last, 'while walking out with a friend one day, I put my hand in my pocket for something, and dropped it on the ground: on stooping down to pick it up, the remaining pieces of my eyes dropped out of their sockets on to the ground. They were about the size of the kernel of a nut.' So he went to a 'Divine Healing Home,' where he was anointed with oil in the name of the Lord. Ten days later, as he was praying in his bedroom, he felt two warm fingers touch his empty sockets, and they became warm. Later, at a prayer meeting, his eyes 'came wide open,' and he saw perfectly. Next day he testified to his recovery; and, says the tract, 'When this testimony was given by Mr. Evison, there were fifty-seven cases of blindness restored in answer to prayer.'

I feel sure that the writer of this tract thought that he was telling the truth. And
I am no less sure that a great deal of 'spiritual healing' is just as worthless, just as untrue, as these Grimsby miracles. Till the alleged wonders of spiritual healing, and its unpublished failures, have been all submitted to keen scrutiny, and to every severest and most searching test that can be devised in science, nobody who knows anything about pathology can take much interest in them. So I come back to the Bishop of Birmingham's wise eirenicon.

It is a great pity that the work of the cleric and the work of the doctor should ever clash; for they are ordained (the Prayer-book again) for the mutual society, help, and comfort that the one ought to have of the other. Only, if they are to be friends in ministering to the sick and the dying, they must be friends always. If, in social life, they do not get on well together, they will not work together well in the sick-room. If the doctor makes stupid jokes against religion, and the cleric doses his parishioners with quack medicines; if the doctor is dull to the wonders of faith, and the cleric is dull to the wonders of science: if neither has the grace to recognise and honour and openly praise the good works of the other—how shall they adjust themselves, in the presence of impending death, who thus waste the opportunities of daily life?
THE RELATION OF PRIEST AND DOCTOR TO PATIENT

BY

JANE WALKER, M.D.

PHYSICIAN, NEW HOSPITAL FOR WOMEN
THE RELATION OF PRIEST AND DOCTOR TO PATIENT

BY JANE WALKER, M.D.

In considering the subject of Religion and Medicine, we shall be helped by looking back to the beginnings of things, when people first realised that illnesses existed, and that certain of them were curable. They knew nothing of internal anatomy or physiology, nothing of the origin and treatment of disease, nothing of its infectious, communicable character. The treatment, or, at any rate, the healing of disease, must have been by means of what seemed to be mental influences in those early ages. Why, our very word 'Influenza,' revived within comparatively recent years, shows how vaguely and imperfectly was understood a disease which now we recognise as having a definite train of symptoms, but of which we still know so little that we speak of it merely as an **influence**.

The idea of mental influence in disease was
first scientifically formulated about twenty-five years ago, and was provided with one of those queer names which we now use more or less glibly, with a sort of comforting feeling that we understand the subject, when we have successfully mastered the spelling and pronunciation—the scientific name *psychotherapeutics*, or, in plain English, *mind cure*. These investigations were undertaken in France, to start with, at Nancy University, by Liébault, who published, in 1866, 'Treatment by Suggestion,' and by Bernheim, and simultaneously in Paris by Charcot, and they were primarily to observe sundry methods of treatment used at that time in an unscientific manner, such as animal magnetism, mesmerism, hypnotism, &c. Liébault's book, which was taken little notice of at the time, gave a full description of the methods he pursued, which more or less coincide with those followed by doctors who practise Treatment by Suggestion and Hypnotism at the present day. He lived a retired life, and practised entirely amongst the poor, who were devoted to him, but, at the same time, regarded him as an amiable enthusiast. Liébault finally retired on a very small competency, not acquired from his practice, which was altogether unremunerative.
As a result of this gathering up of all these so-called occult methods of treatment into the more or less exact science of Psycho-therapeutics, have come into prominence many cults—or sects, shall we call them?—such as Mental Healing, Faith Cures, Peculiar People, Metaphysical Healing, Christian Science, each of which is overlaid with doctrines of a more or less dubious kind. The growth of these various bodies of late years has been extraordinarily rapid: to mention two of them only, Christian Science and New Thought are now enthusiastically practised and believed in by many thousands of people, both here and in America, and hundreds of churches have been provided and erected in their names.

It must not be lost sight of that Christian Science, as well as New Thought, which has been described by Mr. Dresser, one of its chief exponents, as being 'a common-sense, rational phase of the Mental Healing Doctrine,' 'are dealing with genuine facts in the sphere of Mental Therapeutics'; but these facts are entirely independent of the theories by which either school attempts to explain them.

The spread of Christian Science was viewed with considerable alarm by many influential members and dignitaries of our own Church,
and this feeling was brought to a head at the Pan-Anglican Congress in 1908, when a large meeting on the subject was held at the Albert Hall, which is fully reported in the handbook of the Pan-Anglican Congress.

Following on the Pan-Anglican Congress meeting came the Pronouncement of the Bishops assembled in Conference at Lambeth, in July 1908. The report of this Conference is published by the S.P.C.K. as a pamphlet. On November 16, 1908, an important conference on Spiritual Healing was held at Sion College, which was presided over by Prebendary Pennefather, who said that the Church had too long neglected that part of her teaching and ministry. Mr. Hickson gave an account of the Society of Emmanuel, and stated that they desired to revive in the Church the use of the gift of healing committed to her by our Lord.

The Rev. Francis Boyd explained the objects and work of the Guild of Health. They held that bodily healing was not of primary importance, that sanctification might indeed be gained through sickness, but that a fuller sanctification might be gained by those who sought to be made whole by a more real and vital union with our Lord. The Guild of Health, Mr. Boyd proceeded to say,
recognised three systems of healing—physical, mental, and spiritual—though there was not necessarily any opposition between them. They felt, however, that Spiritual Healing was the only system which concerned the Church. They were quite alive to the dangers of over-estimating the value of bodily health, and only desired to further it so far as it ministered to the perfection of the whole nature of man. After some further discussion, a resolution was passed that, 'In the opinion of this Conference, the time has come to form a Central Church Council in the diocese of London, for the consideration of questions connected with Healing by Spiritual means.'

At the outset, we must take exception to Mr. Boyd's three systems. I very much question whether there is more than one system, and I am convinced that physical and mental are one and the same. And I would go so far as to say, that the disastrous mistakes that have been made in the past, and which are still in operation to-day in the treatment of one large section of sick people, viz. the insane, largely owe their origin to this arbitrary division. And, by a curious irony, the branch of medical science where there is the most marked predominance of materialism
is this very department of mental diseases. This is all the more curious when we reflect, what occult influences have been, in all ages, supposed to work upon the insane. The obnoxious word 'lunatic' is a proof of this. The moon was by some supposed to have a deleterious effect on the intellect; insane persons were spoken of as 'moonstruck'; the periodicity of the mental attacks was also supposed to have some relation to the lunar interval. Indeed, the whole subject of insanity bristles with occult and mysterious theories. The really hopeful treatment of insanity began when it—a mental disease—was treated, not by mental, but by physical methods, and the more mental and physical are taken together as one and the same, the more rational and productive of good, in the best sense, is our treatment likely to be. Indeed, the whole indivisibility of the three systems is nowhere so well shown as in the arbitrary division of Religious Insanity. Surely if we try to turn the minds of the sufferers from any considerations of religion, by removing their Bibles, by preventing them from any religious discussion, or from taking part in any religious ceremonies, we are helping to keep up the evil. People, as we put it, become insane on religious matters, not only because they have been dwelling on
the subject unduly, but because it is naturally of the greatest importance, and absorbs more attention than probably anything else in the world. Now, as the more purely physical, as distinguished from the more or less occult methods of regarding the insane, has become the more enlightened and modern view of the subject, so has the spiritual method of dealing with it come into prominence. Spiritual ministrations to the insane may be thought to be useless, or, at any rate, to be fraught with little practical utility. Comparatively recently a man who had charge of a country parish was appointed chaplain to Broadmoor, which is the asylum for insane criminals. A friend, on being told of the appointment, said to him, 'Why, whatever will you say to them? You can only talk to them of their sins.' 'Talk to them of their sins!' he said; 'I shall never mention them.' I shall talk to them of Hope.'

I have thought it advisable to dwell rather at length on the question of the insane, because it really rather fairly represents my point of view on this subject. Whether you agree with me or not, it is better that I should state quite fairly and straightly my position, which has only been reached by honestly

1 'The Society of the Crown of Our Lord' was formed for the purpose of supplying spiritual ministrations to the insane.
striving after truth, and by looking fully into the subject for the purposes of this paper. In talking about Spiritual Healing, we are hampered at the start, because we have only actual knowledge of physical things, i.e. of things as they appear to us here. We have to define spiritual things in physical terms, because they are the only things we know and understand. Time and space do not exist in the spiritual domain. Take just one word in illustration of my meaning, the word Rest. Our present state of being here has certain peculiarities. Labour involves rest from labour, and if the limits of rest and labour are exceeded, the result is ruin to man's moral and physical being. Disease is sure to follow the inactive mind or body, and then comes a time when 'we cannot do the things we would.' But these things do not exist in spiritual language. 'They rest not day and night, but cry "Holy, Holy, Holy."' When we pray 'Eternal rest grant them, O Lord,' we have no thought of a period of rest as we understand it, but rest in and with God.

We are far too apt to think that suffering is an evil—it is not necessarily so; on the contrary it may be a blessing, because it is often a direct means of advance towards perfection. Far
too much attention is paid at the present day to temporal benefits. 'Get rid of poverty, of suffering, and the world will be virtuous and happy,' but this is not so. The people who starve and brutally ill-use their children are not the very poorest; they are usually well-to-do in the world. There is a great deal too much of considering poverty as a real cause of suffering. Christ's mission of redemption was not primarily a mission for the relief of suffering. If He bids us to take up our cross, He also bids us, as a quite essential corollary, to follow Him. Indeed, taking up our cross is useless, if we do not follow Him. Pain, far from being shunned, should be welcomed and embraced, because it brings us nearer to the sufferings of our Blessed Lord. It is not, of course, mere pain in itself that lifts and cleanses: it is pain rightly and courageously borne, from whatever motive. If this be true, the modern revolt against all suffering—and here I quote from the late Miss Caroline Stephens's article on 'Pain,' published in the *Hibbert Journal* for October 1908—'is obviously suicidal. To extinguish all suffering, were that possible, would be to deprive the world of a leverage as all-pervading and effectual towards spiritual elevation and purification, as is gravitation towards stability.'
Pain and evil are not interchangeable terms, but are quite different. Evil cannot be innocent, though pain can be, and often is. When the disciples said, 'What hath this man or his parents done that he should be born blind?' they formulated the usually accepted idea at that time, and an idea, moreover, that dies very hard. The whole treatment of disease in the Middle Ages was based on it.

If we quite briefly consider our Lord's miracles, they were *signs* of His Divine mission, not proofs, and in performing them, He felt limitations; for we are definitely told that in Capernaum 'He did no more mighty works, because of their unbelief.' These signs were sudden manifestations of His power, and as such they are preferably called Divine Healing. They showed the very highest degree of spiritual power, but there was nothing really new. Christ was the perfect manifestation of eternal things, and eternal things are obviously never new. Perhaps the fact that our Lord thought it worth while to show his power in bodily healing was intended to teach us that to keep our bodies in health is an important religious duty, and more than that, that all hygienic social work undertaken is an important part of the duties of religion. Both nursing and doctoring bring us very near
to part of the work of Christ, for He went about doing good to the sick, and He symbolised this, not only by His healing words, but by the simple medicines and nursing of the Good Samaritan. But just as illness is by no means caused by evil or ill-doing, so it is equally clear that goodness does not of necessity bring health. The question of bodily health has no connexion with spiritual conceptions at all. If it were so, the persons who are the strongest physically would be the most spiritual; but we know, of course, that this is not so. Take St. Catherine of Siena, one of the greatest of saints, statesmen, and scholars that the world has ever known. She healed others, but she died herself of a lingering, painful disease, at the early age of thirty-three. Also St. Paul, who prayed the Lord thrice that the thorn in the flesh which tormented him might be removed. And the Lord's reply has been a help and comfort, and a lesson to countless thousands ever since. 'My grace is sufficient for thee, for My power is made perfect through weakness.' And what we so very often see now, persons bereft of all that makes life dear, in suffering of mind or body maybe, yet rise above their weakness, and carry through such reforms and such noble acts as they never could have done had
they been allowed to remain in bodily health and comfortable and happy surroundings. Indeed, St. Paul's affliction was the means of his converting the Galatians, for his illness compelled him to stop with them for a time, and in writing to the Corinthians from them, he could truly say, 'Most gladly, therefore, will I rather glory in my weaknesses that the strength of Christ may cover me.' To repeat, it is our duty, as far as can be, to keep our bodies in health, though we can most of us conceive of circumstances when to lose our life may be indeed to save it.

In a sermon preached for the 'Guild of Poor Brave Things,' the present Bishop of London, who is the president of the Guild, said: 'What made more impression on me as an undergraduate at Oxford than all the sermons I ever heard in chapel was a young don, insisting, at the risk of his life, on ministering to an undergraduate dying of a most infectious disease.'

After all, St. Paul's life, as narrated by himself, can hardly have been considered as hygienic. 'Of the Jews five times received I forty stripes save one. Thrice was I beaten with rods, once was I stoned, thrice I suffered shipwreck, a night and a day have I been in the deep; in journeyings often, in perils of rivers, in perils of robbers, in perils of my own
countrymen, in perils from the Gentiles, in perils in the city, in perils in the wilderness, in perils in the sea, in perils amongst false brethren; in labour and travail, in watchings often, in hunger and thirst, in fastings often, in cold and nakedness. Besides those things that are without, there is that which presseth upon me daily, anxiety for all the churches.' In comparison with this, the 'Don't-worry Gospel' of the Christian Scientists seems utterly beside the mark. Health is undoubtedy good, but it must sometimes be cast away in the service of others.

Of course there is a philosophical difficulty in the whole position of the relation of religion to medicine. In a manner they are, as it were, at loggerheads from the outset. The Church is bound to teach that it matters not how long or how short a man's life is, if it is rightly spent, whereas the doctor's point of view must be to keep the man alive at any price. And although we may feel that, under certain circumstances, the medical attitude might be modified, it is the only safe one in the present state of our knowledge. Euthanasia seems, on the surface, a most humane and comforting suggestion, but it is allowing us finite beings to take into our own hands things which are beyond our comprehension. We
all know of instances where it must have been thought that death would be preferable to life; but apart from the presumptuous thought of mere human beings, look how often the maimed bodily frame 'rises on stepping stones of its dead self to higher things.' A man struck with blindness, for example, may be living a full and perfect and whole life, in spite of his maimed condition, because he puts out all his powers and lives at the top of his bent. Such a man is in the highest state a healthy being. The unwhole man is one who is always in terror of his life, and who does not accept with faith and cheerfulness, and in a life of prayer, the ills that are laid upon him by a wise and Divine Providence. It is true that there are more things wrought by prayer than this world dreams of. Yes, but even our prayers have necessary limitations arising from our imperfect knowledge, and when St. James declared that the prayer of faith shall save the sick, he spoke at a time when scientific investigation was non-existent, and when people must have been sorely distressed by their total inability to overcome the diseases from which those around them were suffering. But for us, whose physical knowledge is so much more exact, to refuse to accept the remedies which hard and patient toil has
discovered, under God's help and guidance (there whether we recognise it or not), is both presumptuous and foolish. Spiritual Healing—i.e. a quasi-miraculous process—must die a natural death, even if the agony is prolonged. It is simply pandering to charlatanism, and by its exaltation of the Health of the Body, is almost pagan in its effects. It is, moreover, an emphatic expression of individualism at a time when co-operation in every direction is the natural and right trend of affairs; for truly never did we feel so strongly as now, that no man liveth to himself, and no man dieth to himself—as true of nations as of individuals. It is, therefore, in the highest sense, reactionary, and a sentimental attempt to put the clock back, which is doomed to failure. Take one item, which is wrapped up in this idea of Spiritual Healing, and that is Demoniac Possession. This was an ancient belief, as is shown by some of the miracles narrated in the Gospels, and there is an attempt to revive it in the present day, and with that, a practice of Exorcism as a cure for it. 'But,' and here I quote from 'Religion and Medicine,' 'it is a significant fact that as education spreads, belief in demoniac possession dies out, and the greatest strongholds of the belief to-day are in non-Christian countries.' A possible
explanation of this is, that in Christian countries, spiritual forces have been actively at work for many generations, and that this spiritual activity has weakened the power of the forces of evil. There is, too, no blinking the question that the behaviour of insane people, or even of people supposed to be insane, might be explained on the theory of demoniac possession. For example, how often one sees people generally good and kind, and even truly religious, go suddenly into a fury of temper or violence of some kind; or in delirium we know that quite sweet, innocent people say dreadful things which one would think they could not even know. No doubt to some people the temporary possession by some evil spirit is a more comfortable theory than that it is a revelation of the natural man in us, when discipline and training are in some way relaxed, and that such is our real nature let loose.

The dangers of a belief in, and of practising consciously, Spiritual Healing are great, as far as doctors are concerned. It simply puts a premium on ignorance and laziness, and is disastrous to exact knowledge and scientific investigation. Spiritual healers assert that to dwell on the abnormal and pathological prevents their work on the normal. But who is to say what is the normal, till abnormalities
have been weighed and considered? No, to people like myself who practise medicine, it is a dangerous and uncertain weapon to employ. Far be it from me to say that the spiritual side of medicine should be ignored altogether. We know that our prayers, rightly offered, are a help to our patients—we know that the ordained Sacraments of the Church are a help to them. Moreover, we know very well that there is no royal road to the treatment of disease. We know well how many cases there are in our various hospitals and infirmaries, that have baffled all the skill of diagnosis and treatment that has been vouched to the world up to the present time. Is it rational to believe that such cases will be healed by a glance, or a touch, or a word of any merely human person, however holy, who is manifestly ignorant of any ordinary scientific knowledge? No, Spiritual Healing as a cult, as a part of the sacramental life of the Church, will cease to exist, but all that has come out of it will be quickened and strengthened. We shall feel greater need of prayer and intercession, and we shall feel more and more the real value of meditation.

That the medical profession is fully alive to the importance of the question, in spite of its difficulties, may be inferred from the
following extract from the *British Medical Journal*, November 6, 1909:

'We welcome the discussion at the Harveian Society, as a sign that the profession is more fully realising the value of certain potentialities of healing and relief, which an ingrained materialism passes by on one side. All around us spiritual or mental healing is going on. It is our duty, as it is our interest, to study the process scientifically, to define its limitations both in regard to the conditions to which it is applicable and to the persons who can successfully apply it, and to recognise perhaps more fully than before that man is a compound of body and spirit, both of which have to be taken into account by those who undertake the treatment of disease. The first step to be taken, if the profession is not to surrender a large part of its sphere of usefulness, is that medical practitioners should be trained in psychology as well as in physiology. In saying this we do not wish to be understood as pinning our faith entirely to experimental psychology. A careful study of the works of the great masters of the human heart is at least as important as the estimate of time reactions and the accuracy of visual impressions.' 'A careful study of the works of the great masters of the human heart'—this rings true, and makes
one hopeful, in spite of the confusion in terms that exist in regard to Psychic Healing and Spiritual Healing.

Spiritual Healing may be defined as a change in a person's point of view. It may be a question of building up character, or of development of spiritual attributes. In both cases, it is essentially a matter of instruction. And the teaching will be effective in proportion as the teacher is possessed of sincerity and sympathy. I am anxious to be most emphatic in saying this, because so much misunderstanding has arisen of late on all sides, owing to misconceptions on this point. Spiritual Healing can only, in quite a secondary way, be a physical process. Again, take the case of a man who becomes blind in a way that prohibits any idea of his ever recovering his sight; he may develop into a miserable, discontented being on account of his affliction. He comes under the influence of some teaching, of some person, or of some sudden religious inspiration. He is healed. Can he see again? No, but he has risen superior to his blindness. He is a whole man once more. This is all that he and his lay friends know. He may even enjoy better physical health than he did while his blindness oppressed him. Or, again, there may be morbid physical conditions directly or
indirectly attributable to a morbid temperament, sleeplessness due to wrongdoing, or chronic dyspepsia due to worry. In such cases as these, the doctor may do little or nothing. The malady is only incidentally a physical one. Here 'Spiritual Healing' in the true sense is the only remedy, and every liberal-minded medical practitioner would desire it for the patient.

Practically, as I have repeatedly found from experience, priest and doctor can combine to the great advantage of the patient. Medical practitioners need have no fear that, with wise and experienced priests, they will find their special province interfered with; on the contrary, their hands will be strengthened, the patients calmed, and their fortitude increased. It has been my lot many times to find the irritable patient resentful of her illness, and of God's dealing with her, brought to a calm, hopeful, restful frame of mind, and that by the ministrations and prayers of a wise and tactful priest.

Perhaps St. Catherine of Siena expresses what is meant by all this in speaking of praying for others. 'It is toil for him... to hold him in the presence of God.' And it is here that the priest can so greatly assist us in our labours on behalf of those weak or sick ones who have been entrusted to our care.
FAITH AND MENTAL INSTABILITY

BY

THEO. B. HYSLOP, M.D.,

SUPERINTENDENT OF BETHLEM HOSPITAL
FAITH AND MENTAL INSTABILITY

BY THEO. B. HYSLOP, M.D.

The Tendency for Insanity to increase on Account of the Stress of Life.

THAT there is a tendency for insanity to increase on account of the stress of competition and all the complexities of modern civilisation few will deny. The burden of taxation upon the nerve tissues and the drain upon their stores of energy must necessarily go on increasing as the uses for the physical mechanism of the body and limbs diminish and become replaced by the more complex nervous activities essential to brain and mental avocations. The influences of rural and urban life, trades and occupations, &c., as favouring the occurrence of insanity, have been dealt with in an exhaustive manner in various reports, treatises, and innumerable papers, and the result has been to apprise us of the fact that the percentage of individuals who are incapable by reason of mental perversion or defect from
taking active and useful parts as citizens far exceeds our previous conceptions as to the extent of the degeneration in our midst.

It is well-nigh impossible to obtain a complete census of the physical and mental states of the people. Statistics furnish us with so many fallacies that for present purposes I prefer to omit them, and deal only with broad issues which seem to have direct bearings upon the mental health of the community.

It is now an accepted fact that civilisation, with its tendencies towards the aggregation of individuals into dense communities, favours the occurrence in those communities of overcrowding, pauperism, crime, and degeneration. For those designed by habit and heredity to rural life, migration to cities where the struggle for life is continued under totally different circumstances is disastrous, and for them the step from country to town is but one of the commonest of all the steps towards mental and physical deterioration, the accidents of civilisation finding in them merely the readiest victims.

The necessity of this migration, as determined by the state of agriculture, makes it none the less an evil, and it is a symptom in the evolution of an essentially agricultural race which is fraught with extreme danger to
the maintenance of its nervous and mental stability.

The problem, however, has a different aspect for those who by habit and heredity are trained for city life, and certain it is that increased facilities for travelling are tending to decentralise our cities and thereby render the city dwellers healthier and more fit to cope with the drain upon their nervous energies. As a physician, it would appear to the writer that the problem of Sunday observances in town and country have different bearings on the health and physical fitness of the people. There is no doubt that periodic decentralisation of town dwellers is essential to the maintenance of bodily health, and it is also true that physical exercise and change from mental to physical functioning and *vice versa* is essential to all—i.e., if the balance between the mental and physical powers is to be adequately maintained. It is, of course, to be understood that to a physician the preservation of this balance is his first care, and to him is entrusted the function of aiding in the proper observance of all that is in agreement with biological and, therefore, natural laws. To him there is a great difference between 'observance' and 'belief'; and he sees in them either mutually co-operative
or mutually destructive factors for good or ill respectively.

If religious observances, under determined conditions, are found to be useful and essential for the sane in mind and body, they are also likely to be so, under conditions otherwise determined and arranged, for the insane. Many insane patients are totally incapable of attending any religious function. Some must be prohibited; others may be encouraged. As an asylum physician the writer may state that a generic case of religious excitement or enthusiasm may most advisedly even be restrained from religious functions until at least the acute symptoms have subsided. There can be little doubt that no religious officer would be likely to succeed in accomplishing much for patients without an accurate knowledge of insanity and the mental experiences of those whom he seeks to influence. The fact that mental aberration forms a special study and phase of life increases his difficulties and limits his possibilities. Where there is apparent failure both inside asylums and without, such failures may very possibly be attributed to the deficiencies of the doctrine, the discipline of the religion itself, the organisations peculiar to it, or the functionaries associated with it in our day. If the Christian
religion is a true philosophy, it is the duty of all who profess Christianity to assist in the practical application of its precepts, where such can be judiciously and safely applied, taking religious things perforce as they find them, and utilising their own special knowledge to the best possible advantage, according to the conditions they find.

Is a person with deep religious conviction better equipped to face the stress of life than an unbeliever? An answer to this question was given by the writer in a paper read at the annual meeting of the British Medical Association held at Leicester in 1905. In stating that 'a true and philosophical religion raises the mind above a mere incidental emotionalism' he used the word 'religion' in its literal sense, as derived from re and lego, to gather and consider, as opposed to negligens. He in no way extended its connotation so as to include demonstrations of incidental emotionalism, superstition, or fanaticism. Religion and moral obligation he considered to be almost convertible terms, both equally compatible with intuitionalism, utilitarianism, or any other 'ism' derived from the study of the laws of life and mind. Moral laws are generally principles of thought and action, which an intelligent being must
apply for himself in the guidance of his conduct, and the translation of such general principles (expressed either in general abstract form or in the form of a command) into particular actions. Conformity with such precepts of morality may with reason be regarded as a safeguard against the 'lusts of the flesh.'

Religious enthusiasm in itself cannot justly be termed an evil. Rather does it embody the most healthy and preservative development of our social forces. Like many other tendencies of the mind, it is subject to exaggeration, misapplication, and a predominance of the emotions over the intellect. The typical cases of religious insanity directly developable from sectarian and even undenominational religious enthusiasm, from religious meditations, exercises, devotions, or superstitions, are by no means so common as they are supposed to be by the uninitiated observer. The true point lies in this, that very many mental cases bear a strongly marked religious or at least moral aspect. The psychology of the subject will show, for example, that acute depression—a predominant phase of abnormal emotional life—leads almost necessarily to a religious interpretation. And this is even more the case
with many actual sense perversions. Such, I mean, as have ever been associated with the ideas of the supernatural.

These are not necessarily caused by religious over-excitement or enthusiasm. They may assume the appearance of it, because, being the deepest and most real feelings, desires, and convictions of the perverted organic life or of the moral reaction which accompanies it, they cannot well be expressed or described except in strong moral terms. Over and over again does this appear, and often among those least likely to be suspected of any religious predisposition. That these feelings should be clothed according to the prevailing ideas and creed of the patient is an essential reproduction of the mind. But, after all, this only relates to the form of their appearance, and there are many things which lie deeper.

Religious excitement is not infrequently assigned as a cause of insanity. The writer has stated elsewhere his belief that the philosophy of the infinite, far from being a source of aberrations of thought which may be deemed insane, is the ultimate point of our mental evolution, and that a true and philosophical religion raises the mind above a mere incidental emotionalism and gives stability. With no religion and no moral obligation the organism
is apt to become a prey to the lusts of the flesh and their consequences. Gasquet observes that religion may either produce or tend to hinder unsoundness of mind; that it may cause certain symptoms of insanity or modify them; and, lastly, that it may be employed as a means of moral prevention and treatment. He believes that every form of religion, however widely it may differ from our standard of the truth, if it enforces the precepts of morality, is a source of strength to the sound mind that sincerely accepts it.

Clouston has justly observed that far more depends upon the brain that goes to church than upon what it may obtain in the church. That is to say, there must be the predisposition to break down, the religious influence being often merely an accident. It must also be remembered that religious over-enthusiasm may be merely a symptom and not a cause.

Much misconception through misquotation has arisen in connexion with the writer's views as to the therapeutic value of prayer. Reference to the context of his views expressed before the Society for the Study of Childhood will show that reference was made to the habit of prayer in childhood, and its therapeutic value was there urged more as a preventive
than as a curative agent. It was urged that the mental hygiene of childhood was not to be determined by any special denominational method.

Such limited methods may result in the fixity of an idea or belief quite compatible with usefulness in any sphere of activity, but they do not deal with the broader and deeper question of the preservation of the mental health of the individual. The exaggerated importance of the denominational question, which has engendered passive resistance, ought to give way to the question of mental health and engender a strong and active resistance to all that tends to narrow or circumscribe the mental life of the infant. It ought to be our object as teachers and physicians to fight against all those influences which tend to produce either religious indifference or intemperance, and to subscribe as best we may to that form of religious belief, so far as we can find it practically embodied or effective, which believes in 'the larger hope,' though it condemns unreservedly the demonstrable superstition and sentimentality which impede its progress and power. As an alienist, and as one whose whole life has been concerned with the sufferings of the human mind, the writer believes that of all the hygienic
measures to counteract disturbed sleep, depression of spirits, and all the miserable sequelæ of a distraint mind, he would undoubtedly give the first place to the simple habit of prayer. Let the child be taught to believe in an anthropomorphous God the Father, or in an all-pervading medium of guidance and control, or in the integrity of a cosmic whole, with its transmutations, evolutions, and indestructibilities. It matters little, for they all lead in the same direction. Let there but be a habit of nightly communion, not as a mendicant or repeater of words more adapted to the tongue of a sage, but as a humble individual who submerges or asserts his individuality as an integral part of a greater whole. Such a habit does more to clean the spirit and strengthen the soul to overcome mere incidental emotionalism than any other therapeutic agent known to him. Our schools are as gardens for the cultivating, judicious pruning and sustaining young life by gardeners who have, or who ought to have, full knowledge of the tender plants under their care. Our churches are to the moral welfare of the community as our schools are to the intellectual. The church has been aptly termed 'God's Garden,' where the art of living good lives and the making of character is helped by specially
appointed gardeners. It is needless to say, however, that the light of reason or sanity, as bestowed upon us by Nature, is the light to which all other considerations must give way lest we in our turn too soon pass the borderland of knowing things as they are.
MEDICAL ASPECTS OF MENTAL HEALING

BY

H. G. G. MACKENZIE, M.A., M.B.
I have been asked in this chapter to put together some recent expressions of opinion by members of my own profession on the subject of 'mental' and 'spiritual' healing. No attempt whatever is made to give an exhaustive summary. It will be sufficient for my purpose if I can make clear to the non-medical reader—

(1) That there is nothing new in the elaborate and confident pretensions now being thrust forward by a variety of 'healers.'

(2) That, so far from scientific medicine 'standing helpless in the presence of a new phenomenon,' she is in possession of a very large amount of clinical material on which quite definite conclusions have been formed; and, as always, she is perfectly ready to consider and investigate any new evidence.
which might tend to mitigate the force of such conclusions.

Now, there are obviously two main lines of investigation. We may consider (1) the à priori reasonableness of the claim that certain bodily diseases can be cured by 'mental' or spiritual processes, or we may proceed to (2) an à posteriori investigation of cases of alleged cures. A third method of investigation, that which is, of course, adopted in all cases of scientific treatment of disease by new methods, viz. the tabulation of all cases treated, with the diagnosis, extent of disease, immediate and permanent results, negative as well as positive, noted in each case, is not usually possible, since no psychic or spiritual healer whom I have ever met seems to consider such tabulation at all necessary or even desirable.

In the first place, I submit a somewhat long quotation from an admirable paper by one of the greatest medical authorities in the English-speaking world, Professor W. Osler.

'An influenza-like outbreak of faith-healing seems to have the public of the American continent in its grip. It is an old story, the oldest indeed in our history, and one in which

we have a strong hereditary interest, since scientific medicine took its origin in a system of faith-healing beside which all our modern attempts are feeble imitations. . . . Once or twice in each century the serpent entwining the staff of Æsculapius gets restless, contorts, and in his gambols swallows his tail, and all at once in full circle back upon us come old thoughts and old practices which for a time dominate alike doctors and laity. As a profession we took origin in the cult of Æsculapius . . . whose temples were at once magnificent shrines and hospitals. . . . Amid lovely surroundings, chosen for their salubrity, and connected with famous springs, they were the sanatoriums of the ancient world. The ritual of the cure is well known, and has been beautifully described by Pater in Marius the Epicurean. . . . The popular shrines of the Catholic Church to-day are in some ways the direct descendants of this Æsculapian cult, and the cures and votive offerings at Lourdes and Ste. Anne are in every way analogous to those of Epidaurus.'

Osler goes on to speak with much tenderness of the apparently ineradicable nature of the credulity evinced not merely by the multitude but by persons educated widely, if not well, in the matter of the healing of disease. It is indeed a portentous fact. The
slightest acquaintance with the history of therapeutics, the most casual examination of the evidence of alleged cures, the faintest stirring of the reasoning faculty, as the votary asks himself whether the foremost pathologists who work continuously with the best available material in an institution devoted to the scientific study of cancer will not be more likely to arrive at a correct estimate of the probability of cure, by means other than extirpation, than a quite uninstructed masseur who has taken to 'spiritual healing,' these, one would suppose, would be sufficient to check the growth of credulity which we see in such evidence around us. Yet the reader will probably feel that Osler is not going beyond the warrant of easily ascertainable fact when he says:

'Ve must acknowledge its potency to-day as effective among the most civilised people, the people with whom education is the most widely spread, yet who absorb with wholesale credulity delusions as childish as any that have enslaved the mind of man.'

Professor Osler's conclusion is worth quoting:

'Having recently had to look over a large literature on the subject of mental healing, ancient and modern, I have tried to put the
matter as succinctly as possible. In all ages and in all climes the prayer of faith has saved a certain number of the sick. The essentials are, first, a strong and hopeful belief in a dominant personality, which has varied naturally in different countries and in different ages: Buddha in India and in Japan, where there are cults to match every recent vagary; Æsculapius in ancient Greece and Rome; our Saviour and a host of Saints in Christian communities; and, lastly, an ordinary doctor has served the purpose of common necessity very well. Faith is the most precious asset in our stock-in-trade. Once lost, how long does a doctor keep his clientele? Secondly, certain accessories—a shrine, a grotto, a church, a temple, a hospital, a sanatorium [Osler might have added the admirably devised entourage in such places as 'Physical Culture' Institutes and 'light cure' establishments], surroundings that will impress favourably the imagination of the patient. Thirdly, suggestion in one of its varied forms—whether the negation of disease and pain [as among the 'Eddyites'], the simple trust in Christ of the Peculiar People, or the sweet reasonableness of the psychotherapeutist. But there must be the will-to-believe attitude of mind, the mental receptiveness—in a word, the faith which
has made bread-pills famous in the history of medicine.' We must, however, recognise the limitations of 'mental healing.' 'Potent as is the influence of the mind on the body, and many as are the miracle-like cures which may be worked, all are in functional disorders, and we know only too well that nowadays the prayer of faith neither sets a broken thigh nor checks an epidemic of typhoid fever.'

The following extract is from an article in the *British Medical Journal* of March 13, 1909. The article begins by quoting from a paper by Dr. Allan Hamilton (U.S.A.) to the following effect:

'In all this agitation, it would almost seem as if the intelligent physician had never made use of psychotherapy, but that he was a mechanical giver of drugs and took little or no interest in his patients. If the new critics of the medical profession, who have been so active of late, would take the trouble to investigate, they would often find, among the great and successful men of all times and of to-day, that the human side is very strongly developed, and that their patients are studied from every point of view, and treated accordingly.'

'We would add,' says the writer of the article in the *British Medical Journal,* 'that
the intelligent application of the physician’s knowledge of the influence of the body on the mind is the one condition of success in the difficult art of dealing with patients and reinforcing the curative power of Nature or, what comes to the same thing, enabling sufferers to work out their own deliverance from the thraldom of functional disease. All really great physicians have used this force, sometimes, it may be, unconsciously, but often with deliberate intent. It is the power of influencing the mind of the patient or, in other words, of exciting confidence in his gift of healing, that makes what is called "personal magnetism."

At this point I may be permitted to offer one or two observations.

(1) To speak quite strictly, it is not a question of ‘à priori’ possibility or impossibility. As Huxley pointed out, twenty years ago, few things can be said to be impossible except mathematical misstatements or manifest contradictions. Thus 2+2 cannot possibly yield any result but 4. A square circle, a raised depression, are, in the strictest sense of the term, impossibilities. But, with regard to an enormous number of alleged phenomena popularly styled impossible, what is really meant is either that they are not impossible at all, but only in some high degree improbable,
or that we have not sufficient knowledge to enable us to say whether or not they are impossible. In any case, before accepting them, we are bound as honest men to demand evidence which may be thoroughly sifted. The sort of stuff which we usually get, when we ask for such evidence, will be instanced at a later stage.

(2) Again, to speak quite strictly, I do not know that anyone would care to draw a hard-and-fast line between what is 'functional' and what is 'organic.' These terms are extremely convenient, but we must remember that they are only terms. There is an oft-recurring danger, against which we all require to be continually on our guard, of falling into the old error of the realists. 'Animate and inanimate' (assuming that the recent claim to have demonstrated in metals a process of reproduction analogous to those observed in protoplasm is endorsed, as seems probable), 'genus and species,' 'animal and vegetable,' these and many others are eminently useful classifications, and the border line between each and its opposite varies from comparative precision to extreme vagueness. But in no case are they absolutely precise in the sense in which the distinction between an integer and a vulgar fraction is precise. And in the
matter of the terms 'functional' and 'organic' we must walk very warily indeed. Is epilepsy a functional neurosis or an organic disease? Analogy suggests organic changes. No such changes have been constantly demonstrated by *post mortem* evidence; partly, of course, because *post mortem* examinations of cases of death in the epileptic or epileptiform condition have been extremely rare, and are not very common in cases where there is a well-authenticated history of attacks; but partly because our investigations into the minute anatomy of many morbid conditions are at present barred by the limitations of microscopic vision. We have no right whatever to assert dogmatically that there is no organic change in a tissue because we cannot see it under a magnification of 1000 diameters—though for a variety of reasons, which all pathologists will recognise, it is not altogether *probable* that a magnification of 10,000 diameters would in such cases demonstrate a constant change. In any case, if we are told by a spiritual or psychic healer that he cures cases of, let us say, old-standing chronic nephritis or cirrhosis of the liver by his own peculiar methods, our reply must be, not that this is impossible because we are dealing with organic disease, but rather that—

(1) If he claims to act mentally or spiritually
on the higher centres of the brain and so to reach the diseased tissues, a cure is in the highest degree unlikely, for a reason which will be given at a later stage;

(2) If his method is avowedly quite empirical, and he only professes to exercise a power which he does not even dimly understand, we must respectfully ask for evidence, which can be examined and tested to the satisfaction of a competent and impartial mind.

Now, as to the influence of 'suggestion,' whether or not accompanied by other methods, e.g. hypnotism, magnetism, electricity, &c., on (so-called) functional conditions, modern medical science speaks with no uncertain voice.

At a meeting of the Harveian Society held last October, much interesting information was produced.

A paper of great and permanent value was read by Dr. Claye Shaw on the 'Influence of Mind as a therapeutic agent.' It is impossible in the space at my disposal to quote more than two brief extracts from his paper. He thus defines 'suggestion':

'Suggestion is the insinuation of a belief or impulse into the mind of a subject by any means, or by words or questions, usually by emphatic declaration; also the impulse of
trust and submission which leads to the effectiveness of such incitement.'

On the effects of treatment by suggestion, Dr. Claye Shaw writes:

'It is with such conditions as chronic inebriety, opium, or the drug habit, that suggestion is most powerful; with acute insanity I have not seen it successful, and, though it has been fairly tested in asylum practice, it has not obtained general recognition as a therapeutic agent.'

A considerable number of medical men, alienists and others, took part in the discussion which followed the reading of the paper.

Dr. Bramwell cited many well-authenticated cases where a cure or marked amelioration had followed treatment by suggestion in cases of this kind which had resisted all other treatment. Among these were instances of neurasthenia ('la grande hystérie'), claustrophobia, morphomania, tendency to suicide, a morbid fear of cats. Dr. Seymour Tuke said that he had found 'suggestive treatment marvellously effective in cases of inebriety in which the will was under some sort of control,' but that he was 'unable to make encouraging report of the use of hypnotism and suggestion amongst insane patients.' [A useful and discriminating testimony.] Dr.
Lloyd Tuckey had cured 'many cases of genuine dipsomania, which could not be reached by drugs, by hypnotism—as well as other intractable conditions, such as three cases of Menière's disease.' Dr. R. H. Cole said that, twenty years ago, when he was a House Physician, he first tried to hypnotise patients. Later, he went to Paris and attended the 'Salpêtrière and Bernheim's cliniques, but was greatly disappointed in what he saw. . . . In his experience of mental diseases he had only seen it do good in one insane patient. It had never had any effect in his experience upon people with fixed delusions, but it would cure dipsomania.' Dr. T. F. Woods had treated 4000 cases, and he described a few of them in which he had obtained remarkable results. One was that of a woman, with severe asthma and delusions that she was going to be cut in pieces, who was cured by suggestion at one sitting, and had kept well ever since. Another case of severe sciatica, which had resisted every line of treatment for eight months, was also cured rapidly. He did not find it necessary to induce hypnotic sleep. Dr. E. A. Ash thought that 'genuine hypnotism (the state of somnambulism) was unsatisfactory in practice. Only a small proportion of cases could be hypnotised, and these
in his experience did no better than those treated by simple suggestion. He quoted two cases of nocturnal enuresis, one of which he had failed to cure by hypnotism, whilst the other was cured by suggestion, and a case of blepharospasm, which had been cured by suggestion, with light massage on the eyelids, although a similar case treated only by suggestion had not been relieved.’ Dr. W. H. Blake described ‘a series of cases in which he had used hypnotism with the utmost benefit. . . . His most remarkable cures had been effected in a case of asthma, for which the patient was accustomed to drench himself unavailingly with drugs, and in a severe case of dipsomania.’

Here we have grouped together the expression of the opinions of trained minds of responsible medical men. The differences are comparatively slight. The agreement is remarkable. Not one of them (though in one case as many as 4000 records are in his hands) claims to have cured what are usually called organic conditions. The whole question is as to the best way in which suggestion can be brought to bear on patients whose lives are in many cases rendered miserable by persistent, but none the less ‘functional,’ ailments.

Moreover, we observe that the result of
years of patient clinical investigation is to lead them to treat every variety of psychic therapeutics as a form of 'suggestion.' In no case is there so much as a hint that a new force, viz. 'spiritual healing,' has appeared, different in kind not only from other varieties of suggestion but from the countless cults of spiritual healing, which have flourished and disappeared in the past or the relics of which still survive in many continental and eastern shrines.

Now, with regard to 'spiritual healing' in its present manifestation in our own country the general attitude of medical science is well described in an article which appeared in the British Medical Journal of January 9, 1909. The article begins by describing some meetings of different societies, in some cases mutually antagonistic, but all existing for the purpose of advancing the claims of healing by 'spiritual' means. It goes on to say:

'If all or any of them can show that they have discovered a new force, or a new method of applying one already known, to the cure of disease, rational medicine will welcome a new weapon. As we have often said, the wise physician understands the action of the mind or the spirit on the body, and uses it for the benefit of his patient. A man who firmly
believes in his doctor's skill, or in the efficacy of the treatment to which he is subjected, is in the best possible condition for the operation of curative forces. On the other hand, a patient who believes that nothing can cure him helps to seal his own doom. Avicenna well said, *Plus interdum prodesse fiduciam in medicum quam ipsam medicinam.* The "lady of the highest rank," who is reported to have said that she would rather die under the care of Sir Henry Halford than recover under that of any other physician, must have been a living tribute to his skill.

"The fact cannot be too much insisted upon that there is nothing in the least new about faith healing. It is as old as medicine and religion, which in the beginning were one, as they still are among many savage tribes. Faith can move mountains, and it matters little on what it is based or how it is excited. As John Hunter has told us, the touch of a dead man's hand has charmed away a tumour. But there are limits to its action, and while willing to accept faith as an adjuvant, no one who knows anything about disease will admit that by itself it can heal any but ailments the origin of which lies hid in the unknown recesses of the nervous system. By all means let us know the full power of the spirit over the body."
Only let us have facts that can be fairly and fully tested. A scientifically trained doctor takes nothing on trust, and there can be no useful co-operation between medicine and spiritual healing unless the facts of each case are fully disclosed. That is the point where science and faith part company; the former is as importunate as Arthur Clennam at the Circumlocution Office, and the wonder workers are as painfully surprised at this as the youthful Barnacle was at the persistence of “the fella that wanted to know, you know.”

Let us dispose at once of one simple question of fact. Modern medical science has given the ‘spiritual healers,’ who claim to cure any and every disease by touch or prayer or unction, an absolutely fair hearing. Evidence is asked for, and, if it is forthcoming, is patiently investigated, no matter how antecedently unlikely may be the pretensions which such evidence is brought forward to support.

The general attitude of mind of the supporters of the ‘spiritual healers’ is shown by the following illuminating extract, quoted by Sir H. Morris in the course of a recent lecture on ‘Looking back’:

‘We have no difficulty in believing that ulcers that have a malignant aspect may be
healed by the hope that comes from a potent suggestion. We have ourselves known of more than one case in which every clinical sign of malignant disease of the stomach was present, and in which a cure was effected by means that could only have derived their potency from suggestion.'

People who are prepared to accept this without clearly ascertained and properly sifted evidence will accept anything. They simply believe what they wish to believe. When one widely advertised 'case of spiritual healing' breaks down on investigation, another is put forward.

Indeed, for the most part they have no idea as to what constitutes evidence in these matters. In many cases the unsupported statement of a patient, as to the diagnosis pronounced by a medical man, is calmly accepted by them as though there were no need of further investigation. We have heard, perhaps, more than enough of a highly placed dignitary of the Church who believes (no doubt quite sincerely) that he was cured of cancer by the ministrations of one of these 'healers,' after an absolute diagnosis as to the existence of an inoperable tumour had been made by a leading specialist. The repeated denial by the specialist in question, that he ever
supposed the condition which he examined to be cancerous, makes no difference. The patient continues to announce as a fact what is almost demonstrably untrue; and his followers will no doubt continue to accept his statement in preference to first-hand evidence, so long as this particular cult survives.

But, for those who are not blinded by ignorant credulity, the following extracts from a letter from Dr. Combe Atthill may be of interest. Dr. Atthill’s experience could, of course, be paralleled by any medical man of long practice:

‘Shortly after I retired from practice, some ten years ago, a well-known clergyman wrote to me, saying that members of his congregation were being much disturbed by the advent amongst them of a lady professing herself to be a faith healer, and saying that her conversion was due to the fact of my having told her that she was suffering from a dreadful disease, and that her sole hope of cure lay in the performance of a very dangerous operation. She refused to submit to this, and instead placed herself in the hands of “the healer,” and was cured. He concluded by asking me to give him particulars of her case.

‘I had no recollection of any such patient, but, as the name was given, I traced her, and
found the following particulars recorded in my case book.

'I had only seen the lady once in my own house, when she stated that she was well past middle life, and for more than a year had been weakened by a well-known condition.

'On my telling her I must examine her she replied that she could not submit to it that day for sufficient reasons, so I arranged that when she was in a condition for examination she would let me know, and I would call on her and examine her. I made no diagnosis, and gave no opinion as to the nature of the case. I said no word about performing an operation.

'Instead of writing to me to call on her, she went to London. No doubt an examination would have revealed the fact that no disease ever existed.

'It is impossible to deal with patients of this class. Their mental equilibrium is disturbed; they distort what the doctor may say, and not infrequently invent and circulate statements he never made.'

II. The Society of Emmanuel

Special attention has been directed of late to the claims of the 'Society of Emmanuel.' This society appears to profess adherence to
the tenets of the Church of England, though, except for Dr. Mylne (formerly Bishop of Bombay), no well-known churchman, lay or cleric, seems to be a member of the executive. The names of some ladies of title are given in the list of the General Committee. The president and principal 'healer' is a Mr. James M. Hickson. The objects of the society are closely akin to those of other similar societies, except that they have a distinctly 'Church' flavour. For instance:

'To develop the Divine gifts left to His Church by the Master, especially the gift of healing by prayer and laying on of hands, with the object of using these Divine gifts . . . for the healing of the body.'

A perusal of its literature reveals the usual pretension to cure and to have cured any and every disease. Nothing like a tabulated list of cases treated appears anywhere. The society has now opened a 'Hospice,' where free treatment (by prayer and laying on of hands, &c.) is given by the aforesaid Mr. Hickson.

For some time the British Medical Journal, the official organ of the British Medical Association, called attention to widely advertised 'cures,' and asked for information which would make it possible for an investigation into the true facts to be carried out. The
results were hardly satisfactory. Here are some of the cases:

(1) In the *British Medical Journal* (May 1, 1909) the following case is given as recorded in *The Healer* (the organ of the Society of Emmanuel):

'The patient fell and injured the patella, which had previously been broken four times—two doctors expressed the opinion that he would never have full use of the knee again. It was very painful and quite callous (*sic*) at the time of the first treatment by prayer, but in twenty minutes he was able to bend it without help; the following day to walk about the house, and after four visits to resume ordinary duties.'

Inquiries failed to elicit any details which would enable investigation to be made.

(2) From the *British Medical Journal* of June 5, 1909:

'Mr. Hickson is reported to have said that he has another case of "cancer of the throat" under his care; the patient had undergone two operations before going to him, and is now apparently getting well. We should be glad to have particulars of so interesting a case, but we doubt whether they will be forthcoming.'

Apparently they were not. But the case was identified without difficulty. A clergyman,
the vicar of a country parish in the Oxford diocese, was under 'treatment' by Mr. Hickson at this time for what was undoubtedly cancer (epithelioma) of the larynx. A friend of mine who saw him in the summer described him as being quite certain that he was being cured, though he looked extremely ill and could hardly speak above a whisper. A few weeks later the patient died. If Mr. Hickson has anywhere publicly announced the failure of his 'treatment' in this case, after having stated that the patient was 'apparently getting well,' no such announcement has come under my notice.

(3) In its issue of June 12, 1909, the *British Medical Journal* published a quotation from the *Evening News*, which ran as follows:

'The following account of a cure of cancer is furnished by a lady member of the Society of Emmanuel: "The patient was a Bishop of the Church of England. The doctors abandoned all hope of a cure. Then Mr. Hickson took the case in hand. He arrived on the morning of the day on which the sufferer had to undergo an operation. Mr. Hickson prayed with him and anointed him, followed by a laying on of hands (*sic*). In the afternoon the surgeon arrived and made his examination. He was greatly surprised.'
'The case puzzles me,' he said. 'There is a mark of a new wound, but the cancer has gone!' The cleric in question is now perfectly well, and was with us the other day, but I believe the surgeon has not yet recovered from his surprise.'

The usual request to Mr. Hickson or any member of the Society of Emmanuel to furnish details of this truly miraculous cure, which could serve as a basis of investigation, followed, but no reply came to hand. Again, I ask, has Mr. Hickson publicly repudiated this account of his healing powers?

(4) The following is an extract from an article in the British Medical Journal of May 22, 1909:

'SPIRITUAL HEALING AND CANCER.

'One of the most serious difficulties in arriving at a correct conclusion as to the curative powers claimed for spiritual healing is the intangible nature of the evidence. For instance, most of the patients on behalf of whom prayers were asked in the earlier numbers of The Healer—which is published by Mr. J. M. Hickson, and which, we suppose, may be regarded as the organ of the Society of Emmanuel of which that gentleman is the president—are vaguely
described as suffering from "rheumatism," "loss of nerve power," "spinal trouble," "internal weakness," "low vitality and great weakness," "heart trouble," "internal trouble." Some, indeed, are said to be the subjects of "locomotor ataxy" and "consumption," but no particulars are given by which the diagnosis can be checked, and it is difficult or impossible to trace the result of the treatment. In a report of the past year published in the number for November 1908, Mr. Hickson does give some details of a few cases. The two following taken at random may be given as specimens: "Priest. Cancer in bowel. Specialist, who examined him nine months ago under an anaesthetic, said that an operation was impossible, and that he could not live for more than about three months. He then sought help through Divine Healing, when he was anointed with oil in the name of the Lord, and Mr. Hickson laid his hands on him in prayer, after which he was examined by the same Specialist, who found that a process of absorption was taking place. He is now quite well." "Lady's Maid. Age about 28. Suffering from rupture, which gave great pain. One year under treatment at Middlesex Hospital, and, while waiting for an in-patient's bed for operation, was advised to seek help through Divine
Healing. After three visits to Mr. Hickson, two months ago, she is now quite well and strong, with no pain or swelling. Her mistress also reports that serious defects of her character are no longer apparent and her whole spiritual nature is quickened and her duties are better done."

'These cases are sufficiently definite to be tested, and we should be glad if Mr. Hickson would supply us with the information necessary for the purpose. We should undertake not to publish the names of the patients or any particulars by which they could be identified. We should place the results of our investigation honestly before our readers.'

Result: No reply. If the first of these cases is the one already referred to, it will be observed that the clear and definite denial of the specialist in question goes for nothing; also that, like all other stories of the kind, this has lost nothing in the telling.

(5) The article goes on:

'In the meantime, we have succeeded in tracing a case more remarkable than either of the two just cited, and the result is very instructive. It was related in the third number of The Healer (March 1908, p. 9) by the Right Rev. L. G. Mylne, D.D., formerly Bishop of Bombay, in a paper entitled "The
Anointing of the Sick for their Healing."
It has already been quoted in the British Medical Journal of January 9, 1909, p. 109; but, to enable the reader to form a correct judgment on the subject, it must be repeated here. Bishop Mylne said: "In the latest up-to-date book on cancer, which is in the hands of the most scientific men of to-day, there is a case quoted which is, I have no doubt, correctly said to be a unique one of abortive cancer. The case is fully described from a medical point of view—how a patient, stricken unquestionably with cancer, was found to have, in place of the tumour, something which could only be called abortive cancer, the like of which was never heard of before. I happen to know the whole history of the case from the brother of the patient, himself a medical man. It was this: The patient had been suffering from a serious affection of the throat. He went to one specialist after another. Three eminent men told him without hesitation that he was suffering from a cancer growing on the vocal cords, and that nothing but their total excision could save his life. He was a hard-working priest of our Church, and, of course, the operation meant that he would never utter a word again. However, his life had to be saved. The doctors came; the
throat was laid open; the operator had his knife in his hand to excise the vocal cords. He stopped dead. Instead of applying the blade of the knife, he took hold, between his thumb and the handle, of all he found there, and peeled it off, just like the skin of a fruit. Between the diagnosis and the operation the patient had been anointed with oil in the name of the Lord. That is one of not a few cases which some of us know about, but it is by far the best defined one I know of, and one that is actually celebrated in medical circles; not, of course, being quoted as an instance of what may be done by anointing, but as a case unique in surgical experience.” We went on to say that we should be glad to have fuller particulars, and we respectfully invited Bishop Mylne to furnish us with the name of the “latest up-to-date book on cancer” from which he quoted.

‘In the meantime, we had been put on the track of the case by a distinguished physician, and had obtained a report of the case from the surgeon who operated. All, therefore, that was wanting was the name of the book from which the quotation purported to be taken. We communicated with Bishop Mylne on the subject, and we have to acknowledge the courtesy with which he received our
request for information and the pains he took to procure it for us. His Lordship was, however, unable to gain the consent of those to whom he applied to help in any way in supplying an answer to a very simple question.\(^1\) As the matter is one of general interest not only to the medical profession but to the whole of mankind, we think it right to give the true facts of the case, of course without disclosing the patient's identity.

'The operator was Mr. Butlin, who has been good enough to give us permission to publish the following account. He saw the patient, who was at that time thirty-seven years of age, in 1890. There was then a very white patch, flat and sessile, on the middle of the left vocal cord, looking like a papillary growth. A month later the surface seemed to be ulcerated. The patient was seen by other well-known specialists, who, like Mr. Butlin himself, were puzzled as to the nature of the disease. Tubercle, papillary growth and malignant

\(^1\) The italics are mine. The Bishop is one whose statements, made on behalf of 'spiritual healing,' have been accepted by persons at any rate adequately educated. He writes a preposterous account of 'an abortive cancer,' and professes to quote from 'the latest up-to-date book on cancer, which is in the hands of the most scientific men of to-day.' On being asked to give the name of the book, he says that he cannot 'obtain the consent of those to whom he applied.'
disease were in turn considered, but no definite conclusion was arrived at. The patient was treated in various ways for four months before it was thought right to open the larynx. Mr. Butlin then operated in the presence of an eminent specialist, a distinguished surgeon, and another medical man, a friend of the patient.'

Somewhat to curtail the account, let me simply say that when the larynx was opened it appeared that they had to do with a case either of what is known as leukoplakia or a rather rare form of papilloma. The latter seemed on the face of it to be the more probable, though evidently Mr. Butlin did not think so. Whatever it was, it was certainly not malignant. It was scraped away without difficulty: no signs of infiltration were observed, and, when last heard of, the patient's recovery seemed to be complete. The rest of the article in the British Medical Journal consists of some criticisms of Dr. Mylne's proceedings, which certainly do not appear to me to err on the side of severity.

The Society of Emmanuel has at last consented to allow the British Medical Association to carry out a full investigation into its alleged cures. The report will be interesting reading. Incidentally, it will be instructive
to note how many of the above cases have been submitted to the investigators.

Meanwhile, the danger is a real one. Probably an investigation into the facts of the 'cures' reported by other 'psycho-therapeutic' societies would yield much the same results as have attended the inquiries into the claims of the Society of Emmanuel. Not one of them, so far as I know, even attempts to put its work on a scientific basis; and all claim implicitly, if not explicitly, that they possess a power to cure the most malignant organic diseases as well as functional neuroses.

If this cult is allowed to spread among the ignorant and credulous (and it seems to me that, pari passu with waning faith, the most childish credulity is rapidly increasing in our midst, often appearing in the most unexpected places), a golden opportunity will be offered to plausible impostors, without even the pretence of a scientific training, to set up as 'healers' and reap a rich harvest of gain. A few startling successes will be widely advertised, and the huge tale of failures quietly ignored. But a more serious danger lies behind.

I take the following from the British Medical Journal of May 1, 1909:
A man with some slight symptoms of bladder trouble consulted an eminent specialist, who discovered a small growth which could easily have been removed. It was arranged that the patient should undergo an operation. In the meantime he fell among Christian Scientists, who persuaded him that he was quite well. And, indeed, for a time the symptoms almost ceased. But the insidious disease remorselessly went its way, till the unfortunate patient was past all surgery.'

If it be said that the societies I have mentioned repudiate all connexion with Christian Science, I reply that by their fruits must they be judged. Both Christian Science and the various associations for spiritual healing profess to heal any and every disease, and offer proofs of their claim, which, whenever they have been tested, have been shown to be utterly without foundation.

III. Spiritual Healing on a Scientific Basis

In a book which has recently appeared, 'Body and Soul,' by the Rev. Percy Dearmer, we have a serious and able attempt to put 'spiritual healing' on a scientific basis. Considerations of space do not permit me to deal as fully as I should wish with this really
interesting book, but, if I may try to put the general argument into a single paragraph, Mr. Dearmer's contention is as follows:

Bodily functions and bodily health are regulated and sustained by what may be called the lower nerve centres in the medulla of the brain. It is by the exercise of these centres, which in turn control the circulation, the secretion of various glands, &c., that the body combats disease. This work is continually going on and we are for the most part quite unconscious of it. But, says Mr. Dearmer, 'we now know that these centres are in direct connexion with the higher centres of the cortex of the brain.' I should think we do. So did our ancestors a hundred years ago. Their knowledge of the work of such centres as the vasomotor, the respiratory, the heat-regulating, &c., was fragmentary and imperfect to the last degree, but not one of them had any doubt that myriads of nerve fibres connected the cortex with the medulla. Let us, therefore, know how to stimulate the cortex, and all disease (organic as well as functional) can be cured. Hence, when our Lord cured Bartimæus's blindness, and when a 'healer' cures locomotor ataxy, they are performing a function quite as natural as in the case of a doctor who cures malaria with quinine or restores the
use of muscles in musculo-spiral paralysis by the use of the interrupted current.

This sounds plausible enough. There is nothing very new in it; indeed, when we come to analyse it, we shall see that, so far as general principles go, there is nothing which was not perfectly familiar in Sydenham's day, or which the most materialistic practitioner of our own time would not admit without a moment's hesitation. But, of the limitations of his process, Mr. Dearmer only seems to have a confused idea. Let us take one of the instances which he adduces in illustration of his argument. He is speaking (p. 33) of the familiar phenomenon of blushing. 'When a person blushes,' says our author, 'the small arteries are relaxed and dilate, the amount of blood in them is increased, and this hot red fluid flows in such quantities through the capillaries of the skin that the skin itself becomes hot and red. It is strange that the thought "He says I am a pretty girl" should cause the small arteries to behave in this way; but the physiological explanation is simple enough. These arteries are supplied with muscles which regulate them, and all muscles are worked by nerves. The thought in the higher conscious centres has somehow seen fit to hitch itself on to the arterial muscles, just as when we telephone
to a friend in the City the exchange connects us on to his office. *Now, supposing it to be possible to cure a man, say of indigestion by thought, the process would be the same.‘*

‘Supposing it to be possible to cure a man of indigestion by thought,’ this is a statement which no one would wish to dispute. But I expect Mr. Dearmer would be surprised to hear that the analogy of the excitation of the vaso-dilator centre, which causes blushing, can be applied to only a few varieties of indigestion. Roughly, the commonest causes of indigestion might be said to be: *(a)* anaemia, or an insufficient supply of blood to the mucous membrane of the stomach; *(b)* an imperfect secretion of hydrochloric acid and the digestive fluids owing to structural defects in the glands of the stomach, usually a hereditary condition; *(c)* a dilated organ; *(d)* some pathological condition of the accessory large glands, e.g. liver and pancreas; *(e)* dyspepsia, owing to faulty balance of the nervous system. Any one of these five is fairly common, but only in the last is there a shred of evidence for supposing that suggestion or any other factor which would cause the higher, and through them the lower, nervous centres to show a healthy activity, would bring about amelioration or a cure, while there is much
evidence against any supposition of the kind.

Mr. Dearmer elsewhere lays it down that healing by excitation of the 'undermind' is only possible where the case is 'curable.' If, he says in effect, the case is incurable, then anything like spiritual or faith healing or suggestion will fail to bring about a cure [will the faith-healers kindly take note of this admission?], but so will any other more material means. To this one may be permitted to reply:

(i) In many acute infections, e.g. scarlet fever, typhoid fever, cholera, where complete recovery may be expected if (a) the infection is not too virulent, (b) the resisting power of the tissues is vigorous and unimpaired, suggestion in any form—hope, the desire to live, the unexpected arrival of a much-loved friend, &c.—will most certainly assist the patient to battle with the disease. But these factors will always operate without the elaboration of a psychotherapeutic philosophy, and really I do not like the idea of encouraging the adoption of a solemn form of prayer, unction, and the laying on of hands, when all the evidence to hand points to this 'treatment' having in acute infections just as much value as (but no more than) the realisation on the part of the patient that, if he dies at that
particular time, his business will be left in an unsatisfactory condition and perhaps in incompetent hands.

(ii) In the case of what are usually termed chronic 'organic' conditions, honours are no longer even. Let us take four crucial examples.

(a) Malignant tumours.

Certainly we have no warrant for supposing that in any, except cases of the extremest rarity, the 'undermind' can possibly effect a cure. But in a very large number of cases which are taken sufficiently early and are otherwise favourable, extirpation by the surgeon's knife can and does save the life of the individual and prevent recurrence of the tumour. I say again that an attitude of hesitancy on this subject by those who, like Mr. Dearmer, approach the question in a scientific spirit, and their quasi-acceptance of the alleged cures of cancer by spiritual and other healers, which hopelessly break down when anything like impartial investigation is brought to bear on them—all this is likely to be productive of infinite harm. In the case of cancer or sarcoma a day's delay may make the whole difference between hope and despair.

(b) A class of disease of which a good example is tuberculous affections of bone.
Here we have to do with what is strictly a non-malignant condition. That is to say, there is always a fair ground for hoping that surgery may operate like auxiliary steam power in the battleships of the Crimean period. Help nature (or the 'undermind') enough and, other conditions being favourable, a tolerably satisfactory result may be expected. But, really, clinical experience in all civilised communities for the past fifty or sixty years must be allowed to have some value; and the value surely lies in this, that the experienced surgeon knows more or less exactly when to excise or scrape and when to refrain. That anyone should prefer to this the services of some unqualified, inexperienced 'healer,' who bids his patient trust in prayer, unction, or whatever his method is, telling him that if his faith is sufficient the largest sinus will be cleared up and the most distressing ankylosis broken down, simply strikes me with amazement. If the 'healers' really wish us to believe their claims, let them produce a properly codified list of cases which can be thoroughly investigated.

(c) Diseases in which certain drugs are empirically known to act with marked success, e.g. malaria. Here, properly graduated quantities of quinine can and do effect an
absolute cure. There is no evidence whatever that suggestion in any form can do the same.

(d) What may be called progressive organic conditions, e.g. cirrhosis of the liver.

I entirely agree that, in the conditions of which this is an example, scientific medicine can only hope to ameliorate and render life more tolerable to the sufferer.

But here I come to close grips with our author, whose close and fair reasoning it is a real pleasure to follow. In a very large proportion of the diseases from which people die, the pathological condition consists in the deposition of fibrous tissue in some organ or part of the general system. The causes and clinical varieties are endless, but the result the same. To instance only a few, we have:

(a) Granular kidney, i.e. chronic Bright's disease.

(b) Cirrhotic liver.

(c) Arterio-sclerosis, resulting in cerebral hæmorrhage (stroke—apoplexy—paralysis).

(d) Locomotor ataxy.

(e) Tuberculous peritonitis with adhesions.

Now, in all these, the fibrous tissue is first deposited as an effort on the part of Nature to repair the damage done by an acute or chronic inflammation. But, unfortunately, not only
does this fibrous tissue take the place of normal cells, whose activity is of the utmost importance in preserving the health of the individual, but it invariably tends after a time to contract; from which contraction further damage and the gravest results are likely to ensue. It will be observed that in its simplest form a fibrotic change is of the nature of real repair. Thus, after a deep cut or extensive injury to the skin, we all know that a 'scar' results. This affords admirable protection to the damaged area. Nor does the subsequent contraction seriously matter. Care has to be taken to allow for it in the treatment of extensive burns, and considerable allowance is made for contraction in the suturing of skin incisions made in the course of an operation. But except when the scar is on the face, where it is objectionable for cosmetic reasons, a contracting superficial scar is seldom a cause of serious inconvenience. But the case is very different in the kidney or the spinal cord. Contraction there causes an extensive destruction of delicate cells, and, by cutting off the blood supply, a great impairment of function, if not actual necrosis, of an infinite number of cells which were not directly affected by the preceding inflammation. And so the vicious circle goes on.
Does Nature make no effort to play the part of the spear of Achilles and 'heal the wounds which she herself has made'? Only to a negligible extent, on account of the vicious circle just alluded to. So we have the curious phenomenon that in the skin and round the broken ends of a fractured bone (for what is called callus is really only fibrous tissue with special bony elements superimposed) fibrous tissue is very slowly but more or less steadily absorbed; while in the places where such absorption would be of the utmost value to the individual it hardly takes place at all.

Now, the reader will observe that this fibrous tissue is, in the first instance, laid down by the activity of leucocytes acting, to some extent at any rate, in obedience to impulses from the circulatory centres of the medulla, to which Mr. Dearmer quite rightly attaches considerable importance. They make up, in fact, his 'undermind.' I can only say that, so far as any pathological evidence which we possess justifies us in coming to a definite conclusion, we can but suppose that a stimulation of these lower centres to greater activity, by excitation through suggestion of the higher ones, would lead to a further deposition of fibrous tissue, to the great detriment of the general condition of the patient. Any attempt
at subsequent absorption seems to be practically negligible.

So, in the case of blind Bartimæus, Mr. Dearmer's contention that our Lord acted by suggestion is almost demonstrably untrue. At least, it is only even remotely probable on the supposition that Bartimæus was suffering from snow blindness, toxic amblyopia, or one of those rare conditions following on such a sudden, but transitory, disturbance of the nervous system as sea-sickness. And since snow blindness is for obvious reasons unknown in Palestine, and since he certainly did not use tobacco, and probably, like most Jews, hated the sea, this does not seem to be a likely explanation. If, on the other hand, it was a case of corneal opacity following trachoma, cataract, or glaucoma, or some condition resulting in atrophy of the optic nerve, it may be safely affirmed that the method of healing was emphatically not that so carefully worked out by Mr. Dearmer.

IV. The 'Neurotic' Theory of the Miracles of the New Testament

The whole question of our Lord's miracles of healing, regarded merely as so many faith cures, has been discussed in an admirable
essay contributed by Dr. R. J. Ryle to the *Hibbert Journal* of April 1907. He had before him no such systematic attempt to defend this view as that made by Mr. Dearmer, but only the rather loose theorising of certain 'Modernists' who, however competent they may be to deal with textual criticism, are hardly in their element when reviewing pathological probabilities. Dr. Ryle quotes Professor Harnack as saying:

'That the earth in its course stood still, that a she-ass spoke, that a storm was quieted by a word, we do not believe, and we shall never again believe; but that the lame walked, the blind saw, and the deaf heard will not be so summarily dismissed as an illusion.'

Others write to the same effect. 'Progressive criticism,' says Dr. Ryle, 'has adopted, with much assurance, the opinion that the diseases which were healed were what doctors commonly speak of as functional diseases of the nervous system, and that the production of a strong mental impression was the means by which the miracles of healing were brought about. Upon this point there seems to be a practical unanimity no less decided than that which has been reached among critics of the liberal school upon the other two points.

---

1 *What is Christianity?*
Thus Dr. Abbott tells us that the mighty works were simply "acts of faith-healing on a mighty scale." The "Encyclopaedia Biblica" lays it down that "it is quite permissible for us to regard as historical only those of the class which, even at the present day, physicians are able to effect by psychical methods." Principal Estlin Carpenter (in the "First Three Gospels") says, "The real force which worked the patient's cure dwelt in his own mind: the power of Jesus lay in the potency of his personality to evoke this force."

'The writers have adopted what may be called, for brevity, the Neurotic Theory. It is for them to show by an actual examination of the records that the ministry of healing which is admitted "to stand on as firm historical ground as the best accredited parts of the teaching," consisted in the curing of neurotic patients by strong mental impressions. Have they done so?'

Dr. Ryle has, of course, no difficulty in showing that they have done nothing of the kind.

'It is not too much to say that no one of the writers who has pinned his faith to the Neurotic Theory has made any attempt to carry it out in detail. We are offered a number of quite commonplace allusions to the power of mind
over body, and we find a complacent conviction expressed in several ways by several writers to the effect that a certain class of disorders, which are vaguely alluded to as "nervous," are promptly curable by emotional methods. But we do not find any recognition of the fact that only a small portion of the diseases to which human flesh is heir are nervous diseases; and that of nervous diseases, again, only a very small and unimportant group admit of cure in this way.

"What the critics have to do if they wish to convince their readers of the Neurotic Theory of the miracles of healing is nothing less than this:

'1. They must show that the diseases which Christ is said to have cured were of the kind which experience proves to admit of psychical treatment.

'2. They must show some good grounds for the assertion that the way in which the cures of the healing ministry were effected was the way by which at the present day such cures are effected, when what has been called moral therapeutics has been the method employed.'

The difficulty is obvious. If our Lord was merely a faith healer, the results of long and laborious investigations into many faith-healing systems, all presenting very much the
same features both in methods of treatment and effects, justify us in assuming that the number of cures would have been strictly limited.

'But then, quickly enough, would follow the discovery that the powers of healing were available not for all, but only for a small and limited group of disorders; for in any casual collection of sick people, though there might be perhaps here one and here another suitable patient for a faith-healing exhibition, the majority would be unsuitable. What, then, of the failures?

'The difficulty here referred to has not been wholly overlooked, and it is worth while to notice how the attempt has been made to meet it. "Did a kind of instinct (asks Dr. Abbott) tell Him that the restoration of a lost limb was not like the cure of a paralytic, not one of the works prepared for Him by His Father?" and again, "Experience and some kind of intuition may have enabled Him to distinguish those cases which He could heal from those (a far more numerous class) which He could not."

'The suggestion would not commend itself to a medical reader as a very happy way out of the difficulty. The naïve supposition that in cases of disease which require unusually
minute and scientific investigation diagnosis was made "by a kind of instinct" or "some kind of intuition" is quite on a par with the innocent conception of the nature of diseases of the nervous system which Dr. Abbott shows elsewhere. Dr. Abbott would hesitate to allow that Jesus had a kind of instinct to guide Him safely concerning the Davidic origin of a psalm or the date of the taking of Jerusalem. Why should he imagine that he was less likely to be at fault in the presence of equally difficult problems of another kind? The assumption of an infallible capacity for discrimination, which could arrive at correct conclusions without the use of any of the methods and appliances of scientific medicine, is merely to substitute one kind of "supernaturalism" for another. A miraculous faculty of diagnosis is no easier of acceptance than a miraculous cure. A "kind of instinct" is an absurd supposition.'

Dr. Ryle then examines in detail certain of the healing miracles as related by the Evangelists. The result is to leave the intelligent reader in no doubt that in nine out of ten of the cases of 'paralysis' brought to Him, our Lord would have been, on the 'neurotic' hypothesis, no more likely to effect a cure than (to take Dr. Abbott's example) in 'the restoration of
a lost limb.' His clear account of the case of the man with the withered hand, which the non-medical reader will be able to follow without difficulty, is worth quoting in full.

'In the story of the man with the withered hand it is probable that we have to do with another case of paralysis; and if so, we may assume with considerable confidence that the case was one of “infantile paralysis.” This is the affection to which at the present day nearly all the instances of “withered hand” or of “withered leg” are owing. A child who has been in good health, or has suffered perhaps from a few days of feverishness, is found to have lost power in an arm or leg. The limb hangs flaccid and motionless. The muscles are found to be wasting when the limb is examined a week or two later, and the limb to be cold. For a month or two there may be a little recovery of movement. This soon stops, and the arm or leg remains ever after more or less powerless and shrunken and cold. Normal growth is largely checked, and, in addition to the actual atrophy and arrest of development, various contractions and deformities become established as time goes on. After death the muscles are found to have become much diminished and shrunken, and throughout a certain portion of the spinal cord, corresponding
with the affected limb, destructive changes are found to have occurred where the normal structure of ganglion cells and nerve fibres is replaced by the remains of the inflammatory process which has been the cause of the palsy. Such is the ordinary history of a withered hand. Here the very word "withered," which aptly describes the condition of the limb, is the most appropriate description of the result of the process which has taken place. If such was the pathology of the case described in Mark iii. 1, it is needless to say that, although it belongs to the group of the nervous diseases, it does not belong to that class of nervous disease which admits of treatment by moral impression or emotional shock.'

If this is accepted in the case of what may truly be described as 'nervous diseases,' then à fortiori the improbability of the view taken by 'progressive criticism' is enormously enhanced when we come to consider the healing of the blind, the 'woman with an issue of blood,' and others where the nervous system was not primarily, if at all, affected.

The conclusion of the whole matter seems to be this. Medical science has at her command a vast accumulation of clinical material on which she is able to form a clearly reasoned judgment. There is no such thing in Medicine
as a 'chose jugée.' No single verdict ever found but is open to revision if the evidence is satisfactory. But we do claim that it should be recognised, by all who have the interests of truth at heart, that the limits of 'psychotherapeutics,' 'spiritual' or otherwise, are, according to our present knowledge, sufficiently well defined, and that nothing has yet been brought forward to warrant anyone in making an exception in favour of any one society or method.

V. Clergy and Doctors

So much may be said on the critical side.

A few words, for many are not needed, may be added as to the positive advantages of a clear understanding between the Church and scientific Medicine, as to the spheres in which both may hope to operate in fulfilment of a genuine desire to cure or alleviate bodily disease.

(1) The clergy have an unrivalled opportunity of taking the lead in educating public opinion on the subject. In no other religious body in the world is the ministry of so high a class, not merely socially (a small matter) but intellectually, morally, and spiritually, as in the Anglican Communion. As a result, I know no body of men better able to come to sane
and balanced conclusions on any subjects, the details of which are within their own experience. They touch life at many points. Their calling brings them into contact with vast numbers of people, and they usually show in their dealings with others a broad-minded tolerance and shrewd common-sense which is beyond praise. I do not hesitate to say that, if I were accused of a crime which I knew I had not committed, I should feel safer if the trial were conducted before a jury of Anglican clergymen than before men drawn from any other profession; but in this matter of 'spiritual' or 'psychic' healing they have not risen to the occasion. An article in the Church Times of February 18, 1910, lies before me. A dogmatic gentleman (or lady, perhaps—the style is essentially feminine) writes the most confident nonsense on the subject of the 'Gift of Healing' that ever filled two columns. Here is an extract, not by any means the most precious gem from the entire chaplet, but a fair example of the whole:

'The gift of healing is simply a human gift . . . like the gift of music or any other gift, and also, like music, present in some people more than in others, though probably present in some degree in nearly everybody. . . . The gift transcends all knowledge, it cures diseases
considered incurable. Consumption, cancer, blindness, deafness, cripples (sic), &c., this is within our practical experience to-day, so that it stands to reason that the art of curing by medicine will gradually disappear as the gift of healing grows and develops. Not so the scientific knowledge of the doctors, which will be used more and more where it ought to be used, and that is in the prevention of disease.'

Comment would be quite superfluous. But what follows is instructive. In the next issue of the Church Times the irrepressible Mr. Hickson and the 'Warden of the Guild of Health' rush into print with some rather vague assertions about the 'spiritual nature' of this gift. There is an extremely sensible letter from a doctor, pointing out with great moderation that, if there is any evidence for those confident assertions, he would be glad to know what it amounted to. No clergyman seems to have thought it worth his while to disclaim agreement with the wild statements of the writer of the article.

In the first place, then, I would appeal to the clergy to inform themselves as to the limitation of 'spiritual healing,' according to the immense mass of evidence which has been collected and does enable us to lay down those limitations with sufficient accuracy for the
practical purpose of life; and to act as wise advisers to their people in this matter.

(2) The clergy will do well to remember that a great deal of bodily *ill-health* may exist quite independently of bodily *disease*. These cases are commoner than cases of organic malady. There is plenty of scope for ameliorative work in connexion with them. At the risk of being thought egotistical, I may be allowed to quote a case which recently came under my own observation, and which is typical of a large number of others.

A young man, who was clearly very far from being of a neurotic or hysterical type, came to me complaining of severe pain in the region of the heart. It had, according to his account, been gradually increasing for some time. It frequently came on after he had run upstairs, and on one occasion had been intense after running to catch a train. It was sometimes accompanied by violent palpitation and breathlessness, and had no relation to food. Would I tell him if his heart was all right? I examined the heart and could find no trace of any abnormal condition. Nor could I find any evidence of anything in the abdomen which would be likely to account for the pain. I told him that his heart was absolutely sound and that there appeared to be nothing to
suggest disease anywhere. A rather careful diet would do him no harm. If it did not do any good, it would be easy enough to prescribe a tonic, but I did not think it necessary. I never expected to see him again. Five months later, however, he called and explained with much gravity that he had come to thank me for 'curing his heart.' I then remembered the case, and was fairly staggered. 'But bless my soul,' I said rather brusquely, 'there never was anything the matter with your heart.' 'No,' he replied, this time with a quiet smile, 'I know there wasn't. All I can say is that from the time you told me it was all right, the pain disappeared, and I have never had any return of it. But, look here, when it was there, the pain was real.'

I have no doubt it was. To label all such cases as 'hysterical,' 'neurotic,' and so on (in the ordinary connotation of these terms) is utterly unscientific. This young fellow was a sensible, cheerful, rather unimaginative youth without a trace of 'neurasthenia' about him. Yet, by coming to believe that his heart was diseased, he had quite unconsciously so excited the higher centres that the vagus nerve returned exactly the impressions to the brain which would be conveyed by various morbid organic conditions.
Now, in such a case as this (and the number of them must be very large indeed) the parish clergyman has a great scope for quiet, useful work. Let him urge the patient not to dwell on his supposed condition, but go at once to a competent practitioner and find out what exactly (if anything) is the matter. The clergyman will find that (if he has the patient’s consent) the doctor will make no difficulty about affording him the fullest information about the physical condition of the patient, and from their co-operation the happiest results may be expected.

(3) Conversely, there are many cases where a sympathetic doctor would be only too glad to be in touch with a parish clergyman. Occasionally we get at the hospital a note from a clergyman, saying that X. Y. is to call at the Out-Patients’ Department to-day, and that the writer would be glad to know in confidence what is the matter with him. I only wish we had more. If there is no objection raised by the patient, there is no difficulty whatever about entering into the fullest particulars, and in those cases (and they are far from infrequent) where the patient complains of ‘worries,’ a sympathetic adviser on the spot will probably do more to bring about an improvement in the physical condition than all
the compounds of iron, strychnine, &c., in the hospital pharmacopoeia. The full consent of the patient is, of course, an indispensable preliminary. When this is obtained, the rest is easy enough.

(4) In the same way, when there is a suspicion or fairly clear evidence that health is being undermined by some evil habit, the sympathetic clergyman, who knows the patient well, can do far more for him than the most skilled doctor who has probably only seen him once or twice. Why any clergyman should want to babble about a special 'gift of healing' in dealing with these most distressing cases, considering what the evidence on the subject of a 'gift of healing' is, I cannot conceive. The unostentatious, healthy influence of a cultured Christian gentleman has a potency which no manipulation or ritual is in the least likely to enhance. If he will equip himself with the necessary information as to the 'patient's' actual physical condition, he can set to work to exercise his influence, with the knowledge that he will probably effect more, so far as a permanent result goes, than all the self-styled 'healers' who ever supported scientific misstatements with bad logic, or clouded with frothy verbiage what intellect they possess.
OUR LORD'S ATTITUDE TOWARDS SICKNESS

BY

W. YORKE FAUSSET, M.A.

VICAR OF CHEDDAR AND PREBENDARY OF WELLS
OUR LORD'S ATTITUDE TOWARDS SICKNESS

BY W. YORKE FAUSSET, M.A.

(1) Men are commonly influenced by actions and personal example much more powerfully than by abstract teaching; and the Christian tradition conforms to this principle in placing the three Synoptic Gospels in the forefront of the New Testament. For they set before us the mind of Christ in the words and acts of Jesus. Thus when the thoughtful Christian is asked, 'What is the Gospel view of disease?' he will be inclined to reply, 'The question is a difficult one, but we may say with some confidence that our Lord answered it by His miracles of healing.' A study of these and of their underlying principles may help us towards the definition we seek.

The records are fragmentary. Yet they are warm with living realism. The great facts of our Faith stand out before us in the moving drama of the Synoptic Gospels,¹ just as truly as

they are interpreted for us in the spiritual Gospel, the Fourth. Jesus Christ is portrayed as the Son of Man: and whatever else that most significant title denotes, it speaks to us of His human activity, His practical and energetic sympathy with the sins and sorrows of men. And this activity found its exercise in two directions: teaching and healing. The association of the two things is noteworthy, as indicating a great principle. The sins of mankind are not unconnected with their sicknesses; spiritual restoration with bodily relief. A calm of soul may bring rest to the body. He who fulfilled in His earthly ministry the prophetic office was also a ‘Physician of extraordinary achievement.’¹ To render Professor Bousset’s words, though we cannot reproduce their eloquence:

‘How the simple populace must have hailed this Deliverer in every time of need! With what unspeakable confidence they must have thronged him! At his coming, despair lifted its head, dull eyes glistened, weary hands and arms reached forth towards him. They trusted him for everything, all things became possible. Body and soul with all their needs they brought to him for healing. The cries of need and anguish, the confidence which

¹ Professor Bousset’s Jesus (3rd ed. 1907, p. 26).
knew no limitations, the craving for help, the faltering prayer, the shouts or sobs of joy, the tears of gratitude—daily he moved in the midst of it all.'

Are we then to conclude that our Lord attached no less importance to the cure of bodily ailment than to the spiritual redemption of men? Much has been written of late years which might seem to imply this. But the whole trend of Christ's teaching forbids us to emphasise the value of physical well-being at the expense of the master claims of the spirit: witness His words in the Sermon on the Mount about taking thought for the life or the body. And therefore we must avoid mere rhetoric and special pleading.

(i) It is plain, at the outset, that our Lord set certain limits to the exercise of His healing activity. What has often been said of miracles in general may be said of the miracles of healing. There is a severe economy in the exercise of such supernatural, or extranatural, powers. This is illustrated by our Lord's apparent reluctance to work miracles when it is not certain that a true faith asks for it. In

---

1 Matt. vi. 25.
2 E.g. by Dr. Illingworth, *Divine Immanence*, p. 120.
3 Cp. John iv. 48: 'Except ye see signs and wonders, ye will not believe.'
other words, the receptivity of men is necessary to the Divine transaction with the sufferer.

Again, He is slow to exercise His power outside the boundaries of Israel, within which He was pleased to confine His work of preaching and healing. Possibly He knew that there He would be welcomed as a mere wonder-working magician. He makes it a condition of His action that the atmosphere should be one of real faith.  

He could there do no mighty works because of their unbelief.  

Was it because of the waning faith of the multitudes that, towards the end of His work on earth, the Healing Ministry almost ceases? Whether on this account, or in the desire to escape the demonstrations of popular interest which the miracles evoked, or because the full evidential effect of these 'signs' was now almost attained, He restricts His healing, life-giving power to some four cases, one of them the raising of Lazarus. For each and all a special reason can be found.

---

1 On this see next chapter, p. 209.
2 Mark vi. 5, 6; Matt. xiii. 58.
3 Professor A. B. Bruce, Miraculous Elements in the Gospels, p. 265.
4 Luke xiv. 3: Vindication of the true principle of the Sabbath; John xi.: Lazarus, His 'friend,' the only brother of Martha and Mary; also Trench's Miracles, p. 434 sq.; Luke xvii. 16: The universality of His salvation; Mark x. 47: The appeal to the Son of David. (The Healing of Malchus stands by itself.)
(ii) Christ's healing activity was therefore strictly limited in scope. It may be asked, Was it a 'unique manifestation of a unique Personality' or did it differ in degree rather than in kind from the wonderful works of human healers, or, at all events, of healers who have wrought 'in the name of Jesus Christ'? The latter view by no means commits its advocates to a 'humanitarian' view of the Person of Jesus Christ: while it amply satisfies the facts. Again, it is not necessary, for the purpose of the present discussion, to digress into the field of New Testament criticism. Renan, in his 'Vie de Jésus,' feels himself constrained to apologise for the miraculous action of Christ, on the ground that 'the rôle of thaumaturge was unwelcome to him, but was imposed upon him by his contemporaries.' To Loisy, a critic of profounder learning and far more reverent temper, it appears that the miracles were in reality 'works of mercy ... and not a direct argument in favour of the Messiahship of the Saviour,' a complexion which was afterwards put upon them more or less unconsciously by the Evangelists. But it is quite consistent with a reverent

1 Illingworth, Divine Immanence, p. 119.
2 Renan, Vie de Jésus, p. 264.
3 Loisy, L'Évangile et l'Église, p. 17
acknowledgment of the Divinity of our Lord, and an acceptance of the Gospel records in substance as they stand, to hold that the miracles of healing—with the nature-miracles we are not here concerned—were the simple outcome of that all-embracing human pity which, in itself, betokened the expected Messiah; rather than an immediate exercise of Almighty power, and the utterance, within the physical order, of the Eternal Word. We find our Lord proclaiming Himself, in the synagogue of Nazareth, the Fulfiller of that great prophecy of Isaiah in his sixty-first chapter, in which the Messianic mission is set forth in language in which a spiritual and a physical deliverance are inseparably intertwined.¹ Similarly, in answer to the Baptist's message, the same blending of evangelical teaching and spiritual healing is to be noticed; and, once again, sin and disease stand out as the dominant factors in the condition of this present world.

(iii) But if the source of the miracles is thus to be sought in the Sacred Humanity, that Humanity is, after all, the perfect ideal and norm of all humanity. Whatever exceptional powers of genius, whatever special faculties and latent gifts of mind and will have appeared at rare intervals among men, these we should

¹ Luke iv. 18: note the double sense in the words
expect to find exemplified, one and all, in the Life of Christ, had that Life come down to us in a complete form. Now, it cannot be questioned that in every age a few individuals have been found, who were endowed with a preternatural therapeutic power, connected generally with a very subtle power of sympathy, but, in some instances, if we may believe what we are told, inherent in a person who had no wish whatever to exercise it.¹ That some such virtue resided in Christ, and accounts for some part of His healing work, need not be questioned. The records may be said to imply it in two passages,² that which relates to the act of the woman who touched the hem of His garment in the crowd, and that which speaks of this method of cure as oftentimes repeated. They besought Him that they might touch if it were but the border of his garment—and as many as touched were made whole.

It is possible, no doubt, to account for such cures on a purely naturalistic hypothesis, such as that which Keim³ accepts, viz. that

¹ See an article by Dr. A. T. Schofield in the *Contemporary Review*, March 1909, for examples.

² Matt. ix. 20 (Mark v. 27); Matt. xiv. 36 (Mark vi. 56); also Luke vi. 19: Power came forth from Him and healed them all. Cp. Acts, xix. 11, 12 and v. 15; the Apostles and, apparently, our Lord sanctioned a sort of sacramental medium of cure to meet the needs of a simple populace.

³ See Bruce, *op. cit.* p. 275.
they were cases of faith-healing; a phenomenon which recurs in connexion with nearly every form of religious belief, and in every stage of social development. The influence of the spiritual imagination on the bodily state is undeniable. Everyone knows something about the phenomena of Lourdes and Bethshan, healing resorts which, theologically speaking, lie at opposite poles. In a cruder form the same effects are found in connexion with holy wells and relics of the saints.¹ We may go back to the ancients and find wonderful cures reported in the pagan world, from the shrines of Asclepius (the patron deity of physicians). A blind man touches the altar of Aesculapides (as he was called at Rome) on the island of the Tiber and receives his sight.² The Emperors Hadrian and Vespasian used to touch for the 'King's evil.'³

But can anyone study the miracles of our Lord as a whole (for we must not lose sight of those wrought upon inanimate nature) and feel that they are sufficiently explained by a familiar truth in psychology, viz. that the

¹ See chaps. xxvi. and xxxi. in Rev. Percy Dearmer's Body and Soul.

² O. Weinreich, Antike Heilungswunden, p. 63. Scholars will remember how Plutus recovered his sight by incubation in the temple of Asclepius in Aristophanes' play.

³ Weinreich, p. 75
religious imagination is able to stimulate the bodily forces, whatever may be the spiritual soil in which that imagination is bred? Faith, or a conscious receptivity in the mind of the patient, was a frequent factor in the healing process; although there is really nothing in the records to make us predicate it of Jairus’s daughter or the centurion’s slave or the nobleman’s son. It is surely remarkable that our Lord held Himself aloof from all those methods of cure which might have suggested the enchanter and magician, particularly in the case of demoniacs. The Jews, like other ancient nations, resorted to the use of exorcism, incantation, and talismans, which owed their potency to their effect on the imagination. Christ does not hypnotise men or throw them into an ecstasy. Where faith is present, He gladly works through it towards the salvation of the whole man. But often there is a mere flicker of faith, a spark in the flax. In the sick room, when the vital forces are enfeebled, the brain clouded, and the spirits depressed by physical malady, it is a rare thing, surely, for the flame of faith to burn brightly and the imagination to glow with the consciousness of an unseen Presence. And the Church would have but little encouragement to invoke for her own ministries the healing Power of her
Master, if it could only be enlisted on behalf of such patients as already possessed 'comfort and sure confidence in their Lord.' We believe that the Church has something less elusive to offer her people in their hour of need: and we return to the records of Christ's miracles in order to discover it.

(iv) The value of what is called 'mental therapeutics' is no longer contested; it receives, and has received for some time, the careful attention of the medical profession. We approach the subject from the religious standpoint, we base our study of it upon the teaching and practice of Jesus Christ. Accordingly, we must discriminate between psychic treatment and spiritual treatment. The former term, if applicable to religious treatment, can also denote forms of mental cure which are unconnected with religion, e.g. the use of hypnotism. But Christ addresses Himself to the Spirit (πνεῦμα), that highest element of our nature, through which the mystics hold that we have kinship with God, and in unison with which the Holy Spirit attests our Divine sonship. His miracles are works of spiritual healing, they are wrought for the whole man, not only for soul, and certainly not only for body. Christ's view of healing is relative to His view of disease,

1 See British Medical Journal, June 18 1910.
His view of disease to His view of human nature. Had he attached to bodily health the supreme importance which it is the tendency of our day to assign to it, and regarded bodily pain as a thing at all costs to be effaced, we must suppose that His whole Life upon earth would have been devoted to the relief of sickness and pain, and that the ‘Healing Ministry’ of His Church would have been far more clearly defined. But no more does He abolish disease than He abolishes pauperism. The tendency of His teaching is to inculcate self-sufficingness (the ἀὐτάρκεια of St. Paul\(^1\) and the Greek philosophers) in the face of all temporary evils and ailments, the conquest of things material by the spirit, its supremacy in the hierarchy of human nature; in a word, the principle of inner control or autonomy, as the birthright of the human spirit. In his great picture of the Transfiguration, Raphael has caught this contrast between the calm of the heavenly Mount above and the ineffective, agonised distraction of suffering humanity here below, in the person of the lunatic boy and his father. But that heavenly calm of spirit is not the self-centred aloofness of the Stoic. The doctrine of the Incarnation brings the Divine Saviour down

\(^1\) Philippians, iv 11.
to men, lifts man up to the peace of heaven,¹ and at the same time bids him find that peace in fulfilling the bodily duties of his corporate Church life. It will not admit of a selfish quietism. But before this peace of God which Christ proclaims, the worry and 'fear-thought' of our overstrung modern age, its neurotic sensationalism and morbid self-analysis, would retire abashed. Christ would teach us that human nature is itself only when it is itself in its completeness, when the physical is truly the instrument of the spiritual. There is no dualism, no schism in human nature as Divinely planned. The voluptuary and the ascetic are both at fault, the former more so because he sins against the higher self. Christ is the Saviour of the whole man, and to the sick He restores 'perfect soundness,'² nor does He refuse to be called the Saviour of the body.³

(v) It is a significant fact that in the Gospels the word for 'save' (σωθήνω) is applied to bodily as well as spiritual salvation; it

¹ There is an adumbration of this in the four sublime truths of Buddhism, which lead a man by the sacrifice of the lower self and the helping of others to the final extinction of pain. Bishop Westcott's Gospel of Life, pp. 162, 163. Hardwick, Christ and other Masters, p. 168.
² Acts iii. 16: St. Peter and the lame man.
³ Eph. v. 23
denotes 'to restore to health or sanity.'

A protest may here be entered against the very prevalent opinion that God sent sickness upon man, by an Almighty fiat, in order to discipline him into patience and other Christian virtues. Such a view, crudely stated, has led to much perplexity and distress of faith, and it is not warranted by the teaching of the New Testament. God can bring good out of evil, even in its worst forms. But that is not to say that God by a deliberate act designs and causes evil. More than once in the New Testament sickness is attributed to Satanic agency, in the case of 'the woman which had a spirit of infirmity eighteen years,' and in that of St. Paul's 'thorn in the flesh.' Disease is a disturbance of the balance of human powers, mental and bodily, a derangement of faculties and functions. Consider the bearing of this upon life. Modern science teaches us the doctrine of the persistence of matter; in Sir Oliver Lodge's words, 'a really existing thing never perishes, but only changes its form'—in the case of our complex human constitution, that change of form is what we call death. It is vital force which maintains that inner harmony which we call health:

1 E.g. Mark v. 23, 28; vi. 56; James v. 15.
2 Luke xiii. 16.
3 2 Cor. xii. 7.
is disease, an accident, which impairs it. This derangement and discord is but one instance of that general disturbance of the world's harmony which sin has introduced. Sometimes, as in the case of the impotent man of St. John v., disease is the direct consequence of sinful conduct. It is the work of the Son of Man to restore harmony and repair the breaches in Nature's order. And this His healing power on its spiritual, which is its essential, side effects. Incidentally, miracles are 'signs,' evidences of the Christian Revelation, but their primary character is that of 'mighty works' (δυνάμεις), particular manifestations of that Power (δύναμις) which resides in the Person of the Lord. As such they impressed King Herod, though he attributed their authorship to the Baptist risen from the dead.¹

(vi) This Healing Power of Christ stands in closest relation to His claim to be 'the Life of them that believe and the Resurrection from the dead.' It flows from His Personality. Though that Personality is veiled for us in profound mystery, we know that in It the Human will and the Divine will are in perfect accord; and, therefore, it does not surprise us that, while a place is found in the Saviour's

¹ Mark vi. 14
Life upon earth for weariness and pain, none is found for sickness; for, in all things, He conformed to the Will of God for man, which is health, not sickness. Sickness is a violation of that normal condition which God has appointed for man. When infection and disease entered into the world, we must believe that they were part of that general imperfection which God can only be said to will as a means to an end, or as a passing stage in the evolution of good. God does not send sickness to scourge us, but overrules it to purge us. In saying this, we need not deny the possible place of death in a perfect cosmos; a death which should have been the gradual ebbing of physical vitality, not its sapping and undermining by the malignant forces of disease. We should expect, then, that our Lord's healing power would be the action of the life-giving Spirit of God upon the spirit of man, from the very fact that in Christ man was brought into living contact with God.

Recent psychology, especially in the investigations of Professor W. James and the late F. W. H. Myers, has thrown a new light upon those recesses of human nature in which our religious experiences take place. We have learned that there is a subconscious self, a submerged portion of our faculties, which responds to spiritual impressions and accepts
those suggestions of a Higher Power, to which mind and intellect are sometimes deaf, a 'subliminal self,'¹ in which religious faith and the inspirations of genius are alike rooted, and which is en rapport with another world than that of the senses. We are reminded of Tennyson's words:

Moreover, something is or seems,
That touches me with mystic gleams,
Like glimpses of forgotten dreams—
Of something felt, like something here;
Of something done, I know not where.²

It is through that under-self that mental cures appear to operate.³

The theory certainly contributes something to our problem, making it conceivable, even to our finite intelligence, how the Divine Life of Christ should enter into man, sick of body and sad of soul, and this quite in the line of the order and natural law of God's universe. Christ is one with the Father; He came down from Heaven to do the will of the Father; His works are done in the Father's name (John x. 25). The Father hath given the Son to have life

¹ I.e. a self beneath the margin of consciousness. Mr. Dearmer has named it the 'undermind.'
² The Two Voices
³ 'If the grace of God miraculously operates, it probably operates through the subliminal door.'—Professor James.
in Himself (John v. 26). The Divine Life is communicated to those who seek it in Christ. We are not to restrict the thought of that Life to the immaterial part of our nature; it is the more abundant life which floods the being of him who 'liveth unto God.'  

We may not fathom its hidden processes: like spiritual teaching, spiritual healing can come home only to the 'spiritual men' whose minds are 'in tune with the Infinite.'  

But some desire for 'more life and fuller' is found in every man. Classical scholars will remember the pathetic lines written by the statesman Mæcenas in his last illness:

Debilem facito manu,
Debilem pede, coxa . . .
Vita dum superest, bene est.

In this universal fact of human nature, this desire to live, which varies infinitely among men from the mere craving of animal existence up to the desire for the life in God, we see man's response to the Giver of Life.

The appeal of the Good Physician is to human nature, and 'He knows what is in man.' He takes a natural emotion or faculty, vitalises

---

1 John x. 10; Rom. vi. 10.  
2 1 Cor. ii. 14, 15.  
3 Seneca, Ep. 101:

'What matters crippled hand and halting thigh?
So life be left the cripple, what care I?'
and invigorates it. We have had to keep the connexion of spiritual health and physical health constantly before us. There is a parallelism between them which is no mere analogy, but is a sort of pre-established harmony; and therefore a wise interpretation of Scripture has seen in the Miracle an 'acted parable.' Thus it is in regard to the 'desire to live' which supports our bodily vitality. This categorical imperative or instinctive 'ought' of health is a primary instinct. The 'will to be well' corresponds with the 'will to be good' which is the basis of the moral life.

(2) Bearing these principles in mind, we must turn to a closer examination of some of the miracles, with a view to some practical conclusions in regard to the healing office of the Church of our own day.

(i) Has the age of miracles long ceased? It has long been assumed by religious minds, as a kind of axiomatic truth, that this is so. They have seen in the healing miracles of Christ the unique exercise of a power specifically Divine, a power which was continued for a time, with other extraordinary gifts, to the early Church for reasons which no longer held good when once she had taken firm root in the world. But we have already shown reasons
for the opinion that, unique as is our Lord's Humanity, we are to regard it as conditioned by those laws of nature and material existence which are the expression in the visible sphere of the Creative will. 'It behoved Him in all things to be made like unto His brethren.' And there is strong reason to hold that the true believer will be permitted, in virtue of his fellowship with Christ, to do 'greater works' than those which Christ Himself wrought, greater, that is to say, not in a material but a spiritual way. That the works in question were wrought 'in the spirit' is unquestioned. Consider what those 'spiritual' methods of the Great Healer were. He wrought His mighty works in the Father's name. Not only does He lay down for others the principle of intercessory prayer, but as Man He exercises it Himself. Of the demoniac boy He says: 'This kind goeth forth not but by prayer and fasting.' St. Luke records the fact that He made the importunity of the multitude, who sought His teaching and healing grace, a fresh occasion for retirement and prayer. The same Gospel tells us of a night spent in prayer before the election of the Twelve Apostles. They received His commission to

1 Heb. ii. 17.  
2 John xiv. 12.  
3 Luke v. 15, 16.  
heal and to teach on the succeeding day, which saw also the vast concourse of people resorting to Him once more from all quarters. In the account of the raising of Lazarus it is clearly laid down that Jesus Christ knew the Father’s will in virtue of fellowship with Him in prayer and meditation, and that He exercised His own life-giving powers in accordance with that Will.

Health in itself is an ideal, the perfect harmony of all the elements, the spiritual and the material, which constitutes a man. One of the greatest living authorities writes: ‘Health, like every other such name, is to be used in a relative sense; absolute health is an ideal conception.’¹ This being so, it is apparent to any religious mind that the true concept of the well-being, physical and even mental, of any person is only to be found in the Mind of God. And that is only an abstract way of saying that, if we follow Christ’s example, we shall seek to enter into His fellowship with the Father. In that Divine fellowship we shall be able to pray for the true health and recovery of our sick people. ‘The prayer of faith shall save the sick,’ for faith implies a whole-hearted acceptance of the Will of God

¹ Professor Clifford Allbutt, System of Medicine, vol. i., Intro. p. 22.
for the uncertain future. This gives a man the tranquillity of soul which is no less needed for prayer than for action. Such an one possesses his own soul. Our Lord promises to those, who 'have faith and doubt not,'¹ that they shall 'remove mountains,' a hyperbolic expression, but yet one which seems to claim a certain power of acting upon inanimate nature.² Such a power need not carry with it a positive breach of cosmic law. It is impossible for any really reverent mind to wish, even in the supposed interest of his dearest friend, to bend the Will of God to his own desire. Such a rash prayer involves the fatal flaw of that 'doubting mind' which is forbidden us, the mind 'divided' between God and self. The spirit which unites us to God, that unfathomed inner self, desires the universal good.

Our wills are ours, we know not how:
Our wills are ours, to make them Thine.

God wills the true health and salvation of each human soul, as He alone can view it, in its relation both to the vast whole of immaterial being and to the order of the material universe.

¹ Matt. xxi. 21. Cp. James i. 6: 'Nothing doubting.'
² See Dr. Sanday, Life of Christ in Recent Research, pp. 223, 224.
'His will He knoweth which way to accomplish.' Prayer is the act of resignation of our individual desires and thoughts into His all-wise hands. Prayer universalises a personal longing; and so wonderful is the magic of true prayer, fetching up from the deep of our being suggestions, inspirations, forces unperceived by man, that it can never fail to induce a sense of calm, the most favourable for a physical recovery; and many a time it has effectuated that recovery itself. Science may teach the 'reflex action of prayer'; religion will always find authentic answers to prayer.

Prayer is the spiritual instrument on which our Lord in His Human Nature relies, and on which He encourages His Church to rely—'a mighty engine of achievement.' ¹ His method was grounded in prayer, the prayer of that Divine fellowship, which is His, as it cannot belong to any of the sons of men, and yet in Him, 'in the Name of Christ,' the Church must still expect to accomplish the miracles of faith, in proportion to the degree of her own spirituality. Who, indeed, would have looked for miracles of healing in the English Church of the eighteenth century, unless it were among the non-jurors, who actually revived the

¹ Sir Oliver Lodge.
apostolic rite of unction,¹ and the pious followers of John Wesley?²

(ii) But that spiritual power, thus resident in the Healer, has to communicate itself to the subjects of His grace; subjects they must be rather than objects. And His first purpose is to excite the dormant energies of life and action. He does it as a wise physician will do it, by concentrating the patient’s mind upon Himself.³ This is done by a question, or other means, adapted, with His profound insight into character, to the individual case. In the case of the deaf man who had an impediment, He effected this by isolating him,⁴ and then using physical means (with finger and saliva). Exactly parallel is the case of the blind man, which, like the former, is recorded by St. Mark alone.⁵ He asks blind Bartimæus, 'What wilt thou that I should do unto thee?'⁶ And this is one of several cases in which the sovereign faculty of will leaps forth, and the confession of faith attends it.⁷ In the cure of the lame man by St. Peter (in

¹ The Rev. P. Dearmer, Body and Soul, p. 289 sq.
² Ib. 362, 363.
³ 'When the eye of the patient meets the eye of the physician, the cure begins if it is likely to take place.'—Dr. A. T. Schofield, cited by Dr. Worcester in Religion and Medicine, p. 50.
⁴ Mark vii. 33.
⁵ Ib. viii. 23.
⁶ Luke xviii. 41.
⁷ John v. 6, 8.
Acts iii. 4, 5) this concentration of the thought of the patient upon the healer is reciprocal (ἀτενίσας ... ἔπειξεν).

The tonic influence of a healthy personality upon the hysterical, neurotic, and mentally diseased, not to speak of minds depressed in a normal way, is familiar to everyone. In Dinah Morris’s visit of comfort to the widowed Lisbeth, we have a sample of that subtlest perception and ‘subduing influence of the spirit’ which we may call inspiration.¹ In the New Testament it appears at its highest in treatment of those strong cases of dual personality, mental disorder, or hysteria, which we know as demoniacal possession. We cannot here discuss the question, whether the sufferer was the victim of the lower elements in his own nature or of a malignant outside influence (known in the language of the day as a ‘demon’). On the other hand, it has to be remembered that the Jews personified ordinary diseases; and our Lord conformed to popular ideas when ‘He rebuked the fever’ of Simon’s wife’s mother, unless we hold that the evangelist has coloured the record of His action by his own mentality.² On the other hand, we know little as yet of the psycho-

¹ G. Eliot, Adam Bede, chap. x.
logical problems of civilised humanity and less of those of half-civilised or uncivilised peoples, such as the Galileans of our Lord's day. But if we should allow that the demon was merely the sufferer's lower ego, the marvel of the cure is not lessened. There is a great power of evil in the world; and the lower self was entirely dominated by it until Christ emancipated the man by His sovereign demand upon his spirit. Inner harmony was restored. They find the man 'sitting at the feet of Jesus, clothed and in his right mind.' The bodily and the mental well-being are combined in the cure. The sufferer's enfeebled will is braced up to respond to the Will of the Healer, that ease shall expel disease. Within the man's being, as truly as without it, 'imperavit ventis, et facta est tranquillitas magna.'

(iii) An analysis of the miracles of Christ indicates His attitude towards the material and outward means, on which the physician still so largely relies. The letter of King Abgarus to our Lord (preserved by Eusebius), genuine or not, indicates, we may believe, the feature in His treatment which most impressed the men of His day. 'The story hath reached my ears of Thee and Thy healings as wrought by Thee without drugs and simples.' Though

this was so, He did not eschew the use of material and visible signs, such as clay and saliva, which were adapted to convey to sick folk that 'mental suggestion' of returning health, which was His constant method of healing. In the following miracles the use of such material means is recorded: the case of the deaf man with an impediment (Mark vii. 33), of the blind man at Bethsaida (Mark viii. 24), of the man blind from his birth (John ix. 6), who also was sent to wash in the pool of Siloam. Of the Apostles, on their first mission, it is said that they anointed with oil many that were sick, and healed them (Mark vi. 13). Probably this element, which was in frequent medicinal use, was in their hands ceremonial, a symbol of that healing power of their Master which they were allowed in His name to exercise. He Himself is found, in the great majority of instances, to rely on the touch of the hand alone.\(^1\) He knew that it spoke to the heart of a Divine effluence of power as well as a human sympathy. In one of the frescoes of the Creation, on the roof of the Sistine Chapel, Michelangelo has pictured the form of the first man, perfect as a statue, but

\(^1\) Thus Luke iv. 40; Mark i. 41, vi. 5; Matt. ix. 29; Luke xiii. 13. Mr. Dearmer gives a careful 'Table of the healing works of Christ,' Body and Soul, chap. xiii.
lifeless until the Finger of God quickens it with a touch. And, after all, a universal instinct associates ideas of sympathy and positive relief with the movement of the hand. Thus in the Greek myth, the distracted Io is comforted by the prophecy of Prometheus that the God would restore her by his touch.¹

(iv) The healing of the nobleman’s son, of the centurion’s slave, and that of the Syrophœnician woman’s daughter stand by themselves as instances of ‘absent treatment.’ The strong impression wrought in the mind of the father, the master, the mother, respectively, is conveyed by a sort of telepathy to the mind of the patient. ‘Why herein,’ surely, is a marvellous thing for those who cannot accept our Lord’s claim to be the Son of Man in a unique sense—that He should thus have possessed, 2000 years ago, a knowledge of the mysterious processes of human nature which modern science is only now beginning to divine. It is in that fact that the ‘glory’ (Luke xiii. 17; John xi. 40), the ‘wonder’ (Matt. xxi. 15), the ‘strangeness’ (Luke v. 26) of the miracles of Christ consist. They are ‘works of power,’ ² ‘outcomings of that mighty

¹ Aesch., Pr. V. 848, 849.
² Matt. xi. 20; Luke xxiv. 19; Acts ii. 22, &c.
power of God which was inherent in Christ,' ¹ and which He exerted within a region of human nature then unexplored. We cannot ponder too deeply on that great saying of St. Augustine, 'Portentum fit non contra naturam, sed contra quam est nota natura.' ² Who shall attempt to lay down the laws which govern the operation of the spiritual upon the material? and still more to delimit the powers of the Personality and Will of Him, in whose name Apostles, Saints of the Church, and humble Christians unrecorded in history have wrought cures, which only a purblind scepticism can gainsay?

¹ Abp. Trench, Synonyme of New Testament (Art. xci.).
² De Civitate Dei, xxi. 8; quoted by Dr. Sanday, Life of Christ, &c., viii., adding, 'miracle is not really a breach of the order of nature; it is only an apparent breach of laws that we know, in obedience to other and higher laws that we do not know.'
THE PRINCIPLES OF MODERN CHRISTIAN HEALING

BY

W. YORKE FAUSSET, M.A.

VICAR OF CHEDDAR AND PREBENDARY OF WELLS
THE PRINCIPLES OF MODERN CHRISTIAN HEALING

BY W. YORKE FAUSSET, M.A.

The psychologists teach us that a man's 'self' is a larger thing than the 'me' which, we might say, a child has in view when it puts out a hand to get a sweetmeat for itself. As Professor W. James says, 'The old saying that the human person is composed of three parts—soul, body, and clothes—is more than a joke'; and he goes on to include in that self the man's immediate family, his home, the property he has collected.¹ And then we think of Aristotle's definition of man as a 'political' or social animal—the social self with its wider or narrower reach—for 'properly speaking a man has as many social selves as there are individuals who recognise him.'

(i) All this has an important bearing on the subject of health and disease. We are all influenced by our environment for better or

¹ Text Book of Psychology, pp. 177, 178.
worse. The material and visible conditions of life, our home, our friends and associates, our country, our daily occupations, contribute to make us what we are. Life is defined by Herbert Spencer as 'the continuous adjustment of internal relations.' It may be difficult or even impossible to attain to the stable equilibrium of perfect goodness, perfect health, perfect happiness; and, in fact, neither science nor religion encourage us to expect such a consummation within the limits of this earthly existence.

But there may be a 'continuous adjustment'; and it must be the practical aim alike of religion and of science to mould the individual by the environment which will best harmonise his personal good with the good of the whole. We have to elevate the conditions of human existence. The individual has not only to adapt himself to his environment, in the temper of *laisser faire*, but to adapt it to the satisfaction of his highest good. 'Great religious consciences have taken their post, confronting society, as representing in themselves truth and right, because behind them was God, while behind existing societies there is only man, nature, and circumstances. Far from consenting to identify himself with the social conscience, the religious conscience
disposes man to oppose the rights of God to those of Cæsar, the dignity of the human person to public constraint.'

In the language of religion, 'No man hath seen God at any time: if we love one another, God dwelleth in us, and His love is perfected in us.' That is the ideal of the Christian Society, the Body of Christ, actuated by the great principles of faith, hope, and love. And much might have been said of the duty of a Christian State to secure to all its members the elementary conditions of a healthy, useful citizenship. Most of our disease is a disgrace to our Christian civilisation, because it is preventable. The ancient poet rightly associates the spectres of Care, Hunger, and Fear with the grim forms of Disease at the portals of his Inferno:

Vestibulum ante ipsum primisque in faucibus Orci
Luctus et ultrices posuere cubilia Curae:
Pallentis qua habitant Morbi, tristisque Senectus,
Et Metus et malesuada Fames, ac turpis Egestas.

(ii) But the problem of the prevention of sickness scarcely concerns us here, though it requires a passing reference. It has been

2 Virg. *Eneid*, vi. 273 sq. 'Right in front of the doorway and in the entry of the jaws of hell Grief and avenging Cares have made their bed; there dwell wan Sickness and gloomy Eld, and Fear, and ill-counselling Hunger, and loathly Want.'—J. W. Mackail.
sufficiently shown that you cannot isolate the individual from the society in which he moves; that were to make him an unreal abstraction. The Church has never committed that mistake in her dealing with the sick. When we pray, in the Office for the Visitation of the Sick, that God would 'preserve and continue this sick member in the unity of the Church,' the prayer breathes the very spirit of ancient piety. It is an unspeakable help, in dealing with a sick man, to be able to appeal to his own conscious and sincere membership in the Body of Christ. The Visitation Office is 'peculiarly a ministration for those who have been trained beforehand in the fulness of Church life and privileges.' Herein, as often, the Prayer-book sets up an ideal standard. But, however far our actual practice falls short of it, we must work towards it. It is said of St. Francis of Assisi that, 'in each one, with whom he had to deal, he saw a possible Christ.' A bold saying, had it not been that the Master Himself had anticipated it. In the Christian view of things, the sick and suffering, whatever their religious attainments and professions may have been, have a clear claim upon the other members of the One

1 Dean Savage, *Pastoral Visitation*, p. 76.
2 Matt. xxv. 35, 36.
Body. Christian faith can only heighten human sympathy.

And in the New Testament there are not wanting indications that the faith of friends has a vicarious efficacy. In such faith the force of suggestion is at work, but it is a collective suggestion. There is the typical case of the four friends, who were not to be put off by the crush at the doors, but resolutely stripped the roofing in order to lower the paralytic, as he lay on his pallet, into the Saviour’s immediate presence. Such unconventional faith was irresistible. ‘When Jesus saw their faith, He said unto the sick of the palsy, Son, thy sins be forgiven thee.’¹

The bodily cure soon followed. The fact is, that such faith diffuses a spiritual atmosphere; it is contagious and works from mind to mind. ‘Our bodies isolate us, our spirits unite us.’²

Similarly, in the raising of Jairus’s daughter an emphasis is laid on the necessity of a sympathetic atmosphere: first, by the fact that only three, the elect among the chosen Twelve, SS. Peter, James and John, were allowed to

¹ Mark ii. 5. Cp. T. T. Carter, Holy Eucharist, pp. 150, 151, especially the words, ‘To lean one’s own failing faith on the more trustful, assured faith and convictions of others. So that the same spirit may communicate itself to the sad and darkened soul by a mutually organic sympathy.’

² Sir Oliver Lodge, Man and the Universe, p. 47.
attend their Lord; secondly, by the exclusion of all others in the house, except the father and mother of the child. The professional mourners and musicians were turned out—not merely because they 'insulted the dumb-ness of sincere sorrow and the patient majesty of death' (Farrar), but because they diffused, as their behaviour soon showed (*κατεγέλων αὐτοῦ*), an atmosphere of unbelief. The Lord wishes to remove all antagonistic and disturbing human presences and to speak Himself in power to the innermost soul of the departed maiden. On the other hand, if the air was charged with unbelief, if those He wished to help were without faith, as was the case in His own village of Nazareth, 'He could there do no mighty work.'

We trace the same principle in His dealing with those whom He had healed. Sometimes He bids them 'go and tell their friends how great things God has done for them,' as when He refused to keep the Gadarene demoniac by His side. At another time He bids them tell no man of the cure which had been wrought. This difference of treatment can be explained most simply, if we suppose that in the one case Christ knew that the patient's ordinary *milieu* was favourable to

---

1 Mark vi. 5.
his progress in bodily and spiritual health, in another case He knew that this was not so. So it was in the case of the leper of St. Mark i. 44. And, again, this difference of treatment may have been 'grounded,' as Archbishop Trench says, 'on the different moral conditions of the persons healed.' It is so still, for human nature remains constant to certain broad types. Some overwrought people require the absolute isolation of a 'rest cure'; others, who are moody and self-centred, can only rally their disused powers in contact with invigorating companionship. They are the unhappy victims of that numbness of spirit of which R. L. Stevenson writes so pathetically in his essay entitled 'Ordered South.'

(iii) This brings us naturally to consider the special value which Christ attaches in His teaching to a corporate act of prayer. For this is the meaning of the words 'If any two of you shall agree on earth as touching anything that they shall ask, it shall be done for them of my Father which is in Heaven; for where two or three are gathered together in My Name, there am I in the midst of them.' And this it is which has moulded the form of the Lord's Prayer, and that of the great

1 Cp. the medieval complaint of 'accidie.'
Sacrament of Unity, our highest act of intercession. Thus our Lord enjoined upon His disciples the duty and the efficacy of combined spiritual effort.\(^1\) There is a power intensive, as well as extensive, in collective prayer. In this, as well as in other activities of the spirit, the total effect gained is larger than the sum total of units of effort. There is a sort of analogy here with the force of collective suggestion, which we have been considering above: but we must not expect to find a complete philosophical explanation of any great spiritual principle. Our personal experience verifies the value of corporate prayer. If it were not so, religion would be an individual matter alone; it would lack its most universal expression, that of common worship. It is because the Church in our country lost for a long period her corporate consciousness, at least in a large degree, that she lost sight of the power of corporate intercession for the sick members of the Body of Christ. (Of the faithful departed we may not here speak.) But her formulas and liturgy have been a standing witness against such obliviousness, with which the Church of to-day can hardly be taxed, and those who profess their belief in the Communion

\(^1\) Bertroux, *op. cit.* p. 189: 'une volonté collective est sans rapport avec la somme algébrique des volontés individuelles.'
of Saints find in such intercession its most practical expression.

Consider the bearing of all this on our highest act of worship, the Holy Communion. There are few parish priests who cannot testify from their own experience to the wonderful—if not miraculous—effects of the reception of the Sacrament upon apparently dying persons, who had been given up by medical science. There is nothing in this that need surprise the Christian believer, nothing that is really repugnant to the findings of modern science. The Apostle Paul, writing to the Corinthians about the profanation of the Lord's Supper, attributes to this cause certain physical consequences incurred by the offenders. 'For this cause many among you are weak and sickly, and not a few sleep.'

There is a natural and proper antipathy in many minds to the idea that the Sacramental Elements operate as a charm. Such an idea would be irrational and superstitious, and we are not intended to conceive of a vindication of the sanctity of the Lord's Supper by material and simply magical penalties. The offence of the Corinthians was the irreverence of 'not discerning (or discriminating) the Body,' and Apostolic teaching plainly implies that

1 1 Cor. xi. 30.
a spiritual offence of itself acts upon the bodily organism, by a mysterious law of the Divine government.¹ (Here again we must not say that God sent the disease.) Surely, then, it may be argued, per contra, that a reverent reception of the Eucharist makes for health and life, for it brings the failing bodily and spiritual powers of the sick into contact with the Divine and immortal life which animates the mystical Body of Christ. This line of argument may be illustrated by the words of the late F. W. H. Myers: 'To keep our chemical energy at work, we live in a warm environment and from time to time take food. By analogy, in order to keep the spiritual energy at work, we should live in a spiritual environment, and possibly from time to time absorb some special influx of spiritual life.'² It remains only to add that the words of administration in our Communion Office embody the truth for which we are pleading. 'The Body of our Lord Jesus Christ, which was given for thee, preserve thy body and soul unto everlasting life.'

¹ In the Cambridge Bible, note ad locum, Dr. Lias says we can well understand how a crime against His Body and Blood would deprive any Christian, who committed it, of His presence, and predispose it to sickness and even death:

² Human Personality, i. 218; quoted by Dearmer, Body and Soul, p. 123.
(iv) The charisma, or gift, of healing, is named by St. Paul among the spiritual gifts of the Apostolic Church,¹ and is associated in one place with the working of miracles ('powers').² We have endeavoured to show that it was not intended as a transient but a permanent endowment of the Church. But, in the degree in which the Church corporate falls short in spirituality, her spiritual powers wane. The Encyclical Letter and Report of the recent Lambeth Conference mark a step in advance, though it may not be a long step, towards the revival of this healing agency of the Church. The Committee appointed to report on this particular subject was of opinion 'that the prayers for the restoration of health, which it recommends, may be fitly accompanied by the apostolic act of the Laying-on-of-Hands.'³ We may be disposed to regret that this primitive rite is not mentioned in Resolution 35, which recommends 'the provision for use in Pastoral Visitation of some additional prayers for the restoration of health more hopeful and direct than those contained in the present Office for the Visitation of the Sick.' Desiring, as we do, to follow 'the example' of our Lord Himself and not merely of 'His

¹ 1 Cor. xii. 9, 30. ² Ibid. 29. ³ Report (1908), No. VII. iv. p. 137.
Holy Apostles,'¹ we may most reasonably ask for authority to administer the blessing through one of the outward signs which He employed. A ceremony, duly authorised by the Church, would have much value, as regulating and controlling the impulse to invoke the healing 'charisma,' which at present is often bestowed and received through 'spiritual healers' who lack the full official sanction of the Church.

(v) There is another Ministry of Healing, which the Divine Love has provided for the weary body and the careworn mind, which contributes its own part to the restoration of the sick. It is the silent ministry of Nature. Within the ailing body she exerts her healing power; the doctor's best ally, on the physical side, is the vis medicatrix naturae, that strange recuperative power which resides in organisms, and offers a standing resistance to the inroads of disease and age.² And then outside there are the soothing influences of the world of Nature, which steals into the troubled spirit to bring the calm which Wordsworth, in

¹ Order of Confirmation, first Collect, Mark vi. 5.
² Cp. Sir James Paget's words: 'The power to repair itself belongs to the subject of injury in the same sense and degree as does its power to develop itself and grow and live.'—*Life*, p. 295.
his poem on 'An Evening by the Sea,' likened to the hush of worship:

The holy time is quiet as a nun
Breathless with adoration.

Hebrew literature shows little trace, even indirectly, of that sympathy with Nature, which is the best contribution of what is called 'natural religion' to the inheritance of the human spirit, except when Nature is regarded in her grander and more awe-inspiring aspects, those of the thunder-cloud, the whirlwind, the raging fire, the roaring sea. Yet it is not altogether fanciful to find, in our Lord's habit of retirement to the mountain's side for prayer, His invitation to the disciples to come apart by themselves to rest awhile in a 'desert place,' His choice of the evening hour, at the setting of the sun, for performing His works of mercy, some sanction for that modern sense of the Divine beauty and mystery of Nature in her quiet aspects.

We must believe that Christ Himself was susceptible in a singular degree to those natural influences. After the intense spiritual strain of the Temptation, 'angels came and ministered to Him.' A great modern artist, M. Tissot, pictures the scene as only the

1 Mark vi. 31.  
2 Compare also the nature-parables.
imaginative symbolism of genius would have done. The Saviour lies at full length, utterly exhausted, with every muscle, as it were, relaxed, and through the twilight appear myriads of outstretched angel-hands, reviving the Sacred Body with the touch of spirit-life. Here we have, as in a figure, the expression of the unseen forces of Nature, ministering to the Will of the God of Nature, on behalf of the heirs of salvation and of Him who is the author of our salvation and the Prince of Life.

There is no rule absolute about the influence of familiar scenes and old associations upon the weary or ailing spirit. For some people the cure lies in surroundings as novel and unfamiliar as possible. This is where tact and sympathy on the part of the doctor and nurse and friends come in—questions which must not be confused with natural affection, for in that case they would vary directly, whereas they have been known to vary inversely, with nearness of blood relationship. The quick intuition of sympathy can judge of the environment best adapted to the patient's individual need. The rigid order and routine of the hospital ward may be torture to the sick person who comes from one sort of home and paradise to one who comes from another. The more we can bring of the
‘mind of Christ’ into the tender care of the sick, the more right we shall have to expect that the power of His name will bless our efforts.

(vi) Again, our Lord’s attention to details, i.e. the material conditions of health, calls for notice. We have referred to His provision of rest for His tired followers. We find Him giving directions, after the recall of Jairus’s daughter to life, that food should be given to her. ‘Life restored by miracle must be supported by ordinary means.’

The familiar routine of healthy life is to be resumed as soon as possible. Lazarus is to be loosed from his cerements, when the awe of the bystanders blind them to the practical and obvious. And quite in line with this is Christ’s readiness to conform, in His dealings with men, to the existing social and religious system. It was so notably in the case of the leper, who was bidden, after his cure, to go and show himself to the priest and to make the customary offerings. At the pool of Bethesda Christ helps the impotent man, who has no friend to help him. He leaves the rest of the multitude to the natural operation of the waters.

1 Dr. Swete on Mark v. 43.
2 Mark i. 44.
3 John v. 2.
in the case of the Rabbinical rule of Sabbath observance, the conventional practice was inimical to the freedom of the spirit. Our Lord will never allow the spiritual and essential in things to be overlaid by the material and accidental. Traditionalism was then broken through. The principle, that we must render to Cæsar the things that are Cæsar’s and to God the things that are God’s, manifests itself in various ways, and this is one of them. But, on the whole, Christianity knows no revolutionary breaches in the established social order, as the history of its attitude towards the institution of slavery shows. Men were encouraged to work out their own salvation under existing political and social conditions.

This spirit of conformity to the existing order in all lawful things, and especially our Lord’s attitude towards priestly ceremonial, in the case of the leper, throws a good deal of light upon the relation which should subsist between the clergyman and the doctor in the treatment of sickness. The Christian doctor will gladly subscribe to the words of the favourite physician of Louis XIV, Ambroise Paré, ‘I treated the wound, God healed it.’ Reverently and thoughtfully he will acknowledge the power of prayer and the tranquillising influences of the spirit, and will yield to the
Church, acting by her representative duly accredited and trained, her proper part in the work of restoration. The parish priest will freely allow that the doctor and the nurse, with all the appliances of modern medical science, provide the largest part of the environment and conditions indispensable to recovery; and that it is an act of presumption to reject all these scientific aids in favour of some process of healing by faith alone without expert medical aid.¹

Finally, it must be remembered that we cannot expect to find many favourable notices of medical practice in an age and country in which medical skill was at a very low ebb. 'Medicorum optimus dignus est Gehenna,' said the Rabbis of the later Judaism.² In nothing has human knowledge made more astonishing strides than in medical and in surgical discovery; and, though we have been too prone in the past to credit the medical profession with the whole of the healing work done in Christ's Church, the opposite extreme is to be avoided, and it is well to acknowledge thankfully that 'discoveries in the region of

¹ In Acts xxviii. 9, 10, there is an implication of co-operation between St. Paul and St. Luke the physician; see Religion and Medicine, pp. 365, 366; the language is technical.
² See Dr. Swete on Mark v. 26; also Luke iv. 23; contrast Ecclus. xxxviii. sq.
medicine and surgery come to man through Him who is the Light and the Life, the Divine Word.'

(vii) In a previous chapter we dwelt at some length on the Gospel conception of salvation (as illustrated by the words σώζειν ὀλοκλήρωσις), as a just equipoise of spiritual, mental, and physical faculties and functions. Two remarks may find a place here. The first is, that too much stress may be laid upon the distinction between functional and organic complaints. There are modern critics who wish to eliminate the miraculous from the Gospel narrative, and deal with the sacred text accordingly. For example, Professor Bousset says, in his vivid way, 'The community of the faithful drew the simple human picture of Jesus on the golden background of the marvellous. But the picture can be detached from that background with comparative ease.' In cases which are not to be explained simply by psychology, 'the historically intelligible is still close below the surface, and appears as soon as we remove a few additions which are due to modern tradition.' We have to regard certain narratives as 'legendary accretions (Wucherungen).'

If we cannot accept that position, it is not

1 Lambeth Conference Report, 1908 (vii. iii.).
open to us to explain all the miraculous agency of our Lord and His Apostles and the later Church as consisting in the power to deal with functional ailments by mental or psychic treatment. Nor is it open to us to limit the efficacy of prayer to the stimulation of function and the treatment of nervous disorders. And as, with the progress of medical science, the sphere of the organic is continually growing at the expense of the functional, the ultimate effect of such a concession on the side of religion would be to limit her action to a negligible minority of cases. How would a place be found for the healing of Malchus's ear, if the organic be excluded? But the Church believes that Christ is the Saviour of the body and that the Holy Spirit is, as an early Father says, 'given that He may dwell in our bodies and sanctify them, that in so doing He may bring them to eternity and to the resurrection of immortality, while He accustoms them in Himself to be conjoined with heavenly powers and to be associated with the Divine eternity of the Spirit.'

A second remark is this. Whatever is allowed for the moulding force of environment, Christ plainly teaches that man is never the mere creature of circumstances. Christ is no

---

1 Novatian de Trinitate, xxix.
fatalist philosopher. It is only the evil that man deliberately assimilates which defiles him. 'There is nothing from without a man that entering into him can defile him'—a parabolic saying which has a deep meaning. As it is with sin, so it is with disease. Wilful sin is lawlessness in the spiritual being; disease is disorder in the material being. Much remains yet to be done, which lies well within the range of the free human will, to combat this lawless disorder in the life of body and soul. We believe that the spirit can impose its own order and law and harmony upon the material elements of our bodily frame. This creed may be an ideal, but it is the only really inspiring ideal; for beyond it lies the hope of final perfection. Therefore, with faith and courage, let us press forward.

Neither mourn if human creeds be lower than the heart's desire!

Thro' the gates that bar the distance comes a gleam of what is higher.¹

¹ Tennyson, Faith.
THE CHURCH AND MENTAL HEALING

BY

ELLIS ROBERTS
THE CHURCH AND MENTAL HEALING

By Ellis Roberts

The object of this paper is to show and comment on the present attitude of the Church of England, and of the Churches in communion with her, towards psychic healing: but it may be advisable to remove at the outset one or two misconceptions. With the theory and practice of the Church in this country before the Reformation I am not now concerned. It did not differ essentially from that of the Churches on the Continent. But it should be noticed that a large number of centres for psychic healing, spiritual hospitals, if one may use the term, were removed by the destruction of shrines. In the medieval Church the healer, with his specific charisma, was generally one who was reputed a saint; and usually he healed more people after his death than before. The curious in this matter may consult the
evidence gathered in Dr. Abbott's 'St. Thomas of Canterbury,' and I think an unprejudiced reader will gather from that book conclusions somewhat different from those expected by the author.

After the Reformation what signs are there of psychic healing encouraged and sanctioned by the Church? We are compelled to answer that, in spite of great need, there is very little evidence of an intelligent effort at mental therapeutics. 'In spite of great need,' I say; for this country and Scotland were affected most terribly by the disgraceful witch mania which raged over Europe, especially in the Protestant countries. There was ample material for the quiet, consoling influence of psychic healing; but alas! the unfortunate 'witches' were left to the mercy of scared judges and malicious finders, to the horrors of the trial by floating, or the ordeal of the secret mark. The Church was, apparently, bigoted and powerless.

Yet the existence of an official power, inherent in the Body and acting normally through the Ministers of the Church, was recognised officially in the Canons of 1603–4, which, of course, are still of authority. In the 72nd Canon we read:

'No Minister or Ministers shall, without
the Licence and direction of the Bishop of the diocese first obtained and had under his hand and seal, appoint or keep any solemn Fasts.

... Neither shall any Minister ... presume to appoint or hold any meetings for sermons ... nor, without such licence, to attempt upon any pretence whatsoever either of possession or obsession, by fasting and prayer, to cast out any Devil or Devils, under pain of the imputation of imposture or cosenage, and deposition from the ministry.'

It is evident from this that, however little it was used, the Episcopate was regarded as possessing the power to licence exorcisers who might deal with diseases that we should call mental.

There is one other piece of evidence—practical this time—that the healing power of the Church was not entirely forgotten or neglected. Up to the time of the Hanoverian dynasty, the Kings of England touched for scrofula, popularly known, from this method of cure, as 'The King's evil.' The most celebrated patient I can call to mind is Dr. Johnson. It may be objected that this practice was not the work of the Church's ministry; but it must be remembered that most Canonists regard the King of England as mixta persona (that is, semi-clerical) by
virtue of his Coronation; and also the position given the Sovereign as 'Supreme Governor' of the Church would appear to invest him with an ecclesiastical status.¹

I admit, however, as must all candid persons, that on the whole the Church has grossly neglected all forms of psychic healing; and so welcome the more gladly the definite stand taken in the Lambeth Report, 1908.

That Report is the unanimous act, not merely of the Church of England, but of those numerous bodies in communion with her: on the committee which drew up the report were bishops from America, India, Scotland, Central Africa, New Zealand, and England—a fact that can vouch for the significance of the Report's admissions and contentions. This Report I shall take as the basis of my inquiry into the official attitude of the Church of to-day towards Medicine and Psychic Healing.

The Report opens with a statement that is refreshing in its admission of ignorance after the ready words of many sciolists and 'quack' healers.

'Your Committee, which has had under

¹ With touching for scrofula may be compared the blessing of 'cramp-rings.' The Sovereign of England used, on Good Friday, to bless rings which afterwards were distributed to sufferers from cramp or epilepsy. The last monarch to do this was Mary Tudor.
consideration "Ministries of Healing," has felt itself at a disadvantage in discussing phenomena which only in recent times have been the subject of scientific investigation. In the present stage of knowledge it would be premature for any except experts to hazard an opinion upon such topics as the powers of "Mental Suggestion," and the range of "Subliminal Consciousness," or to attempt to forecast the possibilities of "Mental" or "Spiritual Healing."

While, however, displaying this diffidence in dealing with the scientific side of their subject, the Committee is quite definite about the spiritual aspect of pain, sickness, and suffering.

'The Committee believes that Christ still fulfils in Christian experience His power to give life, and to give it more abundantly; and that the faith, which realises His Presence, is capable of creating a heightened vitality of spirit, which strengthens and sustains the health of the body. The Committee believes that sickness and disease are in one aspect a breach in the harmony of the Divine purpose, not only analogous to, but sometimes at least caused by, want of moral harmony with the Divine Will; and that this restoration of harmony in mind and will often brings with it the restoration of the harmony of the body.
It believes that sickness has too often exclusively been regarded as a cross to be borne with passive resignation, whereas it should have been regarded rather as a weakness to be overcome by the power of the Spirit.'

Then the Committee considers briefly the 'Mental Healing' movement outside the Church, and concludes the first part of their Report with a very necessary warning 'against the peril of being thoughtlessly drawn into alliance, in the desire for health, with any who, under whatever attractive name, are in antagonism with the Christian faith upon any such subject as the Incarnation, the Resurrection, the reality of Sin, and the use of the Holy Sacraments.'

In the second part it discusses 'Spiritual Healing' in the Church, and makes the following statement:

'The Committee would not wish to say a word in disparagement or discouragement of those who may be pioneers in a new branch of service, but it believes it would for the present be unwise to depart from an attitude of watchfulness and reserve; and it is not therefore prepared to recommend that at the present stage any authoritative recognition should be given to those who claim to exercise these "Gifts of Healing."'}
In the third part is a most welcome recognition of the position in the Church of that profession which the Evangelist of the Nativity followed.

'The Committee believes that medical science is the handmaid of God and His Church, and should be fully recognised as the ordinary means appointed by Almighty God for the care and healing of the human body. The Committee believes that discoveries in the region of medicine and surgery come to man through Him who is the Light and the Life, the Divine Word.'

Then we have a brief recommendation that there should be an 'addition to the office for the Visitation of the Sick of more hopeful and less ambiguous petitions for the restoration of health, always subject to the Will of God ... ; and that these petitions be used in close connection with prayer for pardon and peace.' And these prayers 'may be fitly accompanied by the Apostolic act of the Laying on of Hands.'

In the final paragraph the Committee considers the suggestion 'that these prayers should be accompanied by the anointing of the sufferer with oil,' and after a brief historical résumé, concludes:

'In view of this evidence and the conditions
prevailing in the Church at the present time, the Committee is not prepared to recommend the restoration of the unction of the sick, but it does not wish to go so far as to advise the prohibition of its use, if it be earnestly desired by the sick person. In all such cases the parish priest should seek the counsel of the Bishop of the diocese. Care must be taken that no return be made to the later custom of anointing as a preparation for death.'

With unction I do not propose to deal here. The question is really theological; and the discussion as to its revival does not come within the scope of this book. It may be said, however, that the problem will probably solve itself in the near future, as in many missionary and colonial dioceses, and in not a few English ones, the oil is blessed by the Bishop, and may always be had by any parish priest whose sick people desire this ancient rite.

With one exception, to which I shall return later, the Report may be commended as a courageous, if rather jejune, effort to keep abreast of modern psychology and its more practical manifestations. Let me indicate briefly the encouraging signs in the Report.

(1) We have the definite confession that our
present visitation service is not all that can be desired. That we should use more definite prayers for the recovery of the sick.

(2) The Report lays emphasis on the important truth that there must be no banishing of the doctor. Enormous harm has been done by the crude dualism of 'Christian Science'—a theory which, if logically applied, would prevent persons renewing the tissues of their body by food, or removing dirt by soap and water. A doctor's medicine is just as much a prayer, a spiritual thing, when it is properly used, as any formula of consolation inculcated by folk in 'tune with the infinite,' or people who indulge in 'higher thought.'

(3) The Report guards—though perhaps not quite strongly enough—against the modern tendency to lay too much stress on mere bodily health. As Christians and men of sense, we can have nothing to do with a mode of thought that, by exaggerating the value of physical well-being, would cheerfully have condemned to some lethal chamber an Erasmus, a Coleridge, a Stevenson, or a Beardsley.

Now in these three matters the Report does seem to represent the real central body of opinion in the Church of England. No living man, perhaps, better expresses the view of the 'man in the pew' than the Bishop
of London, and he has been one of the first to recognise the reality of the need for a greater recognition of the place of psychic healing. Here is what Dr. Ingram said in his sermon on St. Luke’s Day, 1909:

‘We have on the one side those who really seem to have forgotten the message of the Gospel of the body, who practically in their teaching and even in their own belief simply think of the Gospel as addressed to the soul. They seem to have forgotten that, in our own Holy Communion Service, we pray that our sinful bodies may be made clean by His Body, and some of St. Paul’s most stirring passages are about the body. “Glorify God in your body.” But in their teaching and in their belief they have lost to a certain extent the idea that the Gospel has a message to the body at all. While on the other hand—and it is so very characteristic of the history of the Church that this should happen—outside the Church, with great exaggeration—and with, in my opinion, much false teaching—people are calling the attention of the Church to a forgotten truth. Yes—but with two very grave mistakes. First, they ignore the learning and teaching which God has given us through medical study and investigation about His laws and about His will, and still
more they ignore those blessed means of grace which Christ Himself has laid down as the means of our communion with His life.'

Or again, in a diocesan letter of May last year the Bishop of Winchester (who was Chairman of the Lambeth Committee) emphasises the right of medical science, of healing, and of nursing, to their due place in the Church's spiritual life, to a part in her prayers and thanksgivings.

'At the recent Lambeth Conference the view was expressed that we as a Church have failed to show sufficient sympathy with the great works of healing, of conflict with disease, and of the alleviation of suffering carried on by the medical and nursing profession. The Divine blessing vouchsafed in modern times, through the progress of knowledge and the advancement of skill, have only in too small a degree been allowed to enter into the prayers and thanksgivings of the Christian Church. It is right that, with greater faith and a larger intelligence, the Church of Christ should acknowledge that the gifts of healing and the discoveries of science come from the Spirit of God, and should seek more systematically to include this and kindred subjects in intercession and praise.'
Not only, however, do we find the Bishops laying stress on the Church's duty in the matter of healing; but we also find eminent physicians, who are also Churchmen, welcoming the priest in the sick room. In a remarkable article contributed to the *Guardian*, Sir Dyce Duckworth wrote:

'Next, I will express my opinion that our twentieth-century Christendom is generally lax and feeble in offering earnest prayers for the sick in all stages and for a blessing on the remedial means employed. We should look to a higher Power than that of man to aid us at the bedside, and as thoughtful physicians we do do seek these means to aid us.

'Mental healing has a recognised and long-acknowledged basis of truth and fact, and may be employed by honourable and skilled doctors who have the gift and power to use it. I do not regard it as a fitting duty for the "priests of the soul," but one to be employed in its appropriate place, as it becomes better understood in the course of time as a part of legitimate ordinary treatment. I see no objection to the practice of unction and laying-on of hands by Christian ministers for those who desire it, but I regard this as an additional means of help, a solemn form of assurance and comfort, together with prayerful ministration, in conjunction with,
and as a reinforcement of, the best skill of legitimate medicine. To replace the latter by the former I regard as a withholding of God’s gifts to man and therefore unjustifiable. I conceive and believe that the gifts of the Holy Spirit are capable of development in the course of the ages and under our present dispensation, and that they were not limited in form and exclusiveness to the age in which they were first somewhat crudely manifested.

We may welcome particularly Sir Dyce Duckworth’s emphatic pronouncement about prayer. After all the basis of psychic healing is, and always has been, prayer—whether the means used is oil, or water, or the relics or even the shadow of holy men, as reported in the Acts of the Apostles. The motive power that makes any of these means availing is simply prayer. Prayer, whether spoken, desired, or acted, is the vital force that gives the psychic movement all its validity. In insisting on the importance and reality of prayer we have the support of such a psychologist as Professor James, who writes: ‘As regards prayers for the sick, if any medical fact can be considered to stand firm, it is that in certain environments prayer may contribute to recovery and should be encouraged as a therapeutic measure.’
And if the doctor is willing to recognise the great value of prayer, the divine should not be backward in welcoming the doctor; nor should he regard the medical man and the philosopher with suspicion if they lay stress chiefly on the 'reflex' value of prayer; regard its subjective effects, rather than investigate its real or objective power.

Once more let me quote the Bishop of London:

'If I was ill, I would send for the best doctor, and get my parish priest to come and pray by my side, believing that the double work of Jesus Christ is shared by two great professions. It would be bad for either to be banished from the sick room.'

That is the position on which we should lay stress. The future, I am sure, lies with those who are willing to accept the religion of the Incarnation and all that it signifies; the men who proclaim joyfully and unwaveringly that Spirit has dwelt in flesh, but who also never hesitate to assert that it is real Flesh in which the Spirit dwelt. We must have no quarter with the damnable heresy that denies to sin and suffering and disease a reality that it concedes to food and to fees: and we can have no truce with the hard materialism that will acknowledge the truth of nothing that is

---

1 Answer to a questioner. Lent Mission, 1910.
not revealed to the scalpel or the test-tube. We may be thankful to-day that so many of our leading physicians are becoming more and more willing to admit the reality of prayer and the rights of the priest; we must take care that no headstrong divines, in their new zeal for psychic healing, disparage or despise the profession of St. Luke.
THE EUCHARIST AND BODILY WELL-BEING

BY

ARTHUR W. ROBINSON, D.D.

VICAR OF ALL HALLOWS BARKING, EXAMINING CHAPLAIN TO THE BISHOP OF LONDON, AND RURAL DEAN OF THE EAST CITY OF LONDON
THE EUCHARIST AND BODILY WELL-BEING

BY ARTHUR W. ROBINSON, D.D.

The editor of this volume thinks that it should include a paper upon the relation of the Eucharist to bodily well-being, and he has asked me to deal with the question. I am fully aware of the difficulty of doing so, and shall be well content if what I am able to say should lead others to feel, as I do, that the subject is one which deserves much reverent and careful attention. Perhaps that is all that any of us who are taking part in the production of this book can hope to achieve. Our desire is to be allowed to prepare the way for the clearer and stronger action of the future. Little by little we are coming to see that the scope of Christianity is bigger and more comprehensive than has for some time been supposed. We can trace the steps by which religion and its benefits had got to be looked upon as chiefly, if not exclusively, concerned with individuals.
and their souls. And we can recognise that there have been, and are, counter-movements at work whose tendency is to raise us out of the limitations within which we had settled and to place our feet in a larger room.

To begin with, there has been the revival of the Corporate aspect of the faith, with an insistence upon the truth that the fullest life is only to be realised through fellowship. Very slowly we have been learning that we are not meant to be perfected as individuals, but as parts of a whole of which Christ is the head and we are all of us members. Already this sense of a corporate ideal has made a great difference to our thoughts about the Church and the Sacraments, and has begun to work a change in our beliefs as to the importance of unity and the possibilities of spiritual power. And now it looks as if we are being called to a yet farther enlargement of our conceptions and hopes. To-day we are bidden to add to our knowledge in another direction. This time it is the Corporal aspect of the Christian message which is coming into view. We are to learn that our religion is not only for us all as a whole, but that it has to do with the whole of each of us. In other words it is good for the body as well as for the soul. In some degree, no doubt, we have been accustomed to admit
that the fact of the Incarnation is a witness to the dignity of our bodies, and a pledge of their ultimate glorification; but the admission has too often lacked the full force of a living conviction. At the present moment, however, many influences are combining in a remarkable way to send us ‘back to Christ’ with quite a new willingness to believe that He meant His Church to stand in the forefront of all endeavours to bless men’s bodies as well as to save their souls. Some day the world may be filled with astonishment when it sees the fuller life of Christian fellowship brought to bear upon the social and physical problems that are waiting all around us for the power that can successfully deal with them.

Now, plainly such lines of thought must sooner or later converge upon the Eucharist. We may confidently assert that if the fuller life, corporate or corporal, is to be realised and manifested by us, it will be through a more faithful and more intelligent use of the great means which our Lord has provided for establishing a vital inter-communion between Himself and His members.

Let us, then, approach the consideration of the mystery patiently, and make a serious effort to grasp what we can of its meaning in right perspective and due proportion. To
this end it will be best to set before our minds a clear statement of the aims and objects of the highest of all Christian services.

Briefly, we may say that the Eucharist is designed to fulfil a threefold purpose for us. In the first place, it is a sign of profession. Sacraments are 'not only badges or tokens of Christian men's profession' (Art. xxv.); but this they most certainly are. Again and again our Lord laid stress upon the duty and necessity of an open acknowledgment of discipleship. From the earliest times the Sacrament of His Body and Blood has been regarded as the oath and pledge of a Christian's loyalty. We may be sure that Christ meant it to be this. Perhaps it is not altogether without significance that while the ancient allegory of the Old Testament had made the test of obedience, 'Thou shalt not eat'; in the sacred symbolism of the New Covenant it became, 'Do this,' 'Take eat.' Through the Eucharist we declare our readiness to be known as members of the Christian fellowship, and our determination to be the true followers of Christ. That is its first and simplest and most obvious signification.

Then further the Eucharist is an act of worship. It has a Godward aspect, as well
as a bearing towards the Church and the world. The original institution had for its background the slaying of the lambs and the pouring out of the blood of the Passover sacrifices. This, said our Lord, is My way of celebrating the redemption, not merely of a nation, but of a world. 'This is My Blood of the Covenant, which is shed for many.' And accordingly whenever we solemnly repeat His words and His acts, we do it in a Consecration Prayer addressed not to man but to God. It has been thus that from the beginning the Church has made the 'perpetual memory,' setting forth the finished sacrifice of the Cross as the one and only ground and hope of man's salvation. It is thus that we draw nigh by the 'new and living way which He has prepared for us' until we find ourselves amid all the company of heaven, nay more, suppliants before the very throne of God, humbly but confidently asking for the grace to help us in our earthly need. The prayer is freely granted. The very offerings we present are blessed and returned for our enrichment.

And so, finally, the Eucharist is a means of grace. The Altar becomes a Table, and the Sacrifice ends in a Feast. We are bidden, not only to 'do this,' but to 'eat' and 'drink' the Body and Blood. Here it is that we reach
the most mysterious aspect of all. Christ died and rose again for us that we might live by Him. In this holiest fellowship He fulfils His promise to be with us; in this highest worship we are made partakers of His very self. How the blessing is bestowed we are unable to explain. The explanations that have been attempted are not really explanations, for they are not themselves intelligible. But we can do better than explain. We can accept the fact, and look to prove it in experience. That is the way of our English Church teaching. 'The benefit is great,' we are assured, 'if with a true penitent heart and lively faith we receive this Holy Sacrament, for then we spiritually eat the Flesh of Christ and drink His Blood.' 'The Body and Blood of Christ are verily and indeed'—not merely metaphorically and symbolically—'taken and received by the faithful.' So it has been believed since the foundation of the Church. 'The doctrine of the reality of the gift bestowed in the Holy Communion is universal in the writings of the early Christians.'\(^1\) And so it will be to the end, when the holy feast is to be royally 'fulfilled in the kingdom of God.'\(^2\)

It is in connexion with this third aspect

\(^1\) Archbishop Temple, Primary Charge.

\(^2\) St. Luke xxii. 16.
of the Eucharist that we are to attempt some further inquiry. Granted that 'the benefit is great,' of what does it consist? When we meet together in the gladness of loyal fellowship to 'lift up our hearts' through the worship which unites us to the Great High Priest within the veil; when we receive, as from His hands, the more than tokens of our participation in His present life and coming triumph; when after meekly kneeling for the benediction of the heavenly peace, we rise and go our way—what thoughts may we dare to cherish with regard to the blessing that has been granted to us?

Shall we answer that the gain must be of a spiritual character, that what we have received is 'the strengthening and refreshing of our souls,' that this is what is intended when the Eucharist is spoken of as a 'means of grace'? Assuredly we shall be right to answer thus. We cannot insist upon it too strongly, or claim it too confidently. We may not feel at the moment that we are stronger and more able for our life and duty; but then we do not always feel the benefit of physical food and medicine the moment they have been taken. The gain may not appear for hours or even days, when perhaps we have ceased to think of the source from which it came.
Strangely enough, too, the immediate effect of a medicine may be to bring out the mischief, and to make us imagine that we are the worse for it rather than the better; and, as we know, there have been times when it has almost seemed as if we had become more distressingly conscious of our faults and failings as a result of our Communion. In spite of it all, faith takes and gives humble thanks for the blessing which has been received.

But, when we say that the blessing is of a spiritual nature, does that mean that its effects are therefore limited to the spiritual sphere? Can we think that they could be so limited? Is not the spiritual the dominant factor in all our life, and must not the quickening and gladdening of our spirits be felt, sooner or later, through every department of our being?

Is it not true that the mind is profoundly influenced by the state of the spirit; that, when the soul is at peace and in harmony with God's will, light shines as it were from within upon the hardest and most perplexing problems around us? The good and wise Bishop Harold Browne once declared at a Church Congress that he had never known what it was to have intellectual doubts when present at the Holy Communion. So, too,
one of the most brilliant of our living teachers, speaking of what he owed to the school chapel at Eton, has said, 'There I mercifully gained the habit of constant Communion; and this habit was the one permanent stronghold of my faith when in after years at Oxford the violent storms of intellectual trouble broke over my mind.'

If the mind may be helped through blessing received by the spirit, why not the body also? We are realising more and more forcibly every year how intimate is the connexion between mental action and the physical organism. The two are so linked that every change in the one would seem to be accompanied by a change in the other. Moreover, we are assured by recent psychology that there are regions within us which lie outside—above and below—the levels of our ordinary consciousness; and that influences exerted in these regions are determining causes, not merely of mental, but of bodily states. The close connexion between the spiritual and the physical is clearly insisted upon in the New Testament teaching. Our Lord showed plainly that the problem of bodily disease was not to be treated apart from the more baffling needs of the soul. In unhesitating terms He traced the miseries of

1 Canon Scott Holland, Commonwealth, March 1908.
morbid physical conditions to moral wrongdoing and the presence of spiritual forces of evil. The great word 'Salvation' strictly interpreted meant health; and it was applied to both body and soul. It is no small part of Christ's redemption to 'quicken your mortal bodies through His Spirit that dwelleth in you.'

The fact that the body has its appointed part and share in the Holy Communion is in itself significant of the honour to be paid to it, and might be taken to imply that it too is to be partaker of the benefit. And when St. Paul declares that to receive 'unworthily' is to be in danger of bodily sickness and even of death, we can scarcely avoid the inference that for the worthy recipient there might be expected some corresponding advantage of quickened health and physical vitality.

If we ask what the thoughts of early Christianity were in regard to this matter, we need remain in no uncertainty as to the reply. Recent discovery of documents and the critical study of the primitive liturgies have given us a great deal of knowledge as to the religious conceptions of those who met for Christian worship in the centuries after the Apostles.

1 Romans viii. 2. 2 1 Cor. xi. 30,
At first it was with reluctance that they committed their most sacred formularies to writing. Even as late as the time of Athanasius the precise nature of the liturgy was kept as a secret, to be revealed only to those who would be certain to regard it with reverence and understanding. 'It is not permitted,' he wrote, 'to describe the mysteries to those who are not initiated.'¹ Not until this discipline of secrecy was gradually abandoned, as Christianity came to be accepted throughout the empire, were the actual forms of service allowed to become public property. From these we are able to gather much as to the place which the Eucharist held in the life of the Church, and as to the hopes that were centred in it. These hopes, without question, were primarily of a spiritual sort. Intercession was offered with a fulness and intensity which witness to a wonderful power of sustained devotion and a boundless range of sympathy. There were many and various prayers for the peace and perfecting of the Church and the enlightenment of the world, for the spread of true knowledge, for the sanctification of all estates of believers, and above all, and most of all, for the exaltation and glory of God in earth as in heaven. But no one can so much

¹ Apol. contra Arianos, ii.
as glance over these liturgies without being strongly impressed by the fact that those who framed them and used them had no notion of drawing any sharp line of distinction between the spiritual and the material, between the blessing of the soul and the good to be desired for the body. If they made intercession for the Church that it might be 'kept sheltered from storms' and be 'preserved founded upon the rock until the consummation of the world,' and were careful to remember the higher needs of all classes of Christian people, they were quick to add, 'Let us pray for our brethren exercised by sickness, that the Lord may deliver them from every disease and from every infirmity, and may restore them whole to His Holy Church.'

In the prayer of Consecration they would ask that the Bread and the Wine might be made to all who received them a means of 'faith, and watchfulness, and healing, and sober-mindedness, and sanctification, and renovation of soul and body and spirit.' When they had partaken of the elements they implored that these might 'not be unto condemnation but to salvation, for the benefit of soul and body.'

Just ten years ago a very important

---

1 Clementine Liturgy.  
2 Liturgy of St. Mark.  
3 Clementine Liturgy.
THE EUCHARIST

addition was made to our store of early liturgical documents by the publication of the Sacramentary of Bishop Serapion, which dates from 350 A.D. The work consists of thirty prayers such as a bishop would be likely to use.\(^1\) Of these the first six and the last twelve have to do with the celebration of the Eucharist; the remainder relate to Baptism, Confirmation, Ordination, and Burial.

'Life is a remarkable note of the collection,' and it is life in the fullest sense of the word. A few quotations will indicate this, and will serve to strengthen the impression we have already sought to convey as to the content of the blessing to be expected in the Eucharist. In the opening Offertory prayer we find the words, 'We beseech Thee, make us living men.' At the invocation of the Word upon the elements, 'Make all who communicate to receive a medicine of life for the healing of any sickness.' In 'the prayer for those who have suffered,' 'Grant health and soundness, and cheerfulness and all advancement of soul and body.' And in the final Benedic-
tion, 'Let the communion of the Body and

\(^1\) A translation, with notes, has been edited by the Bishop of Salisbury in a small volume issued by the S.P.C.K. (Early Church Classics). The Greek text will be found in an article by the Rev. F. E. Brightman, *Journal of Theological Studies*, October 1899.
Blood go with this people. Let their bodies be living bodies, and their souls be clean souls.' Provision is also made for special prayer for the sick, and for the blessings of oils and waters for their benefit, and in these connexions we find such expressions as the following: 'Be propitious, Master; assist and heal all that are sick. Rebuke the sicknesses.' 'Grant them to be counted worthy of health.' 'Make them to have perfect health of body and soul.' 'Grant healing power upon these creatures that every power and every evil spirit and every sickness may depart.'

It need scarcely be said that all such references to bodily wants are set in a context which is marked by the simplest and most ardent spiritual devotion. The physical is never allowed to usurp the first place. But it is never forgotten. The early Christians believed that the Life which was offered to them in fellowship with their Lord was to extend to every part of their constitution, to 'spirit and soul and body.'

1 These references to the Liturgies might be supplemented by quotations from the patristic writings, e.g. those of Irenaeus, Tertullian, Cyril of Jerusalem, and Gregory of Nyssa. The last named went so far as to make Baptism with faith to be the salvation of the soul, and the partaking of the Eucharist the salvation of the body. See Bishop Gore, The Body of Christ, p. 69; and Bethune Baker, Introduction to the History of Christian Doctrine, pp. 399, 412.
In the light of our increasing knowledge of psychological processes, we to-day are turning with new interest and sympathy to the old stories of marvellous healing that have come down to us from early and medieval times; and we are doing our best, by careful investigation and analysis, to separate the well-authenticated cases from those for which the evidence is not satisfactory. Already it is clear beyond reasonable doubt that the instances in which directly religious influences wrought extraordinary cures were far more numerous than have been generally admitted by critical students of the history. In Mr. Percy Dearmer's volume entitled 'Body and Soul' a large number of testimonies have been collected relating to such experiences at various times throughout the Christian centuries. Thus the passage from St. Augustine is quoted, in which he said that in his days miracles were still being wrought, 'partly by the sacraments,' and partly through other instrumentalities. And instances of such miracles are described as they were recorded of Bernard, and Francis, and Catherine of Siena; of Philip Neri, Fox, Wesley, Cardinal Hohenlohe, Pastor Blumhardt, Father John of Cronstadt, and many more. At least two cases are given in which the benefit was definitely
connected with the reception of Holy Communion.¹

It remains now to ask how far we English Church people have any guidance to which we can appeal in our liturgical forms. We have to admit that the well-being of the body does not receive the amount of consideration in our Prayer-book that it did receive in more primitive days. And yet the allusions are more frequent than many imagine. At the outset of Morning and Evening Prayer we are reminded that we have met 'to ask those things which are requisite and necessary as well for the body as the soul.' Over and over we repeat the clause in the Lord's Prayer—'Give us this day our daily bread.' In the Creed we joyfully attest our belief in the 'resurrection of the body.' In the Litany we pray to be delivered from 'plague and pestilence.' A special intercession is appointed for use 'in the time of common plague or sickness,' as well as the more general one for all who are 'any ways afflicted, or distressed, in

¹ pp. 370, 381. Compare also the witness of St. Thomas à Kempis in regard to the power of this Sacrament. 'The grace is sometimes so great that out of the fulness of devotion here given not the mind only but the weak body also feels great increase of strength bestowed on it' (vires sibi praestitas sentiat ampliores). De Imit. iv. 1.
mind, body, or estate,' with a particular remembrance of 'those for whom our prayers are desired.' In the Collects, which were intended primarily for use at the Eucharist, we find petitions for help in 'our infirmities,' for defence from 'all adversities which may happen to the body,' for preservation 'both in body and soul,' and for readiness of 'body' to do the Divine will. In the Office for Holy Communion we may be glad to note even clearer traces of the Scriptural and primitive conception as to the place which the physical part of our nature is entitled to hold in the religion of the Incarnation.

When we say the prayer for the whole Church, we humbly beseech God 'to comfort and succour all those who in this transitory life are in trouble, sorrow, need, sickness, or any other adversity.' In the Prayer of Humble Access there are petitions, first to be met with in the earliest form of the English service (1548), which sound like an echo from the already quoted Prayer-book of Serapion, 'that our sinful bodies may be made clean by His Body, and our souls washed through His most precious Blood.' Even more intentionally significant are the words of administration appointed to be addressed to every communicant, 'The Body of our Lord
Jesus Christ preserve thy body and soul unto everlasting life'; 'The Blood of our Lord Jesus Christ preserve thy body and soul unto everlasting life.' These references to the 'body' appear to have been deliberately introduced into our service. In the Latin form the celebrant had said, 'custodiat animam meam in vitam aeternam.' And as the body has its place of privilege, so also it has a share of the corresponding responsibility. In the Prayer of Oblation 'we offer and present our souls and bodies to be a reasonable, holy, and lively sacrifice.' Finally, among the Collects suggested to be said after the Offertory, and at other times 'as occasion shall serve,' the foremost place is given to two which are closely connected with the thought of bodily welfare. The first, 'Assist us mercifully, O Lord,' was a prayer used in medieval times for persons who had gone on a pilgrimage to seek physical as well as spiritual blessings; the second is for the sanctification and

1 It would seem that the fuller form, 'corpus et animum meam,' was used by the priest at his own communion in the Mozarabic rite; and that a similar form was prescribed in the Cologne use of the fourteenth century for communicating the people. (Daniel, Codex Liturgicus, i. pp. 105, 147.) Otherwise the rule was as stated above. It is interesting to note, however, that the words 'corpus et' were very generally employed in administering to the sick in medieval England (see the York Manual, Surtees, lxiii. pp. 51, 52).
governance of ‘both our hearts and bodies,’ that we may be ‘preserved in body and soul, through our Lord and Saviour Jesus Christ.’

So then, in our Prayer-book, as in the older service books, the benefit of the body is closely associated with the gain which is sought for the soul. The physical effect is regarded as dependent upon the spiritual gift. As the Bishop of Birmingham has put it, ‘though in the Holy Communion the body is sanctified through the sanctification of our spirit, and transformed and endowed, in subtle and secret ways which pass our comprehension, with capacity for the life immortal; yet it is through the spirit and not directly.’ The blessing begins with the spirit, but it certainly does not end there.

This sketch of a great subject, imperfect as it has been, may serve to turn the thoughts of some of us to an aspect of our religious privileges which has not been very much before our minds. A friend who had been spending a good deal of time on ‘cures’ on the continent as well as in this country, wrote to me lately to say that he was beginning to think that he ought to get more assistance

1 Body of Christ, p. 64,
towards recovery from his religion than he had been getting. That is an idea which accords with the temper of the first Christians, and is certainly encouraged by a careful study of our own Prayer-book. We dare not assert that all 'the ills that flesh is heir to' would disappear before a quickened vitality of soul, and the mental soundness which might follow from this; but we can well believe that the tendency of true religion is all in the direction of physical health. Indeed, we may go so far as to say that there is no restorative force that we know of to compare with the influence of spiritual peace and gladness. We have amongst us those who are fully conscious that they have owed much bodily strength to prayers and to sacraments. And there are medical men who would not hesitate to give their confirmatory testimony from what they have seen in their experiences of the sick.

Sometimes we hear of small attendance at the weekly or daily Eucharist. If this is to be remedied it will be because truer views have come to prevail again of the meaning of the greatest service of the Church. We shall recover the spiritual fervour and force of primitive Christianity when we learn once more to give the Eucharist its proper place in our worship and our life. We might be
helped to do this if, like the first Christians, we accustomed ourselves to look to our Communions not only for the blessing that they can bring to our souls, but for the lesser, and yet not less real, blessing which we may find in them for the sanctification and preservation of our bodies.
PRAYER AND MENTAL HEALING

BY

ARTHUR CHANDLER, D.D.

BISHOP OF BLOEMFONTEIN
This paper is concerned with Mental Healing; its object is to suggest, in a tentative way, how Mental Healing may be effected by Mental Prayer. But, in order to do this, it is necessary (at the risk of repeating what may have been written by others) to refer to certain premises leading up to the conclusion which I wish to draw.

(1) In the first place it is coming to be recognised that 'consciousness' must be understood in a far wider and more general sense than we have been accustomed to associate with it. Alongside of the active work of the intellect with which, e.g., we study mathematics or pursue our profession, there is a large, dreamy, half-conscious tract of mind, not sharpened to a single point, like the active intellect, but consisting in a multiplicity of mind-centres (mental ganglia, as we might call them) diffused throughout the body. We knew before that our body was a microcosm or an epitome of the world in which it was
found, and now we are learning that the same is true of our minds. Primitive kinds of consciousness have been carried up with us in our ascent from lower grades of being, and survive, dormant but real, over against the intellect which is the palmary achievement of our race. This residual consciousness (the consciousness which exists outside of the rational intellect) consists largely of instincts and capacities which regulate the lives of other animals, and which were employed by man in his primitive state, but for which he has no use in his present-day existence; modes of receptivity and reaction, which were natural to him in his dreamy childhood, but which are discarded by him in the aggressive, self-assertive, wide-awake condition in which he now lives. Mr. Myers, in his 'Human Personality,' gives a very attractive and convincing account of this inheritance from our 'lowly ancestors.' But probably we have to go deeper still to account for parts of the consciousness which we thus inherit. The rooted attachment to home, and the blind tenacity with which, in the teeth of reason, men cling to life, exhibit a more primitive mode of consciousness than that of animal life. Here we will quote some very suggestive words of Professor Stewart:
'Transcendental feeling I would explain genetically as an effect produced within consciousness by the persistence in us of that primeval condition from which we are sprung, when life was still as sound asleep as death, and there was no time yet. That we should fall for a while, now and then, from our waking, time-marking life, into the timeless slumber of this primeval life is easy to understand; for the principle solely operative in that primeval life is indeed the fundamental principle of our nature, being that "vegetative part of the soul" which made from the first, and still silently makes, the assumption on which our rational life of conduct and science rests—the assumption that life is worth living. When to the "vegetative" the "sensitive" soul is first added, the Imperative (Live thy Life) is obeyed by creatures which, experiencing only isolated feelings, and retaining no traces of them in memory, still live a timeless life, without sense of past or future, and consequently without sense of selfhood. Then, with memory, there comes, in the higher animals, some dim sense of a self dating back and prospecting forward. Time begins to be.'

This, then, is our starting point; that besides the single, supreme, rational activity, which we call intellect, there exist in us other
forms of consciousness similar to those which accompany the growth of the plant or the life of the animal; and that this residual consciousness, however much we may discard or disown it, continues to live and work, and does things which the proud intellect is unable to do. On the other hand, we must not forget that these forms of feeling and instinct, of perception and reaction, which we regard as our heritage from lower grades of life, are enormously modified by their juxtaposition with a rational intellect. The unity of nature which comprehends both the intellect and them, makes itself felt; this lower form of mentality is still the mentality of a rational being; and the general position may be described by saying that there exists a decentralised consciousness, diffused through the organism, ‘irrational, but capable of sharing in reason, and of listening to it,’ as Aristotle would say, and manifesting itself in a power of receiving impressions, manipulating them, and reacting upon them, which in our present state of ignorance we describe by the convenient word ‘abnormal.’

(2) Because the residual consciousness is thus diffused throughout the body, it can exercise control over the various parts of the body, just as the central intellect exercises control over the body as a whole. As the
reason can set the body in motion by commands issued through the brain and travelling down the motor nerves, so the departmental consciousness can initiate changes and disturbances in the various nerve centres with which it is associated. This, we take it, is what happens in all cases of mental healing. The phenomenon is physical as well as psychical; it consists not merely in the inhibition of the feeling of pain, but in such a modification of the nerve tissues as removes the cause of the pain. A real cure is effected, and it is effected by the action of the residual consciousness upon that particular part of the organism.

(3) This decentralised, residual consciousness can work best when the rational intellect is quiescent—when, we may say, the central office is closed. At such times man ceases for the time to be an argumentative, striving creature; the placid, vegetative, ruminative life, the life of growth and instinct, asserts itself; submerged modes of consciousness begin to stir and act, like fairies dancing when the sun has set.

And as sleep is the typically quiescent state, it will be specially in sleep, natural or induced, that these lower modes of consciousness will exhibit their activity.

(4) In order that they may act, a 'cue' or suggestion of some sort must be given to
them. The most marked characteristic of this residual consciousness is its receptivity. It executes, but cannot originate. It can retain in the memory the whole of a long poem which it has heard, and it can solve a problem by right adjustment of its elements; but in each case the facts must be given to it in order that it may deal with them. In itself it is dreamy and desultory; if it is to work efficiently, it must be stimulated and concentrated by the transmission to it of a clear and forcible suggestion.

(5) On the other hand, although it must take its orders from the reason, it is only natural that one residual consciousness should be more en rapport, feel more at home, with another residual consciousness. The reason is like a parent or schoolmaster, and these consciousnesses are like children. They receive their directions from above, but are far more at home with each other, canvassing their instructions, and sometimes parodying and making fun of them, as children do with the admonitions of their elders. In matter of fact there is often something freakish and elfish about this consciousness, it reminds one of the submerged spirit of Dionysus reasserting itself in Denys l’Auxerrois as described by Mr. Pater.
(6) Now, if one residual consciousness can be brought into a relationship of definite and serious purpose with another residual consciousness, the influence thus exerted will be stronger than any which can be exerted directly by the reason itself. To revert to our former illustrations, a monitor whose own character is receptive of the master's ideals can exert on other children an influence greater than that of the master himself.

(7) The reason of man, then, may be well able to convey clear instructions to his own residual consciousness, and send it to associate with, and work upon, some other residual consciousness. And if the instructions conveyed, and the work done, concern the curing of some ailment, a case of mental healing will be the result.

Let A be the healer and B the patient; let $a$ and $b$ represent the residual consciousness of each of them; further, let $A^1$ be the rational intellect of A, and $B^2$ the seat of B's disease. In that case the following diagram will illustrate the process:

```
A  ↓  B
 \  ↓   ↑
 A^1 ↓ B^2
  ↓ a------------b
```

T 2
That is, A concentrates his intellect (A¹) on transmitting a message to his own submerged consciousness (a); this submerged consciousness works upon B’s submerged consciousness and stimulates it to curative action on the seat of B’s disease. Further, the best time for a to thus work upon b will be when A and B are both asleep. A will have concentrated the reason on the idea of helping B just before going to sleep. Mr. Hudson, in his ‘Psychic Phenomena,’ gives many illustrations of cures thus effected.

(8) But the capacity of A to exert a strong and right influence must depend on the strength of his will and the clearness of his insight; and if he is a humble man, he will recognise his own weakness and ignorance. In proportion, then, to his affection for B, he wants to bring to bear on B a stronger force and a higher wisdom than his own. A few exceptionally strong and wise people may bring help, of themselves, to their friends in the manner described in the last section; but the majority, being conscious of their own limitations, will turn elsewhere for succour, i.e. will pray.

(9) In very many cases prayer is a definite petition to God, that God will Himself act directly on our friend by bestowing a definite
blessing on him, e.g. recovery from a specific ailment. But that is not quite the highest or the best kind of prayer. God loves to act through us; Christ sends out his disciples, that through them He may continue to do His gracious works. We can combine a humble reliance on God with the offer of ourselves as His instruments, if our prayer conforms to that Prayer of Quiet or Silence of which mystical writers tell us. Then, instead of ourselves acting directly on our friend, and instead of asking God to act directly upon him, we shall just concentrate our attention upon God with special intention for our friend. We shall hope that a Divine response from God will, during our sleep perhaps, enter our own subconscious self (which we have, through the concentration of our attention, made receptive of such responses) and through us work upon that of our friend. In such a case the diagram will be as follows:

We may add that this Prayer of Silence not only renders us receptive of Divine influences, which may then through us be transmitted to
our friend; also it embodies the true attitude of humility in relation to God. We know not what we should pray for as we ought. We are not to dictate to God what blessing He is to send. We simply bring our friend's evil case before Him in the very act of our own loving concentration upon Him, and offer ourselves as the agents for the transmission of that blessing, whatever it may be, which He in His wisdom may will to send. By a strong act of sympathy we identify ourselves with our friend, and trust God to provide the right remedy. 'Have mercy upon me,' said the woman in the Gospel, 'my daughter is grievously vexed with a devil.'

If we can combine this living sympathy for our friend with a humble trust in God's power and wisdom, and further offer ourselves as the instrument through which God may act, we shall be practising the highest and purest form of intercession within our reach. And this form of intercession may be offered in a silent act of Contemplation, in which distracting thoughts are set aside, the favourable attitude of receptivity is attained, and a loving and concentrated appeal is made to the love of God. It may, perhaps, encourage us to engage in this highest form of prayer, if we recognise that it has this intercessory side.
An objection is sometimes brought against the practice of Contemplation as described by spiritual writers, on the ground that it is self-centred and selfish. There is never much force in such an objection, since the contemplative who is concentrating his soul on God is thereby making himself a ladder down which Angels of Grace descend on others as well as himself; he is diffusing an atmosphere of God’s presence, with the blessings that flow from it.

When, however, Contemplation is practised with definite intercessory intention, its beneficence is clearly and unmistakably emphasised.

(10) It is well to dwell a little more on the quality of humility which should characterise all such prayers. We have no right to dictate to God what His answer shall be. We have no right to assume that it must be His will to remove all pain and suffering. Any such assumption leads logically to conclusions which those who make it might not be prepared to accept. If pain and suffering are contrary to God’s will, and God is omnipotent, it follows that there can be no such thing as pain and suffering; and as pain and suffering are located in the body, it will further be concluded that there is no such thing as a body; and here at once we have Christian Science in a nutshell.
We may try to escape from this conclusion by distinguishing an absolute and a contingent will of God, and arguing that pain, as such, is contrary, but under certain circumstances is not contrary, to the will of God. But this really abandons the whole position, since we do not know whether the case of our friend is covered by the ‘certain circumstances’ or not, and therefore are unable to dogmatise as to God’s will in the matter. No one in his senses imagines that God wills pain for the sake of pain. Everyone would agree that, if sin had not come into the world, there would be no occasion for pain. But then sin has come into the world; the only condition of man with which we are acquainted is his fallen condition; in that fallen condition sin and suffering are mingled inextricably to a degree which utterly condemns dictation or dogmatism on our part. Ignorant people like ourselves must, then, be humble in our prayers. We bring our friend’s illness before God; ‘Lord, he whom Thou lovest is sick’; often God’s love may be shown in the removal of the suffering; sometimes in the provision of grace sufficient to enable the sufferer to rejoice in his infirmities.

(11) What has been said in this paper is liable to an easy and obvious criticism. It
will be said that the whole thing consists of guesses; and further, that these guesses are incapable of scientific verification. I cheerfully accept both statements, and am not particularly affected by either. All increase of knowledge has been made through guesses, and in the case of an intricate subject like that before us, we must be content to go on guessing for a long time. Further, there may be verification which would not conform to the more rigorous methods, but which would be sufficient for practical purposes. If we find that such prayer as I have described is followed by relief, either physical or spiritual, to him for whom we pray; and if this sequence occurs again and again under different conditions, the cumulative weight of such experience will justify a humble belief that God is indeed using us as vehicles of His grace and love.

(12) Finally, I should like to add a few words as to the general attitude which, it seems to me, we should adopt with regard to facts of mental healing. I have assumed that we are face to face with certain psychical facts which for the first time are winning general recognition of their authenticity. That is, we are witnessing the birth and development of a special branch of psychology. The
whole inquiry into the phenomena of the subconscious, or subliminal, or subjective, or residual consciousness (whatever we choose to call it) is a psychological inquiry. It is for the psychologist to investigate the relation in which such phenomena stand to the normal working of the mind; and it is for the psychologist and physiologist together to probe the method by which subconscious mentality affects the diseased tissue, and in many cases effects a cure. The facts are becoming patent to all; the causes are a subject matter for science. Where, then, does religion come in? I answer that whilst the forces at work are psychical, and the inquiry into their mode of operation is scientific, they can be best put in motion by religion.

Some such demarcation of spheres seems to me to be essential. It would be fatal to assume that all manifestation of subconscious activity is supernatural; that all mental healing is necessarily spiritual healing. The facts postulate neither a special spiritual gift, nor a special theory of the universe (such as that of Christian Science) to account for them. They are, we repeat, psychical facts, and come under the domain of psychology.

Further, as I have suggested above, religion is not the only motive power by
which they can be roused to action. A rigorous process of attention and concentration of the mind, which has been rendered quiescent by the elimination of other thoughts and ideas, seems to be the condition under which the healer acts successfully; and such a process is not confined to the sphere of religion.

But, on the other hand, we Christians possess two great qualifications in this matter. First, in the higher forms of prayer we have ready to our hand a peculiarly effective method of concentration and attention; and, secondly, through the use of this method, we can link our own action with the action of God, correcting our ignorance by the wisdom of God, and supplementing our weakness by the power of God.

Note.—In this article I have dealt with healing as exercised on the ills of another, not on one's own ills; and the prayer associated with such healing has therefore been presented as intercessory prayer. But of course the troubles which we have in view may be our own. In such a case the method will be much the same as that sketched above; relief may be effected subconsciously through the medium of prayer. But the procedure is now much
simpler. Instead of sending out our subcon-
ssciousness (the phraseology is necessarily
materialistic and fearfully inadequate) to work
on that of another, we merely commission it
to work on the seat of our own malady. The
method now becomes one of auto-suggestion,
i.e. the healing suggestion is made by us to our-
selves. We know the power of this process in
the moral sphere; we know how, by fixing our
minds on lofty and ennobling ideas, we can
break the power of temptation, not by a frontal
attack, but by getting round it and above it to
a higher level of life and thought. This, in
fact, is the main purpose and effect of medita-
tion as ordinarily practised. The scope of
meditations only have to be slightly extended
in order to apply to our physical as well as our
moral troubles. But, although this method of
healing becomes simpler in procedure, because
applied to ourselves, yet for the same success
it demands still greater humility and purity
of intention. If, when we pray for others, it
is hard for us to believe that the prayer may be
really and effectually answered in other ways
than by the removal of the physical suffering,
it is still harder for us to recognise this in our
own case. To meet this difficulty, it will be
well that prayer for our own relief should be
as much as possible silent prayer. We shall
concentrate our attention on God's love and power, as revealed in Christ, just spread out our trouble before Him, and resolve to trust Him to the uttermost. The suggestion thus conveyed to our own subconscious life will be charged with God's grace; if physical healing results, the restored health will be transformed by dedication to God's service; if the relief takes the form of strength to endure, it will be none the less relief, lifting us above the level of self-pity into tranquil communion with Christ crucified, and may be none the less an instrument in God's hands for the doing of His blessed will.
THE METAPHYSICS OF CHRISTIAN SCIENCE

BY

M. CARTA STURGE
THE METAPHYSICS OF CHRISTIAN SCIENCE

By M. Carta Sturge

In attempting to criticise the Metaphysics of Christian Science, as put forth in the book which claims to be the authority for its doctrine, 'Science and Health, with Key to the Scriptures,' one is tempted to quote the famous chapter on 'Snakes in Iceland,' which runs 'There are no snakes in Iceland,' and to say at the outset that Christian Science has no Metaphysics. Since, however, it claims to explain the Universe, and to give a theory of such metaphysical subjects as Matter and Spirit, as well as of Unity and Reality, it may be well to examine its statements on these abstruse matters to see if they can justly claim to have value as Metaphysics, to search the island, as it were, before pronouncing that there are no snakes in it.

Undoubtedly Christian Science owes a good deal of its attractiveness to its teaching of
a sort of popular Idealism. It was put forth at a time when a great wave of Materialism had overspread the Christian world, not owing only to discoveries in Natural Science, which seemed in the first flush of their triumph, before they had been adjusted with other fields of thought, to destroy all belief in Spirit, but owing also to the fact that Religion had been for so long established and, apparently, firmly seated upon a secure spiritual foundation, that it had been loosely taught as to its fundamental basis. So little had its relation with physical things been explained that the spiritual and physical aspects of the Universe had become, as it were, separated in thought and shut up respectively in watertight compartments. The result was that in the popular mind the two worlds, the spiritual and the physical, stood in a merely artificial relation with each other, connected, as it were, by unmeaning hooks, instead of standing in an intimate organic relation, so close that no true statement regarding the one could possibly stand in collision with the truth of the other.

In consequence of this merely artificial relation of the two in the popular mind, at the first breath of the new scientific announcements the two worlds in the minds of only
too many fell apart, and the spiritual world floated away, if one may say so, to nowhere, whilst the physical, with all its limitations, its ruthless laws, its indifference to the individual, its total disregard of pain, and its insurmountable barriers, reigned alone. Materialism had triumphed with its apparently hard-and-fast solidity; whilst the ideals of Poetry, the truths hinted at by Art, the revelations of the prophet, the dreams of the young and the visions of the old, and our intuitions of unseen realities which cannot be uttered, were consigned by many, supposed to be wise, to the region of illusions, the realm of nothingness, and Man seemed indeed to be nothing more than a creature helplessly subject to circumstance, the sport of every wind, and entirely beyond the region of hope wherever physical aid failed.

It was in the midst of a state of things something like this that Christian Science came with its contrary announcement that all is Spirit, and this given forth with the energy and freshness which always accompanies the discovery of a new aspect of truth, or, as in this instance, the rediscovery of a world-old truth which had been for a time despised or forgotten. And with it came a message of hope, the assurance that we are not the creatures of mere circumstance, that we are
not limited to physical life, nor altogether tied down by its limitations, that things are not as hard and fast as they seem, and that in the power of Spirit we can throw down many a barrier and rise above circumstances. Most welcome teaching, and yet to those of us accustomed to singing, on the third evening of the month, 'With the help of my God I shall leap over the wall,' it seems strange that it should appear quite so new! However, as before said, Materialism had darkened much of this old truth and somewhat blinded our eyes. Whether, therefore, it seems new or old to us, we can only welcome a powerful re-assertion of Idealism, of the supremacy of Spirit, provided it come with good credentials, and be so stated as to appeal to the best and sanest part of ourselves, and with the breadth and depth of treatment that so wonderful a truth calls for. Unfortunately, it is here that Christian Science fails us. It is a cheap, too much ready-made Idealism that is put before us, and one that rather appeals to our less sane moments than to our more brilliantly illuminated ones.

Idealism, by reason of its very greatness, by its perception of things that lie outside our senses, by its apprehension of infinities far beyond our grasp, has many and great
difficulties to encounter as soon as, leaving the inspired region of Poetry, and of prophetic vision, it tries to present itself as rational to our intellect, and as conformable with our knowledge of physical things. Had the foundress of Christian Science confined herself to the uninquiring assertions of Seership, and left the explanation of Spiritual truths (of which no one can deny that she caught some luminous glimpses) to minds equipped with the necessary knowledge and training, Christian Science would have been shorn of much of its incoherence and false teaching, and perhaps have proved itself a real ally to Christianity.

But the foundress was not content with the rôle of giving forth such insight as she may have had as a Seer. She tries to explain it, and the consequence is such a tangle of incoherent, inconsistent, confused statements, contradictory to each other, as has, perhaps, never seriously been given to the world before. And where, occasionally, the statements, at least as to their wording, are clear and unmistakable in their meaning, so far from clearing away the difficulties of Idealism, they add much to the obscurity, and leave the subject in a position likely to act in the long run in favour of Materialism rather than in the direction intended.
We will take an instance. Mrs. Eddy lays great stress on the Oneness of the Universe. Here we shall few of us quarrel with her, for Unity is the root-idea of Thought, whether scientific or philosophic, or even that of mere common-sense, since it is only by Unity that one thing can be seen in relation to another. The Unity is, however, difficult of apprehension, since it is essentially an idea—although none the less real for that—being, from the physical point of view, never seen or apprehended as a material thing. Therefore it is non-material, something spiritual or mental to be realised by insight other than that of the senses. Mrs. Eddy has this insight, and has it very strongly.

Idealism, however, is no sooner arrived at than it presents us with a very hard knot to untie, and it is here that we shall see how far Mrs. Eddy can give us any adequate metaphysical solution.

She realises, like much greater thinkers, how hard it is to understand how our material world can be contained in a spiritual idea, and that Matter and Mind are of difficult reconciliation, although, if we grant they both exist, they are so obviously related that they must be reconcilable within a Unity somehow. This reconciliation has cost much thought for thousands of years on the part of the deepest
thinkers, but the easy way of solving the difficulty in the case of shallow thinkers is to do it by throwing one or other of the members in this pair of opposites away, to deny it existence, and so to attain a cheap conception of unity by pronouncing either matter or mind to be a mere illusion. The Materialist tries cancelling Mind. Mrs. Eddy throws out Matter and with it our entire physical world, not only the objects in it, but all mental conceptions in regard to it, such as the Laws of Nature, and all possible theories as to its being a manifestation of Mind. All our conceptions of its laws are errors conceived by the intellect, she teaches,\(^1\) which is itself non-existent. In fact, the world only is because we falsely think it is. We have only to unthink it, and it will disappear. Spirit is One, and therefore the many objects of the world cannot be included in it; and only Spirit is real, therefore the material world cannot be real. Such is her argument, and she cannot allow that Matter may be a manifestation of Mind or created by Mind, or have any relation with it of whatever sort. 'Spirit and Matter no more commingle,' she says, 'than light or darkness,' and she asserts

\(^1\) For proofs of my assertions regarding the teachings of Science and Health, I must refer the reader to my book The Truth and Error of Christian Science.
that 'Science reveals nothing in Spirit out of which to create Matter.'

We have here attained, if we have attained it, Oneness at the expense of the Many. It is One simply by means of containing nothing, and, in place of the inspiring conception of the true thinker of the Unity as One because it includes the Many harmoniously related within itself—a Unity of infinite richness and fecundity—we have a dead, empty One, mis-named Unity because there is nothing to unite. The worship of such a Oneness, it has well been said, would be the worship of the None. Such an One would be all-exclusive instead of all-inclusive, and be gained by the annihilation of everything, instead of by the inclusion of all within Itself as the vital expression of Itself.

In yet another way Mrs. Eddy's statements concerning Unity contradict themselves. We have seen that in her conception of Unity the whole world, as we know it, has to be evaporated, as it were, into nothingness, and it has been roundly denied that Spirit had anything to do with its creation. Yet the world has to be accounted for, and in the sequel we find that, according to 'Science and Health,' it has been created—but by whom or what?

It has been created by the mind of Man, by his thinking power, but not, as we shall find if
we read the book carefully, by that part of man's mind that is real, but by that part of it which is constantly asserted to be unreal, to be, in fact, as much nothing as the world itself is nothing. This part of Man, which is over and over again affirmed to be nothing, is the Mortal Mind, and is endowed with the most tremendous creative powers; for by its thought, its false thought, which is again nothing, it has created for itself a world of objects, and objects connected with each other, not in a state of chaos, as one would expect in a world created by false thought, but objects connected with each other in a marvellously ordered sequence, obeying exact laws with the utmost obedience—laws so elaborate and complex in their results that it has taken Man ages to understand them even a little (although in Mrs. Eddy's view his own creation), and yet, in their ordered complexity, so simple that they are reducible to a few heads. Such is the wonderful world created by the Mortal Mind, and with which God, as All-in-All, has nothing to do! Thus we have two Creators, two unrelated worlds, and we are landed in a Duality which is absolutely opposed to, and inconsistent with, the Oneness on which Mrs. Eddy lays so much emphasis, and which consequently disappears.
All the rest of Mrs. Eddy's so-called metaphysical ideas, her teaching on Reality, on the nature of Man, on what constitutes truth and what error, and so on, are equally contradictory, and we are driven to the conclusion that such a hopeless confusion of contradictions is scarcely worthy of the name of Metaphysics or of serious discussion.

We welcome, as we have said, so emphatic an announcement of Idealism, and of the truth of the supremacy of Spirit, but must deeply regret that the Idealism is of so poor and thin a character, and the idea of Spirit and of the Eternal Unity so deplorably impoverished. For, indeed, thus presented, they could not long hold their own, and would soon give place again to the darkness of Materialism.

However, rather than criticise, let us welcome the recall to Idealism, to the recognition of Spirit as the supreme reality in which all physical laws find their truth, and, by a careful study and meditation upon the length and breadth and depth of these great ideas, as set forth in Christianity and all that led up to it, endeavour to do our little part towards a better understanding of these things, and thus in practice we shall indeed find that many a seeming solid barrier can be overleapt, the crooked made straight and rough places plain.
RELIGION AND MEDICINE.

By SAMUEL McCOMB, M.A. (Oxon.), D.D. (Glasgow), ELWOOD WORCESTER, D.D., Ph.D., and ISIDOR H. CORIAT, M.D.


Crown 8vo. 6s. net.

This book sets forth in clear and non-technical language the principles, and the methods by which these principles have been applied, that underlie the notable experiment in practical Christianity known as the Emmanuel Movement. The fundamental conception of the work is that a great number of disorders, half nervous and half moral, which are widely prevalent in American and English society, can be alleviated and cured by means which are psychological and religious. The book illustrates how an alliance between the highest neurological science of our time and the Christian religion in its primitive and simplest form, as modern Biblical scholarship has disclosed it, may become a powerful weapon with which to attack the causes that lie behind the neurotic and hysterical temperament that characterises the life of to-day.

The work is written by two scholars trained in scientific theology, and a physician of high reputation as an expert in psychological medicine.

The Church Times says:—'Dr. McComb's lecture, reported in our columns last week, has been speedily followed by the appearance of a book, in which he and two of his colleagues give a complete account of the work of healing undertaken at Emmanuel Church, Boston. This seems to justify our suggestion that the limitations accepted were designed mainly with a view to the friendly co-operation of the medical profession. Another reason for limitation is neatly expressed:—

"In the treatment of functional nervous disorders, we make free use of moral and psychical agencies, but we do not believe in overtaxing these valuable aids by expecting the mind to attain results which can be effected more easily through physical instrumentalities."

'There speaks sanctified common sense, in exact agreement with the dictum of St. Thomas Aquinas that miracles are not to be multiplied praeter necessitatem. There is also a recognition of what is presumably true, that miraculous healing—for we prefer the old-fashioned term—is not an easy way of escape from doctors' bills, but a process far more difficult, and involving far more expenditure of mind and will, than the use of drugs or splints. When this is understood, some prejudices will disappear. Meanwhile, the three doctors—one of medicine and two of divinity—should have a respectful hearing for their record of work done.'
THE HEALING MINISTRY OF THE CHURCH.

By Rev. Samuel McComb, D.D.

Crown 8vo. 32 pp. sewed, 6d. net.

This little book is published under the direction of the Emmanuel Committee for Great Britain, and deals with the method and working of the Emmanuel Clinic when brought into contact with persons suffering from maladies which appear to be primarily mental, moral and spiritual, and only secondarily physical, but which, nevertheless, defy the utmost efforts to console or to relieve.

PSYCHIC HEALING:

An Account of the Work of the Church and Medical Union.

Crown 8vo. sewed, 6d. net.

No one will deny that psychic healing is a question of paramount interest at the present time. It is an everyday topic of conversation in the market place, the workshop, and in the schools. As a leader writer in one of the chief medical papers pointed out the other day, 'spiritual or mental healing is going on all around us.' That psychic medicine is daily becoming of more value to the community most people probably realise, but, if not properly controlled, it may lead to evils against which the public are entitled to be safeguarded.

This feeling prompted a small number of laymen to form themselves into a Committee, and this Committee formed the nucleus of the Society now known as the Church and Medical Union.

LEGENDS OF OUR LORD & THE HOLY FAMILY.

By Mrs. Arthur Bell.

With 32 Illustrations. Crown 8vo. price 6s. net.

The present volume from the pen of the well-known author of 'The Saints in Christian Art' is an attempt to weave into a consecutive narrative the more important of the many legends that have in the course of centuries gathered about the Gospel story, and reflect the natural yearning of believers in Christ to learn all that is possible concerning their Lord from those most closely associated with His life on earth. Founded on a great variety of sources, including the Apocryphal New Testament, the various MS. fragments of Gospels and Sayings of Christ that have from time to time been discovered, with the publications inspired by them, the book will, it is hoped, appeal alike to the serious student who delights in tracing tradition to its fountain-head and to the wider public able to recognise, without desire to analyse, the spiritual significance and poetic beauty of many of the quaint tales recited in it.
ARCHBISHOP TRENCH'S WORKS.

COPYRIGHT EDITION.

SONNETS AND ELEGIACS. With Portrait. Small pott 8vo. cloth, 1s. 6d. net; lambskin, 2s. net. (Dryden Library.)

Archbishop Trench's poems have been well known and well loved for nearly half a century, and this little volume—which includes his principal shorter poems—should still further increase their popularity and make an acceptable gift-book.

THE STUDY OF WORDS. Twenty-seventh Edition. Revised and Enlarged. By A. L. Mathew. 1s. 6d. net.

ENGLISH PAST AND PRESENT. Fifteenth Edition. Fcap. 8vo. 1s. 6d. net.

PROVERBS AND THEIR LESSONS. Eleventh Edition. Enlarged. Fcap. 8vo. 1s. 6d. net.


THE RESURRECTION NARRATIVES AND MODERN CRITICISM.

By THOMAS JAMES THORBURN, B.D., LL.D.

Demy 8vo. 6s. net.

In this work, which is mainly a critique of Professor Schmeidel's theory that the recorded appearances of Jesus after His Crucifixion and Death were merely subjective hallucinations on the part of the disciples and others, the writer endeavours to show that such a view is untenable from a psychological point of view, as well as inconsistent with the general tenor of the Narratives themselves.

In the Appendices he gives in addition the Extra-Canonical Versions of the Resurrection, together with a critical abstract of all the various theories which up to the present time have been proposed to explain that event, including the most recent form of the original mythical theory of Strauss.

The author hopes, and believes, that the work will be of especial use, not only to parish clergy and ministers, but also to intelligent laymen of all classes who wish to inform themselves regarding the developments of theological thought, and to be able to form some idea of the value to be attached to modern critical theories dealing with the Resurrection of Jesus.
THE DISCIPLES. By Mrs. HAMILTON KING. Thirteenth Edition. Elzevir 8vo. cloth, 6s.
Small crown 8vo. cloth, 5s.
Dryden Library Edition. Pott 8vo. cloth, 1s. 6d. net.
" " " " " velvet calf, 3s. net.

THE SERMON IN THE HOSPITAL (from 'The Disciples').
Fcap. 8vo. Leather, 2s. net. Cloth, 1s.
Miniature Edition, leather, 1s. net.
Cheap Edition, sewed, 3d.

WITHIN HOSPITAL WALLS. By Lady LINDSAY. Miniature Edition, leather, 1s. net.

KEMPIS, THOMAS À. The Imitation of Christ. Revised Translation. Elzevir 8vo. (Parchment Library), vellum, 7s. 6d.; parchment or cloth, 6s. Red Line Edition, fcap. 8vo. 2s. 6d.
Cabinet Edition, sm. 8vo. 1s. 6d.; cloth limp, 1s. Miniature Edition, 32mo., with red lines, 1s. 6d.; without red lines, 1s.
Fancy Border Edition, 1s. 6d. net.

De Imitatione Christi. Latin Text, Rhythmically Arranged, with Translation on Opposite Pages. Crown 8vo. 7s. 6d.


COMPLETE WORKS.

Vol. 1. Prayers and Meditations on the Life of Christ. A new and Complete Translation from the original Latin. By W. DUTHOIT, D.C.L. Fcap. 8vo. With Portrait. 5s. net in buckram; 10s. 6d. net in limp pigskin.

Vol. 2. Lives of the Followers of the New Devotion: being the lives of Gerard Groote, Florentius Radewin, and their followers. Translated into English by J. P. ARTHUR. The Translation revised by the Prior of Downside. With Photogravure Frontispiece. Fcap. 8vo. 5s. net.

Vol. 3. The Chronicles of the Canons Regular of Mount St. Agnes. Translated into English by J. P. ARTHUR. Crown 8vo. cloth, 5s. net.


Vol. 5. Sermons to the Novices Regular. Authorised Translation from the text of the edition of MICHAEL JOSEPH POHL, Ph.D., by Dom VINCENT SCULLY, C.R.L. Fcap. 8vo. 5s. net.

Vol. 6. The Imitation of Christ. Fcap. 8vo. 5s. net.

KEGAN PAUL, TRENCH, TRÜBNER & CO., LTD., London.
Does prayer, for anything at all, undoubtedly would be the unanimous voice of all, yes.

Very well then, for this is what we please not the substitution of these potent agents for the glories inventions of Science or medicine - but the most scientific use of medical and surgical skill, plus the spiritual factors that our whole being endorses as of tremendous importance.

Let medicine, surgery, and the Church join forces - you if the concentrated attack cannot avail - where either singly would be hopelessly worsted.