The intertwining of the natural (the explainable) and supernatural, defined as the unexplainable, in the interpretation of suffering and disease has been at the heart of the healing professions from time immemorial. Despite advances in science and technology, an element of the divine—faith-based beliefs—continues to bleed into evidence-based medical practices, and inevitably must play a role in curative rituals.

How physicians reconcile faith and science as components of care has been a conundrum. From a purely scientific standpoint, divine influence too quickly reeks of the frivolous and magical. Yet, appeal for supernatural intercession has broad attraction among the laity, and cannot be so easily dismissed by many physicians. A survey of more than 2,000 faculty at the Mayo Clinic on religious beliefs found that more than half who had religious tendencies felt God intervened in the natural processes of the world, and almost 40 percent of those with some form of spiritual belief believed so. More than half of physicians in medical and surgical specialties practiced some form of religion, and another quarter had some form of spiritual beliefs. Many physicians consider the spiritual as an integral component of health care.

Healing of ailments was invariably linked to the workings of a God or Creator. In the Jewish Tanakh (תָּנַקְךָ), Hebrew Scriptures), written as early as 450 BCE (before the common era), only God could heal, not the mysterious and even blasphemous incantations and charms of so-called physicians of the day. Deplored were those who sought counsel from physicians and not the Lord. Asa, King of Judah, “was diseased in his feet; his disease was
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exceedingly great, yet in his disease he sought not to the Lord, but to physicians” (2 Chron 16:12).³ Beware of such charms and incantations: “Wherefore thus saith the Lord God, ‘Behold, I am against your cushions wherewith ye hunt the souls as birds, and I will tear them from your arms, and I will let the souls go, even the souls ye hunt as birds’” (Ezek 13:20).³ Shamans were perceived as evil and should be put to death (Exodus 22:18). Only when directly ordered by God were their charms allowed (Numbers 21:8-9).³ Such was the case when God instructed Moses to make a bronze snake and put it on a pole. Anyone bitten by a snake could look at it and be cured.³ Demonstrable healing by physicians without reference to God was looked upon as magic and sorcery. Only God could grant permission for physicians to heal.⁴ This is why healing practices, when available, were the domain of rabbis. In the centuries just before, and during, the early common era (CE), Jewish medical practices followed Greek medicine, and incorporated a distinct rabbi-physician model as an interaction of God and intermediary in the healing process.⁵ Natalia Berger, in her discussion of Jews in medicine, prefaced Jewish medical history by writing:

Medicine is closely related to philosophy, religion and culture. This perhaps explains why medicine was one of the few free professions that allowed Jews to live both in the Jewish world and general society.⁵

The rise of the Christian movement after the first century

The Galilean Jesus of Nazareth, practiced curative healing. He combined bodily repair—even resurrection from the dead—as part of imprecation of faith. These two phenomena, healing and faith, were key themes for Jesus. To acknowledge the transcendence of the natural, he preached, one must acknowledge the presence and capabilities of the supernatural.⁶ The miracles to which many followers gave witness were an alteration of nature. The blind saw, the deaf heard, the lame walked, the dead rose. The natural had been overcome in inexplicable ways—both then, 2,000 years ago, and now. In that sense, Jesus of Nazareth was a nature healer. He was a manipulator of the φυσικός, of the natural. He was φυσική ἐπιστήμη, one knowledgeable in natural science—a physician.

Mark related that in Capernaum, Jesus astounded followers—“the whole city”—who brought to him “all who were sick or possessed with demons.”⁶ Mark then says, “and he cured many who were sick with various diseases” (Mark 1:33-34).⁷ Over the next days, Jesus performed many more cures, from healing of skin conditions to mending the paralyzed. Indeed, Jesus even referred to himself as ἰατρός, a term derived from the Greek ἰάω, meaning “to heal.”⁸ Jesus instructed his chosen apostles to do likewise. “Then he summoned his twelve disciples and gave them authority over unclean spirits to drive them out and to cure every disease and every sickness (Matthew 10:1).”⁹ Apostle Peter, seeing a crippled man at the temple entrance, told the man, “In the name of Jesus Christ of Nazareth, stand up and walk.” Immediately the man rose, his feet and ankles now strong, and walked around (Acts of the Apostles 3:1-9).⁷

It may very well be, as 19th Century German theologian Adolf von Harnack said, “Christian preaching began by craving healing...It fashioned itself as the ‘religion of healing’, as the medicine of the soul and of the body...Caring for the physically ill is one of their most important duties.” He likened Jesus to the idealized Asklepios, the Greek demi-god of healing.⁹

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The divine nature of Asklepios

Centuries before the Christian era, the deified Asklepios as the mythical Greco-Roman god of healing, was a vital resource in the Mediterranean world for inexplicable diseases and suffering. Around this fable demigod arose the Asklepieia: temples of healing where three important roles of the god were played out. Asklepios, as the master shaman of mythology, was seen as the progenitor of the lineage of physicians, the god of the temple priests, and the ultimate healer of disease-ridden supplicants who flocked to his sanctuaries.

The divine nature of Asklepios and the clear purpose of the temples intertwined religion and nature, one with the potential to alter the other. The priest-physician served as the conduit from one world to the other and neither were totally clerical or secular. Religion, the mysterious, and the supernatural were very much alive in these temples. So popular was the cult of Asklepios that by the fourth century BCE more than 200 sanctuaries were established across the Mediterranean world. Even practical healing methods had a divine connection. At the Asklepieia on the Athenian Acropolis and Piraeus, various instruments, including cautering implements, probes, cupping instruments, and pots for medicinal preparation were dedicated to the god.

Is Jesus of Nazareth, then, the Christian counterpart to the pagan Asklepios? Asklepios was, like Jesus, a god-man and worshipped by the Greeks (and later Romans) as the ultimate practitioner of medicine and surgery, heavily influenced in the process by celestial intercession. The gods of Greece and Rome, though, behaved distinctly more human than divine, embroiled in their own struggles and schemes, and often rewarded or punished humans—including the sick—as manipulation of their internecine rivalries. Yet the cult of Asklepios does not equate sin with illness as early Christianity often did, nor was healing contingent on belief. Unlike the unruly heavenly hosts of the Greeks and Romans, not only did Jesus heal physical infirmities, but he conferred an element of peace such that the soul is quieted. Belief in the Son of Man afforded such strength as to minister unscathed for the salvation of so many.

This is perhaps a carryover from the Greek concept of ἱατρός, not just physician, a student of nature—the φυσικός—but one who heals (σώσιμον) afflictions. As such, he provides not only curiosity about nature, but delves beyond in human compassion and unselfishness. Medicine thus carried a humanitarian message at the outset of one totally immersed in the physical and spiritual health of his patient, even though unpleasant things might befall him in the process.

Here, in Christian thinking, soon arose the concept of φιλανθρωπία (philanthropy, literally, “love of man”) taken from the Hippocratic text γὰρ παρη φιλανθρωπία παρεστι καὶ φιλότεχνη, “for where there is love of mankind, there is love of the art.” So, the intrinsic virtue of love is intimately associated with medicine, as love extends beyond oneself and is oblivious to personal hardship, inconvenience, or danger. Unlike the Greek concept, however, Christianity extended this philanthropy to all classes of mankind, as Jesus had illustrated when questioned on who was his neighbor, by providing the parable of the good Samaritan.

Christianity’s concept of healing took on a distinctly monastic flavor. One of the early proponents of philanthropy was the fourth century ascetic Pachomius, who established his first monastery in Upper Egypt and advised his fellow monks to care for the sick and hungry. Care of the unwell is a necessary fulfillment of the scriptures, according to his interpretation. Sickness posed a constant of mankind. The fourth century CE historian Eusebius borrowed from Hippocrates, who maintained that the medical man “sees terrible sights, touches unpleasant things, and the misfortunes of others bring a harvest of sorrows that are peculiarly his.” Eusebius also likened Jesus to the physician not only of body but of soul:

For he alone, as being the one only, all-gracious Son of an all-gracious Father, since the Father in His love for man so ordained it, right willingly put on the nature of us, even of those who anywhere lay low in corruption. And like some excellent physician, who, to save those who are sick, “though he sees the ills yet touches the foul spots, and for another’s misfortunes reaps suffering for himself,” so He by Himself saved from the very abyss of death us, who were not merely sick or oppressed by grievous sores and wounds already putrefying, but even lying among the dead; for none other in heaven possessed such strength as to minister unscathed for the salvation of so many.

This concept of healing was further developed in the monastic tradition, as evidenced in the writings of Pachomius and his followers. The idea that sickness posed a constant threat to mankind and that the Christian response was to care for the sick and suffering became a defining characteristic of monastic life. This was not only a humanitarian response, but also a reflection of the Christian belief in the intrinsic value of every human being, regardless of their condition.

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threat to monasteries and the cloistered brethren within. It may have been that such concern for any suffering—inside or outside cloistered walls—created an atmosphere of caring, as monasteries often turned into primitive hostels and hospitals for tired, hungry, and ill travelers.

Not vengeance from an angry God, illness served to enrich those who received and those who gave. Caritas, charity, and mercy were manifestations of the Christian spirit. The doctors who inhabited these infirmaries possessed the full range of medical skills including hygienic practices, knowledge of pharmaceuticals, and surgical procedures. They were admired as individuals who exhibited caring, and blessed piety, looking selflessly after the health of those who sought their assistance.

As the repository of written knowledge during the first several centuries CE, monasteries, and the doctors within, would serve to record and transmit medical practices across the Mediterranean, and become repositories of learning. With their other sacred duties, spiritual aspects of healing were intimately tied to therapeutic endeavors as part of a commitment to the healing of body and soul.

Eastern medicine

Eastern attitudes concerning medicine and faith were even more revealing. Parts of Islam encouraged intellectual and religious freedom. The Persian polymath Abu ‘Ali al-Husayn ibn ‘Abd Allah Ibn Sina, known as Avicenna (980-1037), was a man of remarkable abilities: philosopher, scientist, and physician. He linked physician interaction with the spiritual, as one designed by God to intervene in human ills. The physician should always be calm and dignified but direct his attention to the patient and be respectful. His medical writings were closely aligned with his theological and spiritual beliefs. Inherent in any discussion of disease or health was the pervasive presence of love and the overarching influence of his God. It is truly a metaphysical interpretation of natural events. This unifying concept of human existence provided a continuum of health, life, goodness, and the maintenance of all three.

In similar fashion, the Jewish religious philosopher, scientist, and physician Moses ben Maimon, known as Maimonides (1138-1204), promoted an unavoidable link between earth and heaven. Maimonides attempted to reconcile faith in the Jewish God with the natural order as put forth by Greek philosophers. His first endeavor, even before sojourns into medicine, was interpretation of the Mishnah, the explanation of the Tanakh, in line with developing scientific theories. It is clear in Maimonides’ writings, particularly his Guide of the Perplexed, that God is the source of all knowledge. The notion of knowledge is identical with the notion of life, all stemming from the essence of God. Attributes of human endeavors, as diverse as they might be, come solely from the divine, and, therefore, physicians are simply agents of divine revelation. In all his writings, Maimonides ascribed healing to the peculiar unity of physician and divinity. He compared physicians, healers of the body, to rabbis, healers of the soul.

The scientific era

The scientific era of the 19th Century threatened to change all previously ascribed medical philosophies. Some maintained that modern medicine had finally been liberated from the shackles of superstition that ruled the profession for centuries. Disorders of the sun, planets, animal matter, climate, and ravages of sin gave way to hypothesis-driven experimentation and result-oriented empiricism. As centuries passed, the interface of medicine, magic, and religion retreated, but still remained blurred so that even the learned physician harbored some uncertainty about divine influence.

Yet the special relationship between doctor and patient persisted; the covenant between doctor and patient must be inviolable. Certain obligations are implicit: faithfulness, confidentiality, trust, and priority. There is no impartiality. Total commitment of doctor to patient is required. This superseded mere human endeavors. It reached to the heavens and was inspired by the same relationship that binds God to man.

For the spiritual, technology in all its apparent wonders, could not...
immortalize the human condition. In “East Coker,” poet T.S. Eliot chides us for reliance on the scientific—the natural—and not tending to the divine. Here the “wounded surgeon” is Christ, and the “healer’s art” his salvation:

The wounded surgeon plies the steel
That questions the distempered part;
Beneath the bleeding hands we feel
The sharp compassion of the healer’s art.24

Once again, the blend of faith and healing are inescapable. One must not exclude the other. Of this world, mortality is certain. Infatuation with man-made wizardry will still have predictable ends—suffering and death. Eliot warned of the inevitability of the grave, and the quickened pace of life that leads us there. God waits patiently, even though the suffering of the Son-Man Jesus often goes unnoticed as the true redemption of life.

But do patients, in all their anxiety and fear, bestow on physicians a quality of the divine? In addition to their scientific training, do they have special inroads to God? And, like Asklepios, can they call down the supernatural as if they, like the historic Jesus, combined talents in both arenas to effect miracles and cures? While physicians maintain an aloof skepticism of faith-healing, this is not so for the laity, many of whom feel that their belief in the supernatural is instrumental in the healing process. There is historical justification for this if one harkens to the New Testament and the works of Jesus, who invariably combined the two in his healing missions.

There remains the element of the mystical in today’s medicine, as if the priests of Asklepios or the apostle-priests of Jesus were directing their care in person. Their physicians remain the manipulators of the natural, either through earthly or other worldly means.

Science does not easily subscribe to the magical—God included. A belief in some undefinable divine influence does not preclude the manipulation of nature to affect bodily function, and rid the sufferer of painful diseases. The faithful—doctors included—accept prayer, as a form of entreaty for Godly grace and influence, not just rote incantation but a medium of communication.

Rationalism

The era of rationalism, the epistemological belief that truth exists because it is logical and inherently sound, gave way to empiricism, the insistence that truth comes only through the senses. What cannot be seen, heard, touched, or commuted is not real. That God seems logical, good, and comforting to human nature was no longer justified.

Science, as the bastion of empiricism, failed to incorporate divine influence into the paradigm of natural behavior. The supernatural, was as yet undiscovered territory but still had a basis in natural laws. “Rationalism, or the use of pure intellect is not enough if we are to make discoveries in science or to find useful hypotheses” said ethicist Bernard Aschner in 1945.25 Miracle cures were no longer acceptable to the medical profession. Aschner could not totally disregard traditional, rationalistic approaches to therapy and patient-oriented care. “It is, rather, heresy and sectarianism”, he concluded, “to believe only in that part of medicine which can be controlled by laboratory methods and to neglect the collected experience of humanity.”25

While the primary goal of medicine is to preserve life and relieve suffering, it is not purely a technical exercise, although modern developments have shaped it so. As a result, some have insisted that separation of the spiritual world and the natural is finally absolute and undeniable. The respected scholar and theologian Abraham Joshua Heschel spoke before the American Medical Association in 1964 on the importance of medicine and religion working together:

Medicine is a sacred art. Its work is holy...It is a grievous mistake to keep a wall of separation between medicine...
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and religion. There is a division of labor but a unity of spirit. The art of healing is the highest form of imitatio Dei. To minister to the sick is to minister to God. Religion is not the assistant of medicine but the secret of one’s passion for medicine.26

Heschel went on to maintain that religion is medicine in the form of prayer, and medicine is prayer in the form of a deed.27 The more cynical deplore such attitudes. Physicians belong in the biologic world, critics insist. Even though divine supplication may be sought by patients, they do not want their doctors to prescribe prayer. Doctors must stick to the natural paradigm. While the doctor may profess atheism or agnosticism, not so with the patient. Inner hopes of divine sustenance fill the minds of many sufferers and to these, physicians must be sympathetic. To these pitiful there is a triumvirate of care—the patients, the doctor, and their God. The doctor, then, does not act alone. For those who long for the miracles of Jesus, now and then, it happens and their doctors are left to ponder and question—perhaps about their own beliefs.28

Scientific men of faith

Not all scholars were so suspicious. Scientist Louis Pasteur marveled at the invisible. Rather than capitulate to the widely held belief among his 19th century colleagues of positivism, the doctrine that only the measurable can justify assertion, thereby obviating the supernatural—the existence of God fascinated him. He wrote:

Beyond that starry vault, what is there? The...human mind, impelled by an invisible force, will never cease asking: “What is there beyond...Whenever anyone proclaims the existence of the infinite—and no one can escape it—he fills that assertion with more of the supernatural than there is in all the miracles of all religions.29

Pasteur remained a man of faith, although his faith was one of reconciliation with the unknown as part of a universal contemplation—in either acceptance or denial. “In each one of us there are two men,” Pasteur later maintained, “the scientist and the man of faith or of doubt.”29

Catholic, Pasteur believed in an inner mysterious influence, what the Greeks called ενθουσιασμός (“enthusiasm”), or literally, “God within.” This was the core of faith—that the supernatural does not work from above or from without, but is harbored within, part of the human soul. Pasteur reserved science for the study of the natural, and religion for the understanding of the supernatural.

Sir William Osler (1849-1919), could not say enough about faith. The son of a clergyman, he wrote, “[n]othing 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.”30 He described faith as the cement binding man to man.30 It is, he felt, in itself a miracle of human nature, and as such, should be of immeasurable interest to science.30 Physicians should not be hostile to it. Likewise, science must embrace it as a new frontier to study mind, body, disease, and wellness.

Cases of cure by invoking the saints and divinities have continued over the millennia and can still be found. Lourdes, France, stood alone as a phenomenon that captured the attention of Europe and America. Despite a trend sparked by the Reformation to diminish miraculous healing as a secular practice, even among Roman Catholics, there was not a more popular shrine anywhere. Osler remarked, that “[m]iracles are still [1910] as common as blackberries,” and Lourdes was no exception, visited by more people than “all the hospitals of France.”30

Faith to Osler equated with confidence—confidence in the doctor, the remedy, and/or, of course, the supernatural. Mind over matter had an importance to him that was as yet poorly understood but most likely responsible for many miraculous events. Still, he acknowledged the possibility of a soul, and thus, immortality. His view was that science, too, should investigate. It might be real. Somehow, though, Osler did not commit. How he felt about life after death remained a mystery. His life’s actions were thoughtful and charitable.
Actions demonstrated religion more than words or ideas, he contended. For a scientist, he at least allowed the possibility of supernatural powers and life eternal as yet unexplored.\textsuperscript{30}

**Human caring**

Lest science capture the imagination of medicine, and display its magnificent objectivity in rigidly inhuman fashion, beware. It is, as the surgeon and scholar Edward Delos Churchill reminded us more than seventy years ago, “though I have the gift of prophecy and understand all mysteries, and all knowledge; and though I have all faith, so that I could remove mountains, and have not charity, I am nothing.”\textsuperscript{31} Once again, the religiosity of Christianity (1 Corinthians 13:2) spills over to the interpretation of human caring, as typified by the healing arts.\textsuperscript{7}

Humanity, that peculiar regard for the soul of mankind that defies natural explanation, is part and parcel of a doctor’s mandatory sensitivity.\textsuperscript{31} For those who might question the significance of religion in the care of the ill, consider the larger-than-life figure of Christ just inside the front door of the old Johns Hopkins Infirmary at 5201 Broadway, in Baltimore, “so tall that it reached up beyond the walkway on the second floor,” according to a young Thomas Starzl, who began his internship there in 1952.\textsuperscript{29} He found great comfort in looking at the statue, as if it gave an eternal significance to his grueling labors as a house officer.\textsuperscript{32}

What is the supernatural if not a ghostly presence of the quality of man that fosters an unmeasurable connection of one to another and a common concern for welfare, joy, and mutual compassion—Pasteur’s enthusiasm. Whether that be God or a spiritual essence that resides within, is of no relevance, some might say. Lay theologian C.S. Lewis maintained that naturalists—those who deny the supernatural—acknowledge only that reality arises from physically understood laws and movements of the natural world.\textsuperscript{33} Nature, then, is everything. Nothing cannot interfere or influence. By this stance, the scientific materialist is excluding not only the possibility of the supernatural but also of any workings that cannot be measured, such as the complex processes of the human mind and the generation of ideas and epistemology.\textsuperscript{33}

Yet, the vitality of science as a manifestation of human ingenuity cannot be discounted. By probing the universe, scientists have allowed discoveries that only widen the possibilities of spiritual complexity and human consciousness. As chemist and humanitarian George Sarton felt:

> Without scientists, without saints, without artists, mankind would soon be reduced to a society of animals. Without saints, it would fall into sin; without artists, into ugliness; without scientists it would stop altogether and degenerate.\textsuperscript{34}

So, the definable and undefinable are one. Perhaps they are both foundational to medicine. The rearrangement of nature, either by miraculous means or rigid scientific experimentalism, represents the admixture of known and unknown, understood and mysterious, science and faith.

Physicians may indeed be healers of body and soul; one plays upon the other, and neither can be ignored. Such profound responsibilities suggest an interplay with the celestial. In monotheistic faiths, healing is inexorably tied to divine intercession, and the physician sanctioned as an instrument of a Godly benevolence.

**References**


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