CARE OF THE SOUL IN MEDICINE

Healing Guidance for Patients, Families, and the People Who Care for Them



THOMAS MOORE

Author of the classic #1 New York Times bestseller Care of the Soul

Praise for Care of the Soul in Medicine

"I wish **Care of the Soul in Medicine** had been available when I was a medical student, because it is one of the wisest guides for health-care professionals I have ever read. Moore shows that without attention to the spirit, there can be no true healing. If taken seriously, the wisdom in his book could transform medicine in America. This book is desperately needed by patients, too, and by all those who love and care for them."

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"This accessible and engaging book reminds us that caring is a sacred calling; that care of the body is care of the soul; and that health care practiced with depth, beauty, respect, and meaning can transform our hospitals into temples of healing. I would love to think that every medical student would read this book."

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"Thomas Moore's **Care of the Soul in Medicine** is an unusually thoughtful exploration of current medical culture and its focus on treatment and cure, often at the expense of caring and healing.

He makes an inspirational and convincing case for true transformation in health care that goes beyond our fascination with technology to encompass heart, mind, and spirit."

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- "Care of the Soul in Medicine may be your best friend through illness, and a life-giving companion for many who seek to reclaim the joy they once knew in the healing arts."
- Rev. Dr. Marcus M. McKinney, D.Min., LPC, director, Department of Pastoral Counseling and Community Outreach, Saint Francis Hospital and Medical Center; and assistant professor, Department of Psychiatry, University of Connecticut School of Medicine
- "Moore sees the mechanics of medicine, and offers another view that has its roots in the beginnings of medical care, in the Soul of a caregiver. It is a thoughtful book for patients, families, caregivers, and all of us who will eventually enter the realm of medical care (and we all will)."
 - George Doebler, director, Pastoral Care, Emeritus,
 University of Tennessee Medical Center

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Notice how this snake coils around my staff.
Remember exactly what he looks like.
I will change myself into this snake, but
I will be much larger, I will be immense, like
the body of a god who transforms himself.

— ASKLEPIOS , IN OVID'SMETAMORPHOSES , XV

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PREFACE

There is a beautiful story in the Acts of Peter and the Twelve Apostles, a Gnostic text, in which Jesus goes by the name Lithargoel. The word breaks down into the Greek words *lithos* (stone) and *argos* (silver), and the Hebrew *el* (angel). Jesus is the shining spirit stone. Around his waist he wears a packet of medicine. He is a healer and promises to give people pearls. But he means himself. He is the pearl. He is the medicine, just as doctors and nurses, and all of us in our healer capacity, are the real medicine.

Buddhists honor a similar healer they call the Lapis Lazuli Radiant Healing Buddha, who holds a bowl of medicine in one hand and a healing plant in the other. He is surrounded by a halo of bright colors. His followers promise to heal with their personal radiance and presence. I think every nurse, doctor, and patient should be a devotee of this Buddha.

These inspiring and colorful images could bring new life to modern medicine, which has gained immensely from its application of the scientific method but has also lost the spiritual radiance of traditional medicine. Along with that radiance has gone some of medicine's soul.

In this book I want to offer some suggestions of how medicine could move into an exciting and much-expanded future. I recommend taking into account the body, soul, and spirit as all being implicated in every illness and therefore having a role in every medical examination and procedure. I put special emphasis on places of healing, pointing in certain deep directions where architecture and furnishing can create an atmosphere in which people feel like complete human beings and in which they are helped in every dimension of their being.

INTRODUCTION

Thirty years ago I was living in a rented house just a block from Southern Methodist University in Dallas when I began practicing psychotherapy. People came into my small, book-lined room there mainly with complaints of soul: they were depressed or having trouble in marriage or finding it difficult to get life in place. Some came with spiritual issues: they didn't want to live in a body and therefore had trouble with food, or they had been following a guru and had become disillusioned and rootless. In some cases the problem was more physical.

One evening a woman called me and asked to have a special late-night session. She had a bad skin problem and was scheduled for surgery the next morning. She showed up around 9 p.m. and talked about her life situation, especially the problems she was having with her husband and two children. We explored certain patterns that had ruled her life for many years and seemed to lie in the background of her family issues. The next morning she called to say that her skin lesions had disappeared and the surgery was canceled.

This was the most remarkable instance I witnessed where talk cleared up a physical problem, but I have no doubt that life patterns, ways of finding meaning, and long-standing emotional habits lie at the root of physical illnesses and therefore that caring for the soul and spirit could play an essential role in healing them.

This book is not about near-miraculous healings but rather about ways in which the practice of medicine could take into account the psychological, relational, and spiritual aspects of a person going through the rigors of medical treatment. Even if addressing these dimensions didn't cure the illness, it could make the process of healing faster, more complete, and more satisfying. Both health-care professionals and patients could come to medicine with an eye toward healing the whole person and not the body

alone.

What Is a Person?

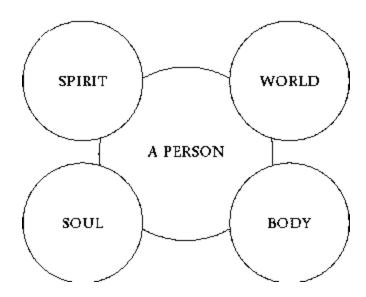
People are among the most obvious and identifiable beings we deal with every day, and yet it isn't easy to say precisely what a person is. In my practice I see people whose world of meaning overlaps with their world of physical pain, and you wonder how one affects the other. Is the body a person? Does illness always affect every aspect of a person? I believe that exploring these questions could lead to a more humane health-care system, one that offers deep emotional meaning and sublime spiritual comfort.

In my practice of psychotherapy I have often seen body and soul interact. Suddenly bereft of meaning, a woman complained of stomach problems and sexual difficulties. A man who was overly sensitive to criticism developed a severe skin disease. Another man who had never been able to express his anger struggled with colitis. A woman who complained of frequent headaches always had, I noticed, deep furrows in her forehead.

I have come to think of body, soul, and spirit as three sides of the triangle that is a whole person, and now I also include relationships—family members, lovers, friends, spouses—as well as work and all kinds of experiences in my definition of a person.

Today medical practitioners speak of treating "the whole person," but the modern idea of personhood is limited. My paradigm offers a comprehensive way to picture a complete person who presents himself at a doctor's office or a hospital. It is a four-dimensional person who is defined by others close to him and by the world in which he lives.

Let me sketch it this way:



There are moments in doing therapy when I wish I were a physician so I could more precisely tend to the whole person sitting in front of me, doing something specific for his physical pain. I have felt a similar but reverse urge as a patient presenting myself to the health-care system—I wish I could inject some soul and spirit into the medical world.

Body: The Physical Life of the Soul

I'm often invited to speak at conferences that have "mind-body-spirit" in their titles. I don't know how this popular phrase came into existence, but it is lacking, since it leaves out the soul. It may sound like a matter of semantics, but it is much more than that. That which we can't imagine and express in words remains hidden and neglected.

In older philosophies the mind is tucked into the larger category of spirit, part of that urge in us to transcend the material life and our ignorance through knowledge, power, and experience. The deep soul points in a different direction: it is the focus of our humanity and individuality, our emotions and memories, our fears and desires. The soul is especially concerned about those things that make us secure and give us a sense of belonging: home, family, love, place, friends, and work. While the spirit often prefers solitude and detachment, the soul comes alive in community and prefers attachment.

In the history of religious spirituality, detachment has been an important value, and it contributes to a spiritual life. If you can be less concerned about

making money, staying close to your family, and having many things in your life, you are free to explore meaning and values and develop a way of life committed to a grand vision. Medicine takes this route when a hospital focuses entirely on curing a patient and disregarding his work life, his family, and the things that are important to him. Hospitals evoke a pure "spirit" atmosphere with white uniforms, colorless and imageless walls, and a general atmosphere of function and activity.

Most people don't use the word "spirit" in this way, so let me explain. Philosophies deriving from Plato distinguish spirit from soul. Spirit is any attempt to go beyond the status quo, the body, and personal limitations. In this sense, education is a spirit activity, and for good reason we speak of "higher education." Soul is down and deep, close to experience, known in feelings and passions and revealed in physical expression and even illness.

A soulful environment might be cluttered with objects of comfort or memories of home, while a more spirited place will focus on getting the job done without frills or human distractions. Soul is known in its variety, and so colors and textures abound. Spirit tends to favor symbols of purity and focus, and so white is a common choice of color. In a hospital, an emphasis on spirit may accent technology and procedure over the personal needs of a patient.

One day I sat with a patient, Ira, in his hospital room while he was being examined by a series of nurses. He had a slightly sardonic sense of humor that he expressed constantly. Rarely did he give the nurses a straight answer. He had lymphatic cancer and now lung cancer, but this day the nurses were concerned about his irregular heartbeat. They checked his blood pressure continually and looked at readouts on an EKG machine at the foot of his bed. They didn't say what they thought was wrong. They looked nervous, and their constant assurances didn't persuade either of us.

Finally Ira asked them, "What do you see there?" He was referring to the EKG printouts. A friendly and caring nurse said, "Your heartbeat is abnormal." When she used that word, my ears pricked up. I remembered a cardiologist once saying that about me. "Abnormal?" Ira shouted. "You're telling me I'm abnormal?"

The nurses left to seek out a cardiologist, upping the ante for Ira, of course. He became more anxious. "I want to get out of this hospital as soon as I can,"

he said to the next nurse who came into the room.

"What do you like least about it?" I asked him.

He spread his arms out and pointed to the small, cluttered room. "I have nothing to do," he said.

"What is your work?" I asked. I didn't put it in the past tense, because people often don't want to think about illness taking away their work lives.

"I used to be a pipe fitter," he said. "One day I fell and then got weak. I couldn't go back to the job. The worst thing about being sick is that I don't bring in the \$60,000 I used to make. My wife is worried. I feel bad."

This man, lying in a bed with tubes and wires streaming from his body, missed his world and was concerned about his family.

If medicine were to grant more attention to the soul, it would see the importance of beautiful things, the people in a patient's life, and the loss he may feel in being held in a place so focused on cure. A more soul-centered medical practice would respect attachments of all kinds and understand the importance of things like familiar food and a more homelike environment. Maybe it could even design a hospital stay in which a patient might be able to get something done in his world. I know that for me, concern for my family and the itch to do my work would be overwhelming.

In this book I want to address both health professionals and patients. I want to explore ways to make a hospital or a doctor's office soulful and spiritual. I also want to show patients how they might care for their soul and spirit as they navigate a materialistic health-care system. When a person gets sick, everything in that patient's being is affected but only a small portion is addressed.

Later I will spell out what I mean by soul. For now, just know that I am not referring to an object of religious belief or some spiritual entity out there in the ether. My work does not derive from any particular religious belief system or from any New Age approach to healing. We commonly talk about music having soul, about soul food, a soulful person, a house with soul. Essentially that is what I mean by the word, though I can get more technical.

For some, the word *healing* could be a problem, too. It may sound

sentimental, magical, and inflated, but I don't mean it that way. I am simply referring to the aim of every health-care worker to cure disease, manage injury, ease pain, rehabilitate, and offer comfort. Etymologically, "heal" comes from "whole"; it means to put back together what has been broken apart—bones, organs, health, normal life at home and at work, emotional calm, and important relationships.

Why do I include "world" in the diagram of what a person is? Because we are defined as much by the world around us as by our inner experience. You see a patient lying in a hospital bed and think that his illness is all there on the bed. But if you could crawl into his head, you would find concerns about the family, the house, the neighborhood, work, the car, perhaps even international politics. They are not only a big part of the patient's experience; they may be at least partly the cause of his sickness.

Concretely we know that poisons in the air and water and in the objects we use can make us seriously ill. Many are carcinogenic, and yet, thinking about illness as an inside-body affair, medicine doesn't take the lead in cleaning up the toxic environment. It keeps treating individual patients as though the world has nothing to do with illness and has no role in its cure. It acts as though the world isn't sick, though we all know that the opposite is true.

I remember visiting my mother when she was just entering the phase of dementia after a serious stroke. She walked to the window of her little room, looked out, and spoke with considerable longing. "I'd like to be home," she said.

Then she asked me if the street she was looking at was just down from her house. She was quite sure it was. She was looking for signs of the neighbors. In fact, she was about four or five miles away in an area she didn't know well. It was sad for me to sense her longing for home, knowing that we couldn't take care of her there. She had the look and sound of someone whose mind had been affected by the stroke, but I felt this wasn't about confusion. Her imagination was taking her home, and, as in a dream, she was there at some level.

I encouraged her to talk about home, since it was so much on her mind. When she did, she seemed to let it go, at least for a while. But there was no doubt that her house, her things, and her neighbors were part of her life, part of who she was. We don't seem to appreciate the shock to people snatched out of their familiar worlds and resettled in strange hospital rooms and unfamiliar beds. But this loss of world may well get in the way of healing, especially when health-care workers are unconscious of it and unaware of its importance.

We are also insensitive to the new reality of a hospital, with its institutional architecture, staff, and equipment. Nurses and housekeeping attendants replace the neighbors. A patient gets to know them the way you know your neighbors—they are not intimately connected, but they see each other several times a day. They establish a relationship. Care for that new world is a crucial element in the healing process.

A New Vision for Medicine

Medicine today appears to fit snugly in the age of science. We treat the body as an object unrelated to emotion and meaning and spiritual power. We deal with organs and body parts as separate entities unrelated to the whole. We not only train doctors in science; we enculturate them, make them see the body as an object, and require them to honor the scientific method and be wary of any alternatives. We measure advances in medicine largely by the sophistication of the machines we introduce into a hospital and by new research in pharmacology. In our doctors we admire professionalism, competence, and objectivity.

This exclusive emphasis on the scientific and technological practice of medicine is relatively new. Just 400 years ago, one of the famous doctors in England, Robert Fludd, who studied at Oxford and on the Continent in the years around 1600, was an alchemist, wrote a book on the profound connection between macrocosm (the universe) and microcosm (the human being), and used music as his main metaphor and template for treatment.

Four hundred years is not so long ago. My father is now 96. If his fathers before him lived similarly long lives, my great-great-grandfather would have been alive when Dr. Fludd was studying medicine and experimenting with a salve, formulated through alchemy, to be used in warfare by putting it on the weapon that caused a wound.

Shamans and other spiritual leaders have the role of healer and doctor in

their communities and are often remarkably effective in dealing with wounds and illnesses. Prayer, ritual, meditation, and music have the power to heal, and yet we don't use them seriously and widely in medical practice because they lie outside the paradigm, the myth, and the accepted story of modern medicine.

My teenage daughter, who suffers from Hashimoto's disease, an autoimmune illness that attacks the thyroid, sometimes goes to see a healer, Guru Dev, who has been a shaman and now practices within the Sikh tradition. He holds her hand and meditates and "sees" what is going on with her body. She trusts him and feels beneficial changes in her body—she rubs her belly and says "something shifted me"—after a meeting with him.

Once, I had a session with him that had a small but important impact on me. My wife, my daughter, and I went to an ashram that Guru Dev, who travels around the world healing and teaching, was visiting in our area of New England. The session was to be for me and Siobhán, who was 16 at the time. We all agreed that she and I would have a half hour each with Guru Dev.

Siobhán began. The healer held her hand and they sat quietly on the floor in the corner of the room. I sat nearby and watched quietly. After what seemed to be three minutes, he let go of her hand and motioned for me to join him. I leaned over to my wife and whispered, "I thought we were to have a half hour each. Siobhán has had only two or three minutes."

"What do you mean?" my wife whispered back. "She's been with him for almost an hour."

I don't know how time got compressed. It didn't feel like a simple, everyday occurrence of time going by quickly. I was jolted by the information that so much time had passed. After I had sat with Guru Dev for my turn, he recommended the yoga "breath of fire" and told me that with a little practice I could tell how the blood was flowing through my heart vessels. I came away with a different way of seeing my body, with an intimacy with my physical being I hadn't had before. The slippage in time, not terribly significant in itself, taught me to think of healing as taking place in an altered state.

I am a fairly normal person from a working-class neighborhood in Detroit.