PERSONAL STORIES

CHEMO, GUTS, PRAYERS AND SMALL MERCIES

October has been designated Breast Cancer Awareness Month. Most family physicians have experience of breast cancer – whether in first suspecting the diagnosis, being supportive in making decisions about the management of it, or in ensuring a comfortable, pain-free ending.

The Editor heard a remarkable story of caring recently and asked the major participants to describe it from their own perspectives.

Our patient 'Elizabeth', is a middle-aged woman who has had breast cancer for several years. When the diagnosis was first made she said: 'I cannot die now – my children are too small.'

The second part, Pumzile's story, as faxed to the Editor, was full of biblical references. These are available on request.

EXAMPLE 1 IZABETH'S STORY: WHEN ONE RECEIVES chemotherapy one begins to feel that one is paying for every huge and ugly sin one has ever committed as well as for all the little inconsequential ones and then some! During this experience I've been astounded at the love, care and attention I have received and have as a result reviewed my whole life and my relationships with others. In fact this introspection has allowed me to find some meaning in my suffering.

However, the fact that the thought of death no longer has such a powerful, destructive sting I can also ascribe to an experience I could only have had in this incredible, challenging and fascinating country.

One evening in June 1996, 13 complete strangers came to my house on a mission. They belonged to a Christian cell group in GaRankuwa, had heard through my sister, a community nurse in their area, that I had been given the thumbs down and were absolutely convinced that they could show me the path towards healing – on this earth and beyond. I didn't want them to come; I hate strangers seeing my baldness; I didn't want any more sermonising; I am very reserved and not very demonstrative when it comes to 'religion'.

But they came anyway – from a long way away and at some considerable cost and inconvenience. I'll never forget the sincerity, the absolute kindness and willingness to help this white woman who but a few years ago was on the other side of South Africa's very own Iron Curtain. They reached across the cultural divide and freely and joyfully gave my parched spirit peace and hope – something which I realised had been taken away by a doctor who didn't know any longer why I wasn't responding to treatment.

Isn't it strange that something as awful as the $big \ C$ can act as a catalyst for genuine caring and love – evinced in a way I never thought possible. I am truly blessed.

PERSONAL STORIES

PUMZILE'S STORY: I WORK AS A DENTIST IN A RURAL area. I am married with two lovely daughters. My faith is central to my life.

Hearing about Elizabeth: On a routine visit to a peri-urban family clinic I met Sister M. She was very kind and we started talking about God's greatness. Then Sister M. started telling me about her sister Elizabeth, who had been diagnosed as terminally ill with breast cancer. I immediately felt an urge in my heart to pray for Elizabeth.

Praying for Elizabeth at a distance: Every Tuesday I attend a cell group (ie prayer group). I shared Elizabeth's story with my prayer partners even before I phoned or met her. Everyone was touched and we made a 'prayer of agreement', believing God for a miraculous healing of Elizabeth. The cell group also felt we should go and pray at Elizabeth's house, and we agreed to continue praying for her whenever we could.

Arranging an appointment to meet Elizabeth: I started by introducing myself to Elizabeth on the phone. She was very receptive especially as M, her sister, had told her about me. I told her that although her body is aching, God can still save her soul, and that God can do a miracle about her sickness if she is born again. Elizabeth was so touched by my conversation with her, that she was keen to come to my church on a Sunday to be prayed for. Unfortunately, due to her sickness and type of treatment, that arrangement did not succeed. An appointment to pray at her house was made.

Praying at Elizabeth's home: What a welcome

- the whole family was awaiting us. I was together with twelve members of my cell group. A service was conducted by the leader of our group. We sang hymns and prayed to God to bless our visit because He knew in advance that on that particular day we would be at Elizabeth's house. A couple of verses from the Bible were shared with the family. A testimony was given by one of our members which touched everyone's heart. It was about a lady who had been healed from cancer of her vertebral column after being prayed for. This lady had suffered for years, and she was just living on morphine for pain. By the time one of our members knew about her, the cancer had spread further in her spine. They believed God would provide healing and through faith the lady was healed. This testimony gave me more hope that Elizabeth would be healed also. Elizabeth was prayed for accompanied by laying on of hands.

I really thank God who made it possible for me to meet Elizabeth and her family. It is the desire of my heart to see her being completely healed – that is physically and spiritually.

• Editor's comment:

As an outside observer of the consequences of the above story, my main impression is that this episode changed various dynamics within Elizabeth's family. The sense of everyone 'holding their breath' has gone, and it is as if the family has heaved a collective sigh of relief. The stress levels within individuals also seem to have diminished.

THE HEALING POWER OF PRAYER?

A recent *Time* magazine feature¹ highlighted this question. A number of popular books have been published aimed at the lay public. One of them, written by Dr Larry Dossey, is entitled *Healing Words: The power of prayer and the practice of medicine*² and attempts to document scientific findings about this phenomenon. This book was found worthy of review in the *British Medical Journal.*³ The reviewer felt that although the book had great merit, several inconsistencies emerged and the scientific 'proof' of the power of prayer (including meditation and chanting) could not in the end be substantiated. Dossey's book is in essence an intelligent although fairly loose meta-analysis of a multitude of books and articles from a variety of disciplines.

Interesting aspects addressed in the book include 'neurotic prayer', 'prayer that does harm', and a chapter entitled: 'Your Doctor's Beliefs and Why They Matter'. It appears that neither the words or form of the prayer, nor the 'being' to whom the prayer is addressed, are as important as the positive effects of a simple willingness to participate in prayer. This apparently becomes even more powerful when several people are involved in some sort of ritual.

Another article published recently asks the ques-

tion: 'Should Physicians Prescribe Prayer for Health? Spiritual Aspects of Well-being Considered'.⁴ This article is essentially a report on a conference called 'Spiritual Dimensions in Clinical Research'.

The following statements caught my attention.

'There is a need for primary care physicians to consider and respect the religious and spiritual beliefs of patients. To do otherwise might be considered unethical or even negligent.'⁴ (How do we respond to this in terms of 'traditional healers'?)

The same speaker went on to say: 'The evidence suggests that spirituality is an important medical tool that should be considered when developing a therapeutic regimen for the patient.'4 (How do we do this?)

'Spirituality and religion have important health benefits and more detailed studies using more accurate measures of this are warranted. The question today is ... how these [health] benefits can be obtained. We can no longer afford to neglect this important clinical variable.'⁴

Other popular books devoured by lay people include a series of works by Deepak Chopra who is a proponent of Ayurvedic Medicine, although his orthodox medical background is that of an endocrinologist. Bernie Siegel, a surgeon, has written two best-sellers: Love, Medicine & Miracles' and 'Peace, Love & Healing. Andrew Weil, also a doctor, has written Spontaneous Healing. Herbert Benson is a researcher at Harvard University Medical School and he is best known for his 1975 work The Relaxation Response. However, his most recent publication, Timeless Healing seems to have been the stimulus for the Time magazine article mentioned above. (Benson originally studied the physiological effects of transcendental meditation, but then went on to study other forms of prayer and meditation.)

In a cursory search of the Internet for reports from people of other than Christian faiths about prayer and healing, I could only find references to the Hindu belief. I am sure there must be others. Although I have friends from a wide range of beliefs and faiths, most of these friends are 'nonmedical'. I would invite medical colleagues of any faith to contribute experiences of the impacts their beliefs have had on themselves, their patients, and/or the way they practise.

In conclusion, I would like to quote a wellknown prayer by Sir Robert Hutchinson:

'From inability to leave well alone; from too much zeal for the new and contempt for what is old; from putting knowledge before wisdom, science before art, and cleverness before common sense; from treating patients as cases; and from making cure of the disease more grievous than the endurance of the same, Good Lord, deliver us.'³

Roy Jobson

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- 3. Roberts J. Healing Words: The power of prayer and the practice of medicine. Br Med J;1995;311(7013): 1174
- Marwick C. Should Physicians Prescribe Prayer for Health? Spiritual Aspects of Well-being Considered. JAMA 1995;273(20):1561-2.

IF YOU HAVE AN OPINION OR A RESPONSE TO THIS ISSUE, PLEASE PUT IT IN THE FORM OF A 'LETTER TO THE EDITOR' OR SHORT ARTICLE FOR CONSIDERATION.