Just as caring is a psychospiritual characteristic, so is loving. Love is a rare feature in modern Medicine. There is little true love between colleagues either in Medicine or in Nursing. Love may be subverted by professionalism if we are not careful. Recently a nursing instructor unthinkingly told a dying breast cancer patient to sit up and eat her breakfast--to "stop feeling sorry for herself." Because of spinal metastasis this was impossible and no one helped the patient with her breakfast. An oncologist told a dying patient with cancer of the stomach with hepatic metastasis, when she wanted to stop her chemotherapy, that if she didn't take her 5FU she was a "dumb fool." Equally reprehensible is the surgeon who allows himself to be interested with the patient's care as long as there is the hope of operability, but when the condition is found to be incurable, turns the patient over to a new, strange doctor who has a number of experimental potions to try and who really doesn't know the patient beyond his hematology.

There isn't much love in modern Medicine or Nursing. Love is a spiritual virtue in its non-filial and non-erotic aspects. So, as the spiritual has been excluded from patient care and orientation, love has also diminished. Buckingham in the Canadian Medicine Journal (Dec., 1976) cites his observations concerning the contrast between care in the ordinary surgical unit of the Royal Victoria Hospital in Montreal and in its Palliative Care Unit. He mentions the failure of doctor and nurse to sit down and talk with the patient on eye level. He describes the conspiracy of silence in which no one informs the patient of what is happening in his body and what his prospects are. This he states was not the case in the palliative care unit where every effort including contact, love and prayer were part of the care of every patient.

Dr. J. E. Dunphy (N.E.J. Med., Aug., 1976) speaks of the psychospiritual caring for the patient with cancer as follows: "Francis Peabody's dictum that 'the secret of the care of the patient is in caring for the patient' permeated our student days. We learned that the practice of Medicine is cold and abrasive unless tempered by love. By love I mean 'caritas,' that love which bonds together men of good will of all races and religions. Typhified by the story of the Good Samaritan, it is the manna and the leaven of the relation between the patient and the doctor. Yes, it is true that love is a most important virtue in Medicine and Nursing, but somehow it is rarely present in modern patient care. The reason for its absence is due to the fact that atheism cannot produce love, since God Himself is love. How can love exist if we exclude God from our practice as we have tended to do for the past fifty years? In Canada and the United States we profess Christianity but we practice atheism.

Love is a spiritual virtue just as caring and healing are. They exist together and reinforce one another (2 Pet. 1:7). With love come empathy, compassion, dedication, selflessness, joyousness, peace, patience, meekness, understanding, gentleness, goodness, temperance and faith (Gal. 5:22). One also finds in all phases of life filled with the Spirit (including the Medical phase) the supernatural gifts of knowledge, wisdom, faith, healings, miracles, prophecy, discernment, tongues and interpretation of tongues. But the greatest virtue of all is love--because love is the actual nature of God Himself.

Love, like prayer, is not always something that needs to be said as much as it needs to be acted out. Since it is a spiritual virtue it will return to its giver manifold. The more one gives love the more he receives--"If you receive my material possessions from me, you have them and I have lost them. If you take my thoughts, we both share them. If you receive my love and my spiritual gifts, you have them and I receive them back multiplied." Medical practice without love is lethal to patient and to physician. The surgeon must bestow his love upon the tissues of the body as he operates. This has been termed "reverence for tissue." Tournier once said to me, "Prayer is not necessarily something which is said, just a grouping of words--it is 'What do your eyes say? What do your hands convey? What are you giving of yourself?'

The dying patient needs the loving care of those who by virtue of circumstance happen to be those who are caring for him. He needs their humor, their conversation, their prayer, their personal contact. This is the Logo-psychotherapy of the dying. No one is capable of teaching it. It does not evolve. One must ask God for this ability and God, who is spirit, will give His Holy Spirit to us and we will supernaturally receive Him into our logos, into our psyche--and we can then give that love to others. That which...
we have known in the church must be taken from the church to the bedside, to the wards, to the homes of those who are dying.

Cecily Saunders describes it as doing in action what Jesus said in Matthew 25:35,36,45:
I was hungry and ye gave me meat, I was thirsty and ye gave me drink.
I was a stranger and ye took me in, I was naked and ye clothed me.
I was sick and ye visited me, I was in prison and ye came unto me....
Inasmuch as ye have done it unto one of the least of these my brethren, ye have done it unto me.

RECONCILING

Medicine needs reconciling. Just as the patient requires reconciliation in many areas as death approaches, so Medicine and Psychiatry deeply require reconciliation toward each other and toward God. Reconciling has various meanings:
to make friends again to bring into harmony
to settle a disagreement to make satisfied
to win over to make no longer opposed
to make agree to purify

Somehow all of these definitions apply. We need in Medicine to become friends again with one another and with our patients. We need to settle our quarrels—the Freudians and the Jungians, the Charismatics and the Fundamentalists, the liberals and the conservatives, the intellectuals and the non-intellectuals, the Protestants and the Catholics, and so on.

We need to win each other over—to bring ourselves into harmony. Scripture asks us how two can walk together unless they be agreed. How can we hope for a new Medicine and a new understanding of man unless we lay down our multitudes of petty and many times inconsequential differences?

We need to no longer be opposed to one another as we so often are, but we need to come together in unity—what has been called the unity of Godly love. We require this as a profession, as a people, as a nation, as a church and as the family of God worldwide. Yes, we need to purify our lives in this reconciliation—and in its fires to be able to show through example how our dying patients may experience this most necessary act of deep healing.

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MONTHLY HAPPENINGS

JUNE 22-27--Dr. Reed and Kay, New England Christian Ashram, St. John's United Methodist Church, 28 Cataract Ave., Dover, NH 03820. Contact Rev. Daviel V. Weaver, Dir., at the same address or 603/742-3046.

FUTURE HAPPENINGS

SEPT. 12-14--CMF of Canada Second Annual Conference, Hotel Triumph, Toronto, Ontario. Details will be given next month.

OCT. 1-5--Eighth Annual Conference on Logo-Psycho-Somatic Medicine, Airport Host Hotel, Tampa, Florida. See following for description.

EIGHTH ANNUAL CONFERENCE ON LOGO-PsyCHO-SOMATIC MEDICINE

Plans are now well underway for the Physicians' Conference in October. This year our conference will concentrate upon disciplines in LPS Medicine which we have not covered in previous meetings. There will be an opportunity for Christian testimonies of physicians. We are arranging to have input from Oral Roberts University Medical School. We also are attempting to have Michael Harry from Denmark and Larry Samuels from Israel with us. When the program has been finalized it will be sent to the entire CMF physicians mailing list which is now near 3000. Please pray for our inspiration, for God's guidance, and consider helping financially so that the increasing expenses of travel can be met. We would be most pleased if we could have a large scholarship fund established allowing us to bring in foreign physicians and medical students as well as some vital clergy.

Your prayers, financial help and assistance are humbly requested.

HEALING THE WHOLE MAN—MIND, BODY, AND SPIRIT

by William Standish Reed, M.D.

Published by Fleming Revell Power Books, it is now available through CMF of Tampa and your local book store. You may contact us if you wish to obtain a copy. Please send $4.95 a copy plus postage of 60¢ (Canadian currency) or $3.95 a copy plus postage of 60¢ (U.S.). If you order several copies, additional postage will be required.

CASSETTE TAPES AVAILABLE

We have the annual Doctors' Conference meetings, 1973-1979 (catalog available), the weekly Women's Auxiliary Bible studies given by Kay Reed and by Dr. Reed, 1969 to the present (catalog available), and two series of lectures by Kay Reed, "Your Home, Christ's Sanctuary" and "The Women of the Bible." New Addition—the testimony of Robert Fierro—a wonderful tape regarding the healing of his body of multiple myeloma, given at a Phoenix, AZ, FGBMMFI meeting in January, 1980. Please contact CMF of Tampa for catalogs, cassettes, or further information.