

Presidential Address

SPIRITUAL ENCOUNTERS IN MEDICAL PRACTICE

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ABSTRACT

A traditional physician weaves spirituality into his medical practice—and into the operating room with his patients.

KEYWORDS: Spirituality, medical practice

The title of my talk today is “Spiritual Encounters in Medical Practice.” Before I launch into this talk I just want to tell you that I approach this topic with a certain degree of trepidation and uneasiness because here I am a Family Practice Primary Care Physician, I have a busy office practice, a large hospital practice, I’m still working in the traditional healthcare system. Our office, which consists of my wife, Chris and five other M.D. Family Practice physicians, myself, and a nurse practitioner, takes care of Medicare and Medicaid patients and we even welcome “mangled care” patients.

I’m not an expert in this field. I’m not a Jeff Levin or Larry Dossey or a Louis Mehl-Madrona or a Chris Page but I admire those people tremendously. I’ve not written any books and I’m not on the speaking tour. What I **can** do today is tell you what we do in our practice in terms of spirituality, what our experience is with our patients and what I have observed about other physicians in this area and how they incorporate spirituality into their practice.

Last week I was called by Lisa Marshall who is a reporter for the Daily Camera, our local paper. She wanted to interview Chris and me so she could write an article about this conference and she wanted to know what this whole topic of spiritual encounters in medical practice was all about. She said to me, “Tell me what you do in your practice.” So I told her. First of all, I consider myself to be, as I’ve mentioned, a very traditional physician in many ways, a very conventional, Western trained, physician. I still believe in the power and the good of Western medicine when used appropriately with patients. I also freely refer patients to other therapists involved with complimentary and alternative therapy of a variety of different modalities because I truly believe there is no one right way of taking care of people, there are many ways to take care of people. If that means that I’m going to refer a patient to see my wife for counseling or biofeedback or NLP or EMDR work or send them to a Reiki Master or an Acupuncturist, that’s what I’m going to do. Again, my bottom line is that I want to do for the patient whatever it takes to assist that person to heal themselves.

I’m also one of the medical directors of Hospice of Boulder County and one of my hospice nurses was talking to me the other day. She read the article in the newspaper and she said, “How is it that you got interested in Energy Medicine?” I thought for a minute and reflected that it was probably because

of my patients. Early on in my practice I had a number of people who came in to see me who kept telling me these wonderful stories about how they had been to see this person or that person who were masters in a particular energetic medicine type of discipline and how it had helped them considerably. I'll never forget the conversation that I had with a patient of mine a long time ago who I'd taken care of for some time and she came in to the office and at the end of our encounter I asked her how her back was doing because I'd noticed in the chart that I'd seen her for a back problem the previous year and she said, "Oh yeah, my back. What you prescribed for me didn't help at all but I went to see an acupuncturist and he really cured me." This got me really curious. I didn't know a whole lot about acupuncture at the time, other than what I'd read. I'd not experienced it personally.

I called up this guy and went to see him and had him put his needles in me and tell me what he did and why he did it and why it worked from his point of view. It just made a whole lot of sense to me and Jake and I have founded this relationship now where if I have a patient who I think would benefit from acupuncture more than what I can do I'll send them to see Jake and he sends me people who he feels need a Western approach to their particular problem.

Again I want to use anything and everything that can possibly help my patients heal themselves and this includes engaging and utilizing the power of the person's spiritual resources, their spiritual being. When I'm at my office doing my M.D. "thing" and I'm seeing patients and when I have the time and the circumstance is appropriate I'm going to explore the spiritual dimension of healing with my patients. That means if you were to come in to see me and I was going to do a complete physical exam, which means I would have an hour or more of time with you, I would go through the standard sorts of things that often happen in a M.D.'s office. Before I do the physical exam I would take a medical history so I'd ask you about your surgeries and hospitalizations and illnesses and injuries and allergies and the medicines that you're on and whether you smoke or drink, do drugs, what you eat, what your exercise program is, what your family history was and I'd write all this down in the chart. Then I'd get to your social history and I'd ask you about your marital status and kids you have and whether they lived around you and gave you emotional support. Then I'd ask you about your work. I'm always interested in what people do and I always ask the question, "If you

could do any job in the world for the same amount of money that you are earning right now would you be doing what you are doing or would you be doing something different?” Loving the work you do is really important. I love the work I do and I think this love has kept me healthy.

Now I begin to explore the spiritual dimension of the individual. My next question to them is, and I'm sitting here and they're sitting right here facing me so this is a very "looking in a person's eye" sort of encounter here, "Do you have a religious faith or spiritual practice?" Many people say, "Yes" or "No" or "Not Really" or "Yeah I'm a Catholic" or "Buddhist" or whatever it might be. Then I ask them, "Do you believe in God or a Higher Power?" Because a lot of people who don't consider that they have a religious faith or a spiritual practice do believe in God or a Higher Power. I go on. I ask them, "Do you pray?" For me it's interesting that 90% of the people that I ask these questions, in my experience, have a religious faith or spiritual practice, they believe in God or a Higher Power or the Absolute and they pray. I was struck when Jeff or Larry, yesterday, said that the figure was 90% because that mirrors my experience exactly.

The next question that I ask them is something that I don't think that people are asked about all the time by most standard brand physicians but I hope that that is changing on a daily basis. I say to them, "I don't consider myself to be a religious person. I do not belong to any organized religious group but I do believe in God, I do believe in a Higher Power." And, I do pray for my patients. If you had a major medical problem would you want me to pray for you? 90% of those 90% who have a faith or spiritual practice, who believe in God and pray say, "Yes, definitely." This has been very gratifying for me because it's often said with a great deal of conviction and they often say, "I can use all the help I can get."

Then I ask them, "Why am I asking you these questions?" If there is a blank look on their face or they don't say anything I say, "What we know is that there are a number of medical studies that show that people who have a faith or a spiritual practice (and it doesn't make any difference what that Faith is) or who believe in a Higher Power or who pray or who are prayed for tend to do better, health-wise, than people who do not."

I've had some interesting responses to these questions down through the years, as you could imagine. Just last week I had an older couple come in to see me for the first time, both for complete physical exams. They were in their late sixties. When I was examining the man, and I asked him did he want me to pray for him he said, "Yes, of course." Then he paused for moment and he said, "You know that's an interesting question, I don't think I've ever been asked that question before." Then his wife said, "Oh yes you have, two years ago when you were seeing the oncologist for your colon cancer he asked you that question." I thought, "Yes! There's someone else out there that's doing the same sort of thing, I'm not alone." And, of course I was curious as to whom that person was and it turns out that it's a colleague of mine and a friend, John Fleagle who is the Dean of Oncologists in Boulder Count. He is so highly respected by everyone. To find out that John was asking these questions—because he had consulted with them a couple of years previously about the chemotherapy that this man was going to go through—he asked them about their faith and their prayer-life, I was delighted to hear this. I hadn't known that about John previously.

Well, I suspect that currently not a majority of physicians ask these sorts of things. I'm talking about standard brand conventional doctors. I think that not a majority of them ask these questions but I also suspect that the number is growing. The Daily Camera reporter then asked me, "Has anyone ever been offended by these questions?" I had to say, "Not to my knowledge. I've never had anyone come back to me and say, 'What you said made me feel awkward or angry or offended me; I've not had that once.'" People don't always come back and give you the truth but I think after twenty-one years of practice in the same place I would have heard something to that effect. I've had people when I've asked them that question, "Do you want me to pray for you?," say, "No" or "I don't think so" or "If it would make you feel better." I always appreciate that. Or, "If you want to." I had someone say to me that they didn't think it would be fair if I prayed for them. I had to think about that one for a while. Last week for the first time, I had a young man in the office and I was doing his physical and when I asked him that question he said, "That's not what I'm coming in to you for." I pondered that and wondered if he thought that I was going to take our valuable time together, to get down on my knees at that point and start praying. I don't do that. My prayer work is done as I'm driving to and from work

when I have twenty-five minutes of uninterrupted time to have my communication with God. I usually do my prayer work when I am talking with God, out loud. There's something about it vibrating through my body that just makes it more real for me. And, there are times when I just listen, too.

Lisa went on to ask me, "Do you think having this discussion with your patients helps them?" My gut feeling is YES! We know that there are studies out there, surveys of patients that have been done that show that not only do people have a faith or religious practice but they want their physicians to know about it, a huge majority of them do, and they would like their physicians to ask them about their faith, to have a discussion with them about it, that's what the surveys show.

Let me ask you some questions now, this is the time for audience participation, so everyone pay attention, this is a quiz. How many of you here, please raise your hands, believe that prayer, either yours or someone else's, has a beneficial effect on one's health? Almost the entire room.

How many of you here have had an M.D. physician, your traditional physician ask you if you had a religious faith or spiritual practice or believed in God or a Higher Power of if you prayed? Raise your hand. Only a handful.

How many of you here have had your traditional M.D. ask you if you wanted him or her to pray for you? Less than ten people.

Here's the big one. How many of you would want your physician, your traditional M.D. physician, in addition to being the best physician they could be with you in the full sense of that word bringing all of their expertise and wisdom and knowledge to bear upon the solution of their problem in assisting you to help yourself, how many of you would want that person to pray for you and your health? Interesting, the whole group again.

Doctors do have a lot of power in many ways and they have a lot of skills but to my knowledge, except for people like Barbara Brennan, most M.D. physicians are not able to read people's minds so my suggestion to us all is that when we go in to see our physician next, if we really want to be prayed for, that we would gently at the end of our encounter with them ask them, "Would

you be willing to say a prayer for me at some point? Would you in the course of your day be willing to pray for me and my health and my healing process?" If we don't ask for what we want, we won't get it. You might even suggest to them, "Hey, you have to drive to the hospital or to the office in the morning. If so inclined you might say a prayer for me and for the rest of your patients at that time." I'd like us to put the seeds of this concept into the minds of our physicians. I think many of the physicians would welcome that and it would be the little boost that they need to start doing that, or to acknowledge it with their patients.

Lisa went on to ask me, "Do you think other physicians in Boulder are doing this sort of thing?" I said, "I really don't know." But it piqued my curiosity and I resolved to do a little informal survey in my office. Remember I said there are six Family Practice physicians, three men and three women and by the way one of the men was here yesterday and I think he's probably here today and one of the women was here yesterday, too, which delighted me. When I had the chance last week I had this conversation with one of the women who I considered to be one of our more receptive and sensitive female physicians and I just stuck my head in her door as she was sitting in her office and I said, "Just out of curiosity do you ever talk to your patients about their religious faith or spiritual practice? Or do you ever ask them if they pray or believe in a Higher Power?" Immediately she said, "No I don't, but I know you do and I'm really interested in this whole area. Could you tell me what you do?" Fortunately it was lunch time and I went in and sat down and I went through with her what I do, the questions that I ask and some of the responses that I've gotten and it was like she had a real thirst for this sort of information and at the conclusion of the conversation she thanked me for this and I got the impression that she was going to use that information.

It was just such a conversation that I had several years ago with another health-care provider that propelled me into starting to explore spirituality with my patients and in medical practice. That healer with me was none other than my wife, Chris. Out of the conversation that she had with me I gained the courage to start asking these questions. I didn't have the courage to do that previously and I certainly wouldn't have had in medical school. Times are changing. But, it took that conversation and her relating to me what she did

with her patients and the rewards and what happened when she did that, which allowed me to start taking that step with my patients. Thank you, very much for that gentle but very firm nudge.

Now the truth of the matter is that more and more medical articles about spirituality and weaving spirituality into one's medical practice are appearing in the mainstream medical journals of this country like the New England Journal of Medicine, the Journal of the American Medical Association, the Archives of Internal Medicine, etc. and so what's happening is mainstream physicians are becoming more and more aware of this whole area and the possibilities of doing this and I suspect more and more are therefore having the circumstance become right for them to move into this area. At least I hope so.

I continued my survey with one other person in our office who is a man who had just joined our practice. He came in to our practice with the reputation of being rather a holistic physician and a caring person and I said, "Paul, do you ever do this sort of thing, ask about religion or spirituality or prayer and so on." He said, "Yeah, I try to do that all the time. I even have a place in my charts where I mark this down." And again, I'm thinking 'yes, there's someone else out there who's doing this!' So, that was three out of our six physicians in the office who either try to do this on a routine basis or perhaps intend to do this.

Our reporter friend asked me one more question, "Do you think there is a growing trend in Boulder or in the Country for physicians to incorporate spirituality into their medical practices?" I had to answer for Boulder only because I'm not that familiar with the rest of the country (other than what I read) by telling her this story. It just happened a couple of weeks ago. I was in the operating room at Boulder Community Hospital just a mile from here assisting on surgery on a person who is both a patient of mine and a close friend of ours. This is a person who is a very religious person and a very deeply spiritual person at the same time. This was a pretty serious operation. It was one of those high-risk, high-gain elective surgeries that if everything went well he could benefit from it quite a bit but there are substantial problems that might develop whereby he could die on the operating-room table or in the post-operative period. So, my friend at some point asked me if I would hold

the space for him spiritually in the operating room. And you all know what that means in terms of focusing love and intention for a good outcome to take place there. He also asked me if I would say certain affirmations for him both as he was being put to sleep and as he was coming out of anesthesia and he gave me a sheet of paper with these affirmations on it and the affirmation that I was to say when he was being put to sleep was, “You will be safe and comfortable during the surgery and you will recover fully.” Or something to that effect if I remember it correctly.

So, imagine this setting. Here I am in this operating room. There’s the table, there’s our friend, my patient, who I love dearly lying there, face-up not yet asleep. The two big lights overhead that you sort of adjust to get the correct light in the surgery that you’re doing. The walls are glass cabinets with every conceivable instrument or piece of equipment that you need for any kind of surgery. We’ve got three nurses who are going around setting-up the trays that we’re going to need to do this surgery, one of them is masked, capped and gowned and the two main surgeons are outside of the room, Charlie Jones who I consider to be the best surgeon in this county who has operated on me twice personally and Kilson Koh. The anesthesiologist is sitting at the head of the patient as they usually do, and this big bank of anesthesia machines are there. The anesthesiologist, Tom Chalmers is about to put my friend to sleep so I walk over to Tom with my sheet of affirmations and say, “Tom, help me out with these affirmations.” I’m wondering a little bit what’s going to happen here, how he is going to react. Without missing a beat, Tom says, “Sure, let’s see what you’ve got here.” Looks at the sheet as if this is standard protocol for putting a person to sleep in this day and age and as if he’s done it a hundred thousand times before. I was floored.

So, while Tom is injecting the medication intravenously which puts the person to sleep just a little bit so you can get that endotracheal tube in and get the gas machine hooked-up, I start to recite these affirmations, “You will feel safe and comfortable during this surgery and you will recover fully.” I’m doing this out loud, I’m supposed to do it at least five times, I repeat it again and then Tom joins in with me, “You will feel safe and comfortable during this surgery and you will recover fully.” That’s a good start.

As per the patient’s request he also had a tape recorder. We put these little ear plugs in his ears, Tom taped them in to keep them in place, attached to

his tape recorder which slipped under the pillow. The tape recorder had recorded in the patient's own words, a prayer which Moses had said to God many years ago concerning the healing of his sister. The patient listened to this tape throughout the two hours of his surgery.

Twenty-one years ago this month when I first started operating at Boulder Community Hospital that sort of thing was unheard of. No one, I mean no one, said affirmations for their patients while they were being induced under general anesthesia. Here was Tom acting as if this was standard practice and not feeling at all awkward in front of me or the other three nurses that were there.

Soon Charlie and Kilson and I had scrubbed and put on our gowns and our caps and our gloves, and we're in there at the operating room table and we're operating on this guy and so we are "deep in his belly" as the saying goes and Charlie asked me to tell him something about the religious and spiritual background of this person. He says, "Dave, tell us about this man and his religious background." Now you can operate and talk at the same time. I promise you, we were paying attention to what we were doing. Charlie had been told about this man and his religious and spiritual background and he was genuinely interested because of the things he had learned that this man wanted to have happen both before, during and after the surgery of a spiritual preparatory nature and so he asked me this question and I told him as much as I knew about his background and then I told him that literally as we were operating there were hundreds if not thousands of people all around the nation and the world who were praying for this man and who were praying for us as the operating team. This man was very well-known. He had extensive friends throughout this country and throughout the world and by word of mouth and by email and probably by Jeff Levin's mother's prayer group they had been contacted and were praying for us at that time.

So, for this brief moment there was this sort of realization as we looked at each other that there were a whole lot of people who were focusing on what we were doing and upon this man at that time. It was a very wonderful moment during that surgery.

When I finished telling him as much as I knew about this man I thought it would be appropriate to say something in Hebrew since this patient was Jewish

so I recited the only Hebrew I knew which is a blessing and, apologies to those of you who speak Hebrew, it goes something like Barukh, Attah, Ah-Do-Noy. . . and as I was about to go on with that blessing, Emily, this young OR nurse who is standing over my right shoulder gowned and capped and gloved passing us instruments to do the surgery, joins in with me with the rest of the prayer. Elo-Hay-Nu, Malekh, Ha'olam and so on, and I was stunned and thrilled and I turned to her and I said, "Emily are you Jewish?" She said, "No, but I know some Hebrew." And not only that, it had been her experience that with the people that she worked with that Faith really did make a difference in their healing process and since she'd had a chance to work down at National Jewish Hospital, in Denver, had worked with a lot of Jewish people, she had learned this Hebrew.

It was this wonderful coming together in that moment of word, intention, and deed, to assist this man during this major surgery, and I wish all of you could have been there just seeing and feeling the energy in the room and the presence that was there at that time. It was truly amazing, and it was an amazing moment for all of us.

Iwant to tell you that that surgery went incredibly well. Everything that could possibly go right went right. All the things that could have gone wrong did not go wrong. I mean, it was one of those times where you were saying to yourself, "This is too good to be true." But, it happened that way, in large part to the skill of the two major surgeons there, but I have a feeling in large part because of all the rest of what was happening in terms of the intention, the prayer, the presence. God was in that room with us. Throughout the rest of that surgery I kept talking to the patient out loud telling him that he was doing great, that the surgery was going fine and that everything was going to be wonderful.

This type of "practiced spirituality" in the operating room is something that is new and is happening more and more all the time and the fact that all the operating room personnel were so in tune with allowing this to happen and in facilitating it to happen is, I think, an indication of the changing times we live in and the fact that more and more people want there to be a partnership with their physicians bringing spirituality into the healing process whether it's in the office or the operating room or wherever that might be.

That was my long-winded answer to this reporter's question. If any of you have to face elective surgery, this sort of experience is available to all of us if we will just take it on to set it up for ourselves.

I want to shift gears for just a moment and conclude this talk by telling you about something else Chris and I do in our office that often allows for spiritual encounters and great personal dividend to our patients. We use a document called that Patient/Family/Physician Guide which is an advanced medical directive which my wife and I created several years ago to give to our elder patients or to anyone who wants to prepare for end of life decisions. There are copies of this in a box at the back of the room, there are not enough for everyone but you are welcome to have them. It says copyright on it. Please take it, reproduce it for your friends and family even though it says copyright on it. If there are not enough, contact us.

There are several unique features to this Guide. One is that the entire family is invited to make these end of life decisions not just the patient, which pretty much forces everyone to be in agreement with what the person will want to have happen to them as they are going through the dying process, and, more importantly, what they don't want to have happen to them. Number two, not only the patient but the entire family is asked to sign this document which then hopefully avoids some of the legal hassles that have happened in the past. Number three, there is a part of this document which encourages the patient to harvest their life and to pass this wisdom on to their family and friends. Harvesting is a process where you look back at your life and you reflect upon what was really meaningful, what was really of value, what really stands out that you would like to pass on to future generations, to your family and friends. When they remember you, what is it that you would want to be remembered for. We have them do this by either writing an autobiography or writing about a time in their life which was significant to them, had great meaning for them, or writing a list of values that they want their family, their kids, to live by or writing letters to each member of their family and saying, "I appreciate you so much and I love you so much for who you are." These are some of the suggestions. That's what we mean by harvesting.

I want to tell you a story about this Guide. This is the story of a patient of mine who I had taken care of for a number of years who was in her mid-

eighties. One day, out of the blue, this woman comes in to see me and she states that she did not want to live any longer, there was no longer any purpose or meaning to her life, that she wanted to die now and quickly and peacefully and she wanted me to give her some pills to help that happen. Well, I mean, I was speechless and I'm not often speechless, my mind is whirling thinking of how I'm going to handle this problem. Fortunately, I had just finished reading a book called *From Age-ing to Sage-ing* by Zalman Schacter Shalomi which talks about this harvesting process in great detail.¹ Fortunately Chris and I had just finished completing our Patient/Family/Physician Guide. We had it printed up and I had a copy in my office so I gave her my copy of this book *From Age-ing to Sage-ing* and a copy of the guide and I said, "Alice, I want you to read this entire book and I want you to fill-out this form with your family and then come back and see me in a week and if you still are desirous of ending your life we'll talk about it at that time, but please do me that favor and read this first." She came back to me a week later having read the book cover to cover, and having filled-out the guide with her family and this process had changed her life. She was alive, vibrant, joyful, radiant and she told me what had happened as she was reading this book.

It turns out that she had been an Army nurse all of her life. During W.W.II at the age of 39 she was in the invasion of Normandy, landing behind the first wave of infantrymen as they stormed ashore on the beaches of Normandy. It was her job to set-up the first field hospital, ever, on Normandy and get it up and running. She realized what an extraordinary experience that had been, what a profound and meaningful experience that had been and she also recognized she had never shared this experience with anyone in her family, ever. So, she came back to me saying not only did she not want to die but she wanted to put these reflections down on paper realizing of what great value they were. Within two months she came back to see me and she had enough material for a book which recounted in great detail her experiences in Normandy, the lives that were saved and the young teenage boys who died in her arms on the battlefield. It was truly fascinating and horrifying at the same time. She remained a happy, upbeat person for as long as I knew her after that, living with the sense of accomplishment and achievement and she died peacefully in her sleep in her late eighties or early nineties. This was a person who was motivated to look inward and to connect with that spiritual side of herself which had said to her, "You have experienced something which is unique,

extraordinary, profound and you must share this with other people.” That’s exactly what she did.

In summary I want to emphasize, people, patients that we all deal with, most of them do have a Faith or a spiritual practice, they do believe in God, they do believe in a Higher Power, they pray, and this spiritual dimension is important to them, and they want their healthcare providers to know about it and to ask them about it.

I believe it is important for us whether we are physicians or whatever our therapy modality is, if we are dealing with people and if we have a spiritual life of our own, and particularly if we pray for our patients, I believe it is helpful if we share that fact with those people, that they know that they are being prayed for. More and more physicians, as I said, are learning about spirituality and about weaving it into their medical practices, and I believe that we will see more and more of that continuing to happen. Finally what we know is that people who have a religious faith no matter what that is, or a spiritual practice, who believe in God, or a Higher Power, who pray, and who are prayed for, tend to do better health wise.

Read Jeff Levin’s book.² Thank you very much!

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REFERENCES & NOTES

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