

WHAT IS THE HEALTHCARE VALUE OF PARTICIPATING IN A FAITH COMMUNITY AND OF PRAYER?

Does worship attendance and prayer play a role in speeding recovery from emotional and physical maladies?

SOUTHERN MEDICAL JOURNAL [Vol 81, No.7 (July 1988) 826-29] published an impressive study by cardiologist Randolph Byrd at the coronary care unit at San Francisco General Hospital with 393 patients over a 10-month period. A computer assigned all of the patients to either a group that was prayed for by Christian home prayer groups (192 patients) or to a group that was not remembered in prayer (201 patients) It was a randomized, double blind experiment in which neither the patients, nurses, nor doctors knew which group the patients were in.

The prayer groups recruited were given the first names of their patients as well as a brief description of their diagnosis and condition. They were asked to pray each day, but were given no instructions on how to pray. Each person prayed for many different patients, but each patient in the experiment had between five and seven people praying for him or her.

The prayed-for patients differed from the non-prayed for patients in the following ways.

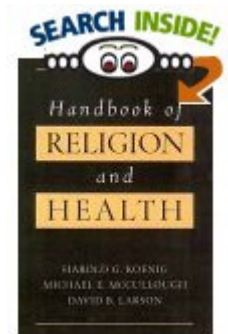
1. They were five times less likely to require antibiotics.
2. They were three times less likely to develop pulmonary edema.
3. None of the prayed-for group required an artificial airway inserted in the throat and attached to a mechanical ventilator, while twelve of the non-prayed for group required this support.
4. Fewer patients in the prayed-for group had cardiac arrests and fewer died.

DUKE UNIVERSITY MEDICAL CENTER

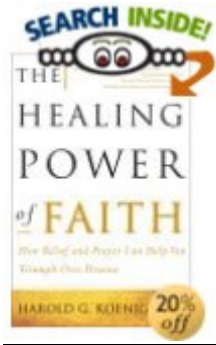
- A study of nearly 4,000 elderly (age 64 to 101) North Carolinians has found that those who attended religious services every week were 46 percent less likely to die over a six-year period than people who attended less often or not at all. After controlling for factors that could influence death rates - such as medical illnesses, depression, social connections, health practices and demographics - the frequent religious attenders were still 28 percent less likely to die than others in the study. Duke psychiatrist Dr. Harold Koenig said, "The size of the effect was so strong that it was equal to that of not smoking cigarettes."
<http://dukemednews.duke.edu/global/print.php?id=359>

The study was published in the July/August 1999 issue of Journal of Gerontology, medical sciences edition.

- Harold Koenig, M.D., MHSc is board certified in geriatric psychiatry and geriatric medicine and serves on Duke University's faculty as associate professor of Psychiatry and of Medicine. He is director and founder of the Center for the Study of Religion/Spirituality and Health at Duke University. Koenig is editor of the International Journal of Psychiatry in Medicine, a research journal, and founder and editor-in-chief of Research News & Opportunities in Science and Theology, a monthly international newspaper. Koenig has published more than 140 scientific articles and 14 books.
- Koenig's books include Handbook of Religion and Health. It reviews and discusses the extensive research on the relationships between religion and a variety of mental and physical health outcomes, including depression, anxiety, heart disease, hypertension, stroke, cancer, and immune system dysfunction. Critiques 1,200 separate studies and ranks them according to their methodology and results.
- Another Koenig book is The



Healing Power of Faith: Science Explores Medicine's Last Great Frontier.



Duke University Studies have shown the following”

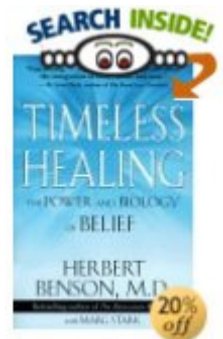
- **Studies relating to physical health.** Greater religious involvement has been associated with lower blood pressure, fewer strokes, lower rates of death from heart disease, lower mortality after heart surgery, and longer survival in general.
- **Studies relating to mental health.** People who are more religious experience greater well-being and life satisfaction, less depression, less anxiety, and are much less likely to commit suicide. Therapies for depression and anxiety that incorporate religious beliefs in treatment result in faster recovery from illness than do traditional therapies. (Example AMERICAN JOURNAL OF PSYCHIATRY, April 1998: 155(4):536-542)
- **Cost-benefit studies.** Heart-surgery patients who are religious have 20 percent shorter post-operative hospital stays than nonreligious patients (1987). Hospital stays are nearly 2-1/2 times longer for older patients who don't have a religious affiliation (1997). Heart-surgery patients assigned chaplain intervention showed an average two days shorter length of stay, or about \$4,200 cost savings per patient (1995).

HARVARD MEDICAL SCHOOL

- Holds a Classes on Spirituality and Healing in Medicine. Central to the lectures is the thought that prayer and a patient's mental attitude can help in healing and that doctors should consider more than patient's physical symptoms in treating disease.
- Herbert Benson, M.D., is the founding President of the Mind/Body Medical Institute and the Mind/Body Medical Institute Associate Professor of

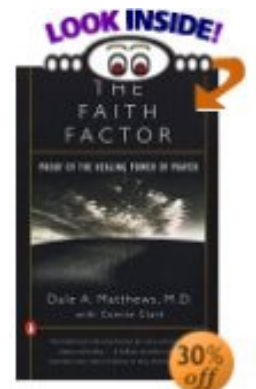
Medicine, Harvard Medical School. He says we were “wired for God” and affirms belief in “a higher power” makes an important contribution to our physical health. He is the author or co-author of more than 170 scientific publications and the following books:

- *The Relaxation Response*, 1975
- *The Mind/Body Effect*, 1979;
- *The Wellness Book*, 1992;
- *Timeless Healing: The Power and Biology of Belief*, 1996, and
- *The Breakout Principle*, 2003



GEORGETOWN MEDICAL SCHOOL

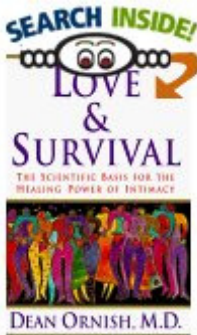
- Professor Dr Dale A. Matthews's says “I think this is a historic time, the spiritual traditions of healing will be joined with surgery and pharmaceuticals. I think we're entering the era of prayer and Prozac.” At the annual meeting of the American Association for the Advancement of Science, he presented a review of 212 studies and concluded that three-fourths showed a positive effect of religious commitment on health.
- The Need For A Spiritual Program. Dr. Dale Matthews in his book The Faith Factor (page 186), quotes epidemiologist Jeffrey Levin that the “frequency of worship-service attendance is the bellwether religious variable, the one that has been shown most often to have a pronounced impact on the health of patients in the studies.”
- Dr Matthew's book includes four chapters on spirituality, “Developing A Spiritual Program”, “Prayer”, “The Riches of The Bible”, and “Spiritual Community.”



HEALING POWER OF INTIMACY

“Our survival depends on the healing power of love, intimacy, and relationships. ...I am not aware of any other

factor in medicine - not diet, not smoking, not exercise, not stress, not genetics, not drugs, not surgery - that has a greater impact on our quality of life, incidence of illness, and premature death from all causes. ...Whatever promotes isolation, separation, loneliness, loss, hostility, anger, cynicism, depression, alienation, etc.. often leads of illness and suffering. Anything that promotes love with intimacy, connection, and community is healing. Loneliness hurts. Intimacy and community matter.” -Dr. Dean Ornish MD



The notes to chapter two cite 120 studies!

The Harvard Mastery of Stress Study

Russek & Schwartz have done a number very important of 35 year follow studies

- Perceptions of parental caring predict health status in midlife: a 35-year follow-up of the Harvard Mastery of stress? *Psychosomatic Medicine*, 1997, 59(2):144-49
- Narrative descriptions of parental love and caring predict health status in midlife” *Alternative Therapies in Health and Medicine*, 1996, 2:55-62

An amazing 91% of participants who did not perceive themselves to have had a warm relationship with their mothers 35 years earlier had serious diagnosed diseases in midlife (Including coronary artery disease, high blood pressure, duodenal ulcer, and alcoholism), as compared with only 45% of those who perceived themselves to have had a warm relationship. All (100%) of the participants who rated both their mothers and fathers low in warmth and closeness 35 years earlier had diseases diagnosed in midlife.

THE JOHN HOPKINS STUDY

In the 1940's over 1,100 male students were tested for “Closeness to Parents” and have

been followed. Those who later developed cancer were more likely to have described a lack of closeness to their parents than their healthy classmates.

The predictive value of this test did not diminish over time and was not explained by other known risk factors such as smoking, drinking, or radiation exposure. The best predictor of any of the factors about who would get cancer decades later was the closeness of father-son relationships earlier in life.

John Hopkins Medical Journal, 1974, 134:251
Journal of Behavioral Medicine, 1982, 5(2):143-63

CONCLUSIONS

1. The people that frequently attend a faith community...
 - Have greater social networks and therefore greater social support.
 - Worship, adoration and prayer help participants cope with stress and illnesses and therefore contribute to mental well-being, help prevent depression and aid greater immune function.
 - People who cope well are less likely to drink excessively, smoke, or engage in harmful health habits.
2. Prayer speeds return to health.
3. Churches that promote marriage/family health and teach loving parenting skills will promote health for decades to come.