

LETTERS

Richard Scott's article 'Good news in the Surgery' (Triple Helix 2002; Spring: 6-7) prompted an article by Derren Hayes in both Doctor and Hospital Doctor magazines on 2 May 2002.

Hayes' 'Working Practices' piece began by saying that the *Triple Helix* article had prompted the BMA to warn doctors not to abuse their position of trust by forcing their own religious beliefs onto patients. But Dr Michael Wilks, chairman of the BMA Ethics Committee, also said that an element of 'spiritual' healing could help recovery if introduced in a sensitive way. 'The key to this is to tap into patients' own values. It's inappropriate to impose a moral or religious view onto somebody who doesn't share it.'

Hayes conceded that there are no rules preventing doctors discussing religion with patients, but added that 'under GMC guidelines if a doctor has a belief that can affect the way a patient is treated, the patient should be passed on to a colleague'.

Dr Emma Sedgwick, medico-legal adviser at the Medical Defence Union, said doctors needed to use judgement when deciding if it was appropriate to ask patients about their religion.

'Some doctors have strong beliefs and part of that is to spread the word, but they are in a privileged position and need to be aware their primary role is to treat people as necessary.' She added that doctors would 'ultimately be judged by the GMC'.

Subsequently Doctor printed several letters, extracts of which are reproduced here with permission.

Sheffield GP Graham McAll commented:

A God-fearing doctor will believe that the patient is made in God's image, belongs to God and is uniquely precious.

Being made in God's image means that the patient has God-given autonomy and responsibility which the doctor must respect.

So forcing religion on a patient suggests to me a lack of belief. Furthermore, a God-fearing doctor will believe that he or she will one day have to give account to God Almighty – an even more awesome and ultimate prospect than a GMC hearing!

Surely a lack of personal belief on the part of the doctor is more likely to prejudice patient care – because why else would we consider valuing people equally?

Isle of Harris GP James Finlayson said:

It was unfair and disingenuous to imply that an article in the Christian doctors' magazine *Triple Helix* encouraged doctors to 'preach' and 'force' Christian religious beliefs on their patients...

I cannot be the only doctor who finds it ironic that it is considered quite appropriate to encourage patients to use instruments such as yoga – derived from eastern religions – while it is completely forbidden to point our patients towards Christian help.

GP Registrar Sarah Tregaskes of Bethnal Green, London added:

The article in *Triple Helix* mentioned the possibility of referring to Alpha groups, which are social evenings during which there is the opportunity for people to ask questions about Christian beliefs. It was stressed that our attitude should be one of 'gentleness and respect'.

I agree that doctors are 'in a privileged position and need to be aware their primary role is to treat people as necessary'.

Sometimes this includes referring to organisations that can offer support. If the only support available is from a group with religious beliefs, is it wrong to inform the patient that this exists?

Coventry GP Tony Feltbower remarked:

It is quite natural and good practice to ask depressed patients what other means of counselling or support they might have, such as through a church or other faith, and also to comment on any symbol they might be wearing...

We should not be afraid to suggest that faith can be important in a person's well-being or ill-being, especially when discussed as part of a routine history taking.

Clearly, it is inappropriate to focus on religious issues to the exclusion of other therapies, or if a patient rejects such issues.

It is, however, appropriate to refer patients on to other agencies (as required in our terms of service). Even if referred, a patient has the choice whether to attend or not.

Dr Diana Lowry, a GP in Essex wrote:

... patients come to me for medicine, not preaching. I can help them best by listening to them, caring and even sharing their suffering... If we were to start such discussions and they did not prove fruitful, the patient would find it hard

to come and see me as a doctor, frightened that I may start to question how their beliefs had 'progressed'.

Having said that, I have been discussing with the local rector whether a priest might do a surgery in our practice building to meet spiritual needs.

CMF General Secretary Peter Saunders wrote:

While doctors must never abuse their position of trust by 'forcing religious beliefs on patients', the GMC itself (*Annual Report*, 1993) rightly takes the view that they are free to express personal religious views to patients as long as they do so in a way that is not 'inappropriate and insensitive'.

A recent major review¹ has concluded that Christian faith confers 'longer life, less illness, better physical and mental health, more marital stability, less divorce, less suicide and less abuse of alcohol and other substances'.

Such information should not be withheld from patients who might benefit from hearing it.

1. Chamberlain T, Hall C. *Realized Religion: Research on the Relationship between Religion and Health*. Templeton Foundation Press, Philadelphia and London, 2000.

Peter Armon, CMF Overseas Support Secretary, wrote to Triple Helix:

Almost as an aside Richard makes the comment that 'having prayed for discernment and his words at the beginning of the clinic, God speaks quietly to us about whom to present the Gospel to'. Surely that is the key that will settle this controversy... we need to ask for opportunities, for discernment when (not if) to speak and to whom, and for an appropriate word to give and we need to do so at the beginning of the day. We may find we have less regrets at the end of the day if we made it a regular habit.

Doctors are indeed, as Richard says, 'in a position second to none to reach the lost' and Paul (2 Timothy 4:1) reminds us that we should take every opportunity to do so. While not abusing our position we should seek and use God given opportunities. Carpe Diem. Richard quotes the prayer of Jabez (1 Chronicles 4:10). We also read that God honoured Jabez's prayer and he will honour ours – if we take the time to do so.'

See also 'Lessons in Spiritual History Taking' (p17)