# medicine and 'The Whole Man'

D Martyn Lloyd-Jones MD MRCP

## The Doctor

artyn Lloyd-Jones was one of the most influential preachers of the 20th century. Born in Wales in 1899, he went on to study medicine at Barts, and then to get his MD and MRCP. But at the age of 27 'The Doctor' left medicine and returned to Wales to pastor a small church. Ten years later he was called to Westminster Chapel in London. His preaching was described as 'logic on fire': thorough exposition of God's Word in the power of God's Spirit. Through his many published sermons, Lloyd-Jones continues to shape preachers and teachers today.

He also spoke at CMF events, and the transcripts of these were often published in CMF's journal, *In the Service of Medicine*. The article we've reproduced here came from an address he gave at the CMF breakfast at the BMA annual meeting in 1956.

Though more than 50 years old, it is still relevant; crucially so. He addresses the issues of 'whole person medicine' and spiritual care, which are also encouraged increasingly by our contemporary medical schools, postgraduate colleges and the NHS. The problem is that they usually mean something very different from what Christians mean. Lloyd-Jones' response is scalpel-sharp; no word is wasted, there is no ambiguity. Only Jesus deals with the whole person. Faith makes us whole.

This article is somewhat different from what we're used to in *Nucleus*. It's not written in 21st century studentese. We might be more used to the phrase 'whole person' than 'whole man'; he means exactly the same thing. We have a tendency to use 'psycho-somatic' in a slightly disparaging way; he uses it correctly to mean 'mind and body'. We're used to being spoon-fed; Lloyd-Jones will make you think. Spend time on this article; it's not an easy read but it will be so worth the effort.

Giles Cattermole is CMF Head of Student Ministries





Being the substance of an address given at the Annual Breakfast of the CMF, during the BMA Annual Meeting, Brighton, 12 July 1956.

new phrase has become increasingly common in current medical literature. We are reminded that we must no longer think in the old departmental terms, but that we must more and more learn to treat 'the whole man'. Yet this phrase may mean little or it may mean much. It depends upon its context and the occasion on which it is used. In the majority of instances, however, one fears that it is just one more expression of that loose and sentimental thinking, which has become so characteristic of the present time.

We are all familiar with the prevailing vagueness and looseness of speech. There will be no need for illustration. It is simply the outcome of those fashions in education and those subtle changes which, in the interests of self-expression, have allowed many young people to grow up with no feeling for accurate definition nor appreciation of sound principle. Whilst there may be a credit side to this, in that some of the older dogmatic instruction allowed little room for self-expression, many would contend that the gains have been at too great a cost. So much so that wherever we look in Church or State we find vague sentimental thinking which would have appalled our forefathers. Consider for instance the correspondence in the daily newspapers at the height of the discussions concerning the abolition of capital punishment. For every letter which sought in a judicial manner to weigh up

the facts and to consider the great principles which are involved in such a decision, there were numbers of others which, no matter how attractively they were expressed, consisted in little more than emotion or prejudice on one side or the other. In all aspects of our national life we need to rediscover the sound guiding lines which were widely followed in the greatest hours of our history. In spite of all the achievements of painstaking research and new treatments, Medicine itself stands equally in need of a reconsideration of its first principles.

#### the whole man

Let us look, for example, at this phrase 'the whole man'. How are we to define it? What do we mean by the word 'whole'? The department of psychosomatic medicine has popularised the phrase, but it has not adequately described it. Originally, at least, the phrase 'the whole man' appears to have been introduced from Christian sources and notably from the literature of medical missions. But here again there does not seem to have been adequate thought given to the implications of the phrase nor to the alteration of meaning which occurred as soon as it was removed from its original setting. As soon as we look into the matter, the first surprise which must come to all of us is the realisation of the ease with which we accept such phrases and build upon them, imagining that both we and those to whom we speak know precisely what is meant. In what follows, I wish to call for closer scrutiny of this phrase. I would also seriously suggest that, of all available sources, we have the best definition of it in the Christian Gospels. Our Lord is constantly described as making those who came to him 'perfectly whole' and the contexts in which such facts are recorded suggest that the statements were more than justified.

Perhaps the best account of this matter is found in Luke 17:12-19 (KJV).

'And as he entered into a certain village, there met him ten men that were lepers, which stood afar off: And they lifted up their voices, and said, Jesus, Master, have mercy on us. And when he saw them, he said unto them, Go shew yourselves unto the priests. And it came to pass, that, as they went, they were cleansed. And one of them, when he saw that he was healed, turned back, and with a loud voice glorified God, And fell down on his face at his feet, giving him thanks: and he was a Samaritan. And Jesus answering said, Were there not ten cleansed? but where are the nine? There are not found that returned to give glory to God, save this stranger. And he said unto him, Arise, go thy way: thy faith hath made thee whole.'

in spite of all the achievements of painstaking research and new treatments, Medicine itself stands equally in need of a reconsideration of its first principles

Let us proceed at once to the important point of the statement. Ten men were cured of their leprosy, but only one of them turned back, recognising the divine source of the healing powers, and gave thanks to the Benefactor. There is more than an element of irony in the two asides - 'and he was a Samaritan' ... 'save this stranger'. That is, the grateful patient was a foreigner, deriving from a race which was despised and disliked by the Jews. It is only this single sufferer that our Lord declares to have been made 'whole'. A distinction is made between the nine and the one. It is true to what the Bible means when it speaks of a man as having been made 'whole'.

# psycho-somatic medicine

I do not overlook the fact that through numerous articles in the Medical Journals, the Profession as a whole has been made aware of much that it overlooked during the course of the development of scientific research and its application in various forms of modern treatment. Though there may still be, in some branches of Medicine, workers who are hidebound in their departmentalisms, and their materialist philosophies, there are few who have not given some thought to the claims of psycho-somatic medicine. Most doctors. however little they may adjust themselves practically to it, make theoretical allowances for the subjective, psychological and the spiritual in treating their patients. Yet it would be premature to be too optimistic. For occasional stories from the out-patients' departments and, also, the wards of well-known hospitals, make it clear how easy it is for all of us to use appropriate phrases and neglect their obvious implications. The busy practitioner has scarcely been more than mildly interested. though in his case there are compensating factors. Fortunately, long experience of contact with suffering, interest in persons as persons, and the frequent necessity to take into consideration the situation of the whole family - all unconsciously predispose to an adoption of the psycho-somatic approach.

Yet when all is said and done, is psychosomatic medicine itself a fully adequate response to what is basically required? Is it not itself another of those partial views which have been made to do duty for the whole? Is its application greatly in advance of the other attitudes which have done duty during the development of anthropology? Again and again definitions of the nature of man have been

given, which on further examination prove to be too narrowly based. The Communist, for example, controlled by his philosophy of dialectical materialism, reduces man to a pawn of economics and politics. Other types of philosophy have isolated him as a piece of pure intellect, with the addition of a comforting doctrine that all he needs in order to emerge from his predicament is more and more education. Coming nearer home, the biologist concentrates on man's structure, abilities, movements, ductless glands and the functional balance of forces which enables the living organism to carry out an ordered existence. Even Medicine itself is guilty of a very partial view. For over a hundred years morbid pathology has tended to dominate the picture. and whilst normal physiology has done something to redress the balance, yet in

is psychosomatic medicine itself a fully adequate response to what is basically required?

general the abnormal has come to distort the perspective. So now it is the turn of the advocates of the psycho-somatic. 'Yes', they say, 'it is true that we have erred. We must cease to regard a patient as one who must be investigated like a biological specimen. We must take a bigger view. We must - in addition to our doctors and nurses - have cohorts of therapists trained in every form of assistance. We must treat the whole man.'

But, even here again, are they not already tending to slip into the same error of falling short in their concept of man? When they have taken account, and rightly so, of all the subjective factors which may influence the



condition of the patient, his psychology and the environment in which he lives his life, is not their view still too limited?

It cannot be emphasised too much that every view of man which omits from its consideration such a major factor as man's relationship with God, is doomed to partial measures. It can never fully and finally solve the crucial problem which lies at the root of humanity's unrest and 'dis-ease'. There is a major element in the very nature of man, which can be catered for in one way, and only in one way. As Augustine said: 'Thou hast made us for Thyself, and our heart is restless until it finds its rest in Thee.' In other words, we can add together all the partial views which have ever been held and still not get a true picture of man, if this basic fact be overlooked. The truth is that man was originally made in the image of God. He is not a mere animal. He reflects the nature of the Eternal Being. He possesses self-consciousness and the power of self-criticism. His aspirations are in the last analysis not directed towards this world, but towards the world to come. Something within man continually calls for what is bigger and beyond himself. He was made for companionship with God and he cannot function properly until he is in true correspondence with his Maker.

## the scope of medical practice

It therefore follows, if what we have so far said is true, that we must ask: Can Medicine in itself deal with the whole man? Can it as such, and by itself, ever do so? In any case, is it within the province of Medicine to attempt such a thing? Is Medicine able to function so as to ensure that mankind will function harmoniously in society? Is it able to reduce to order all those things which interfere with, and vitiate man's

life? Surely, the practice of Medicine was never intended nor equipped for such a function. Nor was it designed to uncover and to treat the evils gnawing at the heart of mankind. It cannot satisfy deep aspirations of the individual which are due to his very make-up and are accentuated by his estrangement from his Maker. Psychotherapy is no final answer. It may do much to help in restoring normal function to the mechanisms of the mind, but it cannot impart that positive addition for which each person's heart craves. Yet, without taking into consideration, and dealing with, such ultimate facts of human need, how can Medicine possibly talk of treating 'the whole man'?

I must here enter a strong caveat. Much loose thinking has come in at this point. I would without apology venture to make the blunt assertion that Christianity, and Christianity alone, can deal with 'the whole man'. By definition, it alone is capable of undertaking such a task. Medicine is in its right place when it sets out to deal with the body and the mind. But it is the task of religion - of the Christian religion - to deal with 'the whole man'.

There are two processes at work today in the borderlands between Medicine and the Church. They are both clearly illustrated in St. Luke's description of our Lord's healing of the lepers. Let us notice carefully the difference between the nine who failed to return thanks and the one who did so return. There was a vital difference in their whole outlook and attitude to the body-mind relationship. The group of nine patients were only interested in getting rid of the disease and its manifestations. Because of its signs on their bodies they had been ostracised and segregated from their people. As the record says: 'they stood afar off' If they had done anything else than this they would have

been severely punished. They longed - naturally they would do so, as any of us would - to be cured and to be able to go back into society. But their interest stopped at that point. They were only interested in getting rid of the symptoms and signs, so that they could return to their ordinary life and routine. They revealed no sign of wanting to be 'made whole'. On the other hand, the one who returned 'praised God with a loud voice' and the Master declared that this man's faith had made him 'whole'. In this particular case the man had not only lost the signs and symptoms of the serious disease that had been holding him in its grip, he had come into a new and right relationship with his Maker. Of him it could now be truly said that he was made 'whole'.

Much of what one hears at the present time of certain 'Faith Healing' movements illustrates the same two processes. The doctors of today are praised for their very wonderful discoveries and procedures. These have made an incredible difference in modern life and to the outlook of many who in past centuries would have suffered increasing disabilities or a slow decline to a fatal termination of their condition. But there are still numerous things, which the doctors cannot manage. 'Let us', many say, 'go to the Church and let us get as many people to pray for us as possible in the hope that somehow we shall be healed' But both patients and Church continually forget the parable. These patients will go to God - they will go anywhere in their anxiety as soon as possible to get rid of their diseases. But most of them, at least, do not seem to be in search of 'wholeness' - i.e. in our Lord's meaning of the term. Their main anxiety is to get rid of their symptoms, signs of disease, and their immediate disabilities, so that they can

speedily take their place again in society.

## the place of Christianity

This matter of getting rid of symptoms, however, must never be mistaken for Christianity's essential function. Many members of the Medical Profession today, whatever lip service they may pay to it, simply regard Christianity as another speciality or another 'therapy'. When confronted with a particularly serious case with a bad prognosis, they will try all the therapies, radiotherapy, physiotherapy, psychotherapy and, when these have all failed. at last they will say: 'Ah, yes, it is really serious and beyond any help we can give - let us send him to the Church and see what that department can do.' But we must protest. Christianity is not just one extra, and final, link in a long chain of healing methods. It is not a branch of Medicine. It never can be!

There is today a great deal of confusion at this point. There is with many an understandable (and, when it is rightly

this matter of getting rid of symptoms, however, must never be mistaken for Christianity's essential function

understood, commendable) desire for the closest co-operation between the profession which is responsible for caring for the body and that which is responsible for caring for the soul. Co-operation, if it is on the right basis of understanding and relative functioning of the partners in the enterprise, is, of course, valuable. If, however, the problem of a man's illness is to be undertaken in co-operation, then it will not do for the Church to be regarded simply as a department of Medicine. It is

tempting to add at this point that it is certainly not for Medicine to take over the Church, but rather for the Church to take over Medicine! The Church certainly cannot function simply as a branch of Medicine. It must not come to be used simply as a means of getting rid of the more troublesome symptoms of mankind's divided heart and only that. Its essential value may thus be missed.

The Church, also, is able to help Medicine by fostering in its doctors, nurses and all concerned in treating disease some of the most needed virtues, e.g. kindliness, patience, selfsacrificing service and much else. But when all such by-products have been supplied to Medicine, we shall still not have arrived at treating 'the whole man'. In fact, if the Church were to be prepared to let it go at that, it might be very misleading to the patient. It is dangerous to eliminate symptoms before the diagnosis has been assured. It is these symptoms which call attention to the presence and nature of the disease. Diagnosis becomes increasingly difficult if the symptoms are palliated too soon. The Christian Faith must not allow itself to be used as a mere palliative. It may otherwise hide from the patient his real condition and prevent his arriving at a deeper understanding of his ultimate need.

There can be no real wholeness, until each patient has come to a state comparable to that of the one leper who returned to our Lord. 'He glorified God with a loud voice'; i.e. he really meant all he said. He fell at Christ's feet in adoration. He was both physically cured and spiritually restored. He was at last a whole man. He had been reconciled to God through our Lord Jesus Christ and had at last found peace. No man, by his very nature, can be finally satisfied, until God fills his heart.

#### a final consideration

There is one further consideration; and we must not overlook or evade it. A man cannot with real composure face death and eternity apart from consciousness of reconciliation with his Maker. We all need peace with God. We are getting older. Some of the colleagues whom I see here today are those whom in earlier years I taught in our Medical School. Speaking for myself, I can only face God in Jesus Christ, by spiritually dying and rising again in him, by being reconciled through him, and by living day by day in him. It is from him that I hear the liberating words: 'Thy faith hath made thee whole.' It is this spiritual element which ultimately matters to us. This goes on into eternity and, in Christ, I am ready for eternity.

Christian Doctors, there is only one way in which we can really make men whole! Modern Medicine has gained much for mankind and it may yet gain much more. But, when it has done its utmost, it can only prolong man's life for a few more years. It cannot do more than repair a man's mind and body. It has to leave him there. It has nothing to say to the most vital element in man's nature. At this point Christianity alone can step in. When it does so, however, it can impart to the man something of incomparable worth. But before any of us can share it with others, we must become Christians ourselves. Every doctor needs himself first to go to Christ. Then, with confidence, he can become a servant of the Lord of the New Testament who went about making men whole. =

D Martyn Lloyd-Jones (1899-1991)