The disenchantment of medicine

Mircea Gelu Buta

Abstract

The disenchantment of the world and the understanding of the human body as a machine led to the training of physicians as mechanics, specialized in a limited field of the profession, in order to increase their competence and efficiency.

The metaphor by which the body is understood as a machine gradually took hold of the public consciousness, changing the perception of society, about the role and purpose of the doctor.

In this reality, the doctor-patient relationship, captive to the technical system, descends into dark and cold corners, drained by the mystery of human life. There are times when doctors, aware that their mechanistic training is not always enough to fulfill their vocation, realize that the medical act takes place on two levels: divine and human, and their unity is ensured by the love of God. The lack of this love gives way to evil, with the appearance of surprising medical failures, many of them unexplained rationally.

Keywords: medicine, secularization, Christianity

The physician as mechanic

In a lecture given at the beginning of the twentieth century, entitled “Science as vocation”, sociologist Max Weber postulates that science can rule the world by calculation, namely that faith is no longer necessary, because scientific calculations and technical means can replace the “mysterious powers” that come into play [1].

Through calculations, scientists have been able to discover pathogenic germs, physiological disorders of the human body and have developed treatments to prevent disease and restore health. This boundless trust in the laws of science, to explain the world, has led over time to a subtle change in the way of thinking of the modern physician, for the understanding of the human body and its diseases. From here to the metaphor “the human body works like a car” was just one step. According to this metaphor, the human heart is no longer understood as the center of our spiritual life, but as a fuel supply “pump”, for the car, in our case the human body. If we continue in this logic, the body is reduced to a machine that works to live and work, and the mind is just a machine made for thinking. This reduction of the mind to the brain and later to the computer implies the limitation of knowledge to “information”. In other words, it means reducing the human body and life only to numbers and mathematical operations [2].

Proponents of secularization wonder what harm could, the conceptualization of the human body functioning in mechanical terms do to medicine. Indeed, the heart functions like a pump, as demonstrated since 1628 by William Harvey, and the brain has the capabilities of a computer.

When a metaphor begins to control intelligence, such as the resemblance of the human body to a machine, we must look for distortions and absurdities, which lead to a fundamental change in the perception regarding the role of the doctor in society. Here is what Wendell Berry wrote in an article published in 2002: „Of course, the body is not like a machine … A human mind is probably much less
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than a computer ... As for the art and science of healing, the metaphor of the machine falsifies the healing process, because it falsifies the nature of the creature ... If the body is a machine, then its diseases can be cured by a kind of mechanical” [2].

The disenchantment of the world and the understanding of the human body as a machine, has led to the social perception that the role of the doctor is that of an educated mechanic. Doctors are now trained in a system of disenchantment of the profession, in order to create physician-mechanics, considering that they would be much more useful, efficient and competent. In this vision, medical students learn in the first year of study the names and properties of all the machines and parts that make them up: enzymes, combustion cycles, etc., which allow the “bigger machine”, that means the body, to function. In the second year, the young discover ways in which these small machines can fail: lack of an enzyme, a broken pump, a disordered cycle, and in the clinical departments, namely the repair shops, they learn mechanical interventions and keeping the machine running. Such training aims to produce efficient physicians-mechanics who have a good command of some techniques, an ideal that has its roots in the disenchantment of the world described by Max Weber [3].

Are there Christian physicians or Christian medicine?

Christ is the Doctor par excellence; the doctor of souls and bodies. Christ Himself confesses this trait or quality, several times, in the Gospels. For example, when the Pharisees reproach Him for sitting at the table with socially disqualified people, such as the publicans, people who often collected the taxes perceived by the Roman occupier. On that occasion, Christ answers that it is not the healthy, but the sick “who need a doctor.” In fact, the Son of Man does not prepare to intervene therapeutically even on the Sabbath, scandalizing the same politico-ecclesiastical figures - the scribes and Pharisees - who accuse Him of blasphemy. His miracles, most of them spectacular healings or even resurrections, cannot be disputed, so His predecessors seek in vain to confuse Him in expression with a kind of sophisms — we may call them that — as His miracles are the fruit of collaboration with Beelzebub (devil). To all the objections and challenges of the scribes and Pharisees, the answer, succinct and conclusive, is not long in coming.

The medicine practiced by Christ is of a divine nature, unique and characterized by two essential aspects: on the one hand, through His miracles, Christ performs non-existent healings even in the record of contemporary medicine, such as giving sight to a blind man from birth. He heals by word, without resorting to any medicine or recommending a material treatment. The second fundamental feature of Doctor Christ is that He sheds light on the close connection between sin and sickness, a truth He repeats countless times. The only treatment recommended to the healed is: “Stop sinning”, correlated with the warning: “So that it doesn’t get worse”.

The connection between the soul and the body, which is beingshown to be discovered by modern medicine after more than a century of positivist wanderings, is seen more than once by Christ, as He also shows that disease is not the expression of chance or hazard, but of sin. So it is no coincidence that among the charismas left as a gift to His Apostles are these: “And these signs will accompany those who believe: In my name they will drive out demons; they will speak in new tongues; they will pick up snakes with their hands; and when they drink deadly poison, it will not hurt them at all; they will place their hands on sick people, and they will get well” (Mark 16: 17-18).

Through apostolic succession, priests receive this ordination delivered by the Savior at the time of His Ascension into Heaven. That is why they are commonly called “doctors of souls.” And it is no coincidence that the Church instituted the Sacrament of the Holy Anointing, designed both to prevent disease and to help the sick. Here is also the difference of this Sacrament’s perspective, predominantly curative, in the universal Orthodox Church, unlike the Roman Catholic Church, where the Sacrament of the Holy Anointing, under the name of the Last Anointing, is administered exclusively to the dying. It is good to know, at the same time, that in our Church the Sacrament of the Holy Anointing is served by at least three priests, and at most seven, in order to avoid, in the situation of spectacular healings - if the Sacrament had been served by a single priest - , his eventual transformation into a thaumaturgical star.

Given the attribution of Christ the Savior as “The Doctor of souls and bodies,” it was natural for the Church to pay great attention to health, implicitly to suffering people. This explains the great concern for the care of the sick and for social protection, after the Edict of Mediolanum in 313, when the persecution against Christians ceased. In fact, under Theodosius the Great, towards the end of the same century, Christianity became the official religion of the Byzantine Empire. In that fourth century - the golden century of Christianity - the “basiliades” appeared, founded by Saint Basil the Great, great hospital and charitable establishments of the Church. Their uninterrupted tradition can be found everywhere even today in the Orthodox world, it has known a special brilliance in the three post-communist decades in Romania.

The medicine of Christ, manifested by miracles beyond the capacity of understanding of the human mind, is a form of therapy for which the Apostles and, through uninterrupted succession, the priests of the Church, are worthy until now. There were doctors who passed among the saints, from the so-called “holy unmercenaries” to St. Luke of Crimea, the great Christian scientist and surgeon of the twentieth century who defeated the Soviet power. He was perhaps the only doctor in the Soviet Union who
operated only with the icon of the Mother of God placed on the wall of that room. We must not forget the doctors, employees of the Ministry of Interior, who, in the Romanian prisons, during the communist regime, helped the detainees, keeping them alive or healing them. For example, in the prisons of Târgu Ocna - where Valeriu Gafencu passed away, nicknamed “The Saint of Prisons” - Dr. Danieleascu helped countless detainees who remembered her for decades after their release.

The church has always shown due appreciation to civilian doctors, whose mentor and patron is Hippocrates. In hundreds of hospitals in our country and in many other countries, the priest - the “soul doctor” - coexists and collaborates with doctors en titre trained in specialized faculties, just as in secular schools the religion teacher coexists with teachers of other disciplines.

Let’s try to answer the title question, whether there are Christian doctors or Christian medicine. Medicine is, of course, a science with its own prestige, objectives and tradition, which exists in and of itself just like so many other sciences, many of them pre-existing in Christianity ... But the doctor may or may not be a Christian. If he is a Christian physician, without renouncing Hippocrates, he must first relate to Christ, manifesting to Him his adherence to the full, freely consented faith. Hippocrates left a code of ethics for doctors. Christ left to mankind divine commandments and New Testament.

I remember the interview of a professor, a great Italian surgeon, who told me that “there is plastic surgery of necessity and plastic surgery of vanity”. In other words, one is cosmetic surgery applied to a burnt person or a person who has gone through an accident, and another is the use of silicones that some women use. We do not know whether the said surgeon is a Christian or not, but his common-sense observation leads us to think that we will, of course, be resurrected with a spiritualized body to the Last Judgment. Or, it is hard to believe that from the body of some women, the silicones added, in different areas of the body, will be part of the resurrection.

Kierkegaard’s ironies in contemporary medicine

Confronted with medical practice, both the secular and the Christian doctor, both trained in an education dominated by the mechanical model, realize at certain moments, that their training, in a mechanistic vision, is not enough to fulfil their vocation.

The analysis is made by Farr A. Curlin (2016), referring to the work of J. Lear, published in 2011, who claims that physicians’ dissatisfaction refers to the interference between the declining autonomy of their profession and the bureaucratic pressure they are subjected to; meaningless electronic reporting and records; reducing the time spent around the patient; soulless scientific reductionism; the decline of the social reward; extension of professional training periods; increasing expenses on studies; informed and increasingly demanding patients, who, together with stingy lawyers, threaten with malpractice lawsuits; journalists looking for sensational or in the service of medicine and health companies, which induce in society negative impressions and images of the medical staff in the hospitals where they work. Here are a lot of causes that, when combined at one point, produce the phenomenon of “burnout”, namely total energy consumption, with the appearance of alienation and dissatisfaction with the work they do [4].

The first paradigmatic moment of irony appears when the doctor realizes the gap that opens between his social representation and the aspirations he has following his medical career. In other words, it is about how a person represents himself as a doctor and what he should do to correspond to the desired image even when, meeting or exceeding all imposed social standards, he finds that they do not respond to the idea of medicine in the classical sense of the notion. It is the moment when the doctor, realizing the dramatic failure of ideals, begins to live an irony.

The second ironic resumption, which is very unpleasant, occurs when the doctor begins to ask radical questions: What is the disease? What does it mean to heal? Who are my patients? What can I do for them as a doctor? What are the chances of all my efforts? and so on. It is the moment that sends us to the contemplation of Kierkegaard’s ironic observation that becoming a human being is not at all simple and has little to do with the conscientious and devoted way in which we practice our profession [5].

In his notes, J. Lear warns us that in the representation as a physician we might fail because of duplicity, hypocrisy or even imposture, in the worst sense of the word, and states: “It is said of someone that he is a good doctor, when, in fact, he is just a good facade.” [6] Of course, there are cases in which we are not dealing with individual hypocrisies, but with situations in which the doctor, as a conscientious representative of social practice, finds that, in fact, the latter is the one who failed.

But we must recognize that it is not easy to be one of those exemplary doctors, due to the practical nature of the profession, which includes implicit and explicit rules and requires a dedication difficult to sustain. Sometimes it is difficult to listen to the patient, it is difficult to follow him if you are tired, if you are busy, it is difficult to take care of the sick if you have other obligations at the same time. Therefore, most of us fail to offer patients what good medical practice teaches us: placing the sufferer in the center of attention; the patience to listen to him, the effort to understand his suffering, the respect of body and soul, his approach as a person, giving medical care with love, etc.
On the other hand, many doctors fail to keep up with medical science the way they think and know they should, even though the masters have shown them and taught them how difficult it is to do so. When we are aware of these failures, it is no longer a matter of irony, but of simply acknowledging that we are not properly representing the rules set by society for medicine. The irony comes when the doctor does not realize that he is outside the standards that society imposes on his medical career. Perhaps the problem would not be so difficult and the irony so important if reflection and self-criticism were not already part of social practice [7].

Medical students and young doctors are always reminded that in order to become and remain good doctors, their work constantly requires critical and correct reflection. The irony comes when the doctor interrupts this reflection, creating his own belief, which is wrong, when he thinks he knows best what it means to be a good doctor.

Today, science together with its pampered daughter, technique, undoubtedly represent the most important masterpieces of the beginning of the millennium, placing medicine, as a social representation, on a historical peak. Ultimately, it gives us a long life and relief from suffering, things we all desperately want. These successes allowed medicine to become a strong cultural force. In this state, critical reflection on medical practice becomes an expression of social representation, and Kierkegaardian irony, correctly understood leads not only to detachment, but also to the way in which social practices can be adequately accomplished. Because irony depends on and evokes a person’s desire to be a physician, the experience of irony, in the case of this paradigm, should stimulate him, so that the old activities are re-engaged in a new form, leading to a better result of medical practice.

Final discussions
The medical act takes place on two planes: divine and human, and their unity is ensured by the love for God. Lacking life-giving love, medicine remains only a computer program, and the patient a data sheet.

It is important for the doctor to recognize the technical limits of medicine, meaning that beyond them there is a metaphysical field, as evidenced by medical practice, when you often understand that reason, even springing from the brightest minds, becomes an element which you cannot rely on exclusively.

The human being is endowed by Creation and the working Spirit, with healing homiostatic powers. It all depends on the ability to become aware of the beneficial-working force within us.

The lack of the love for God gives way to the evil, with the appearance of surprising medical failures, many of them unexplained rationally. The medicine of love consists of the totality of loving deeds, and its content differentiates it from over-technicalized medicine, which puts efficiency and financial profitability in place of the general good, namely the means above the goal.

References