

Defining the Christian Doctor

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A pediatrician acquaintance retired last month, elated about getting out of medicine. He joins the ranks of many Christian doctors, who raise the question of what it means to be a Christian in medicine. They say that the "good old days" of medicine are over and practicing is no fun anymore -- just competitive business. These doctors warn aspiring medical students that it is the worst possible time for a Christian to enter the field of medicine.

Another group is emerging, doctors who are not content to be doctors first, and then Christians. Focus on the Family publishes a magazine for this group, with articles on how to balance priorities, manage stress, and handle the system. They pray with patients, write prescriptions for Scripture reading, and witness to patients under certain circumstances. Some even enroll patients in discipleship programs. They have a prayer or study time for employees at the start of the day. They recognize that the body is only part of man and talk about the spirit and soul. Several have even planned or started associations of doctors, psychiatrists and ministers to treat the whole person.

There is a subset of this group that pick one issue to fight, and thus are distinguished as Christian doctors. They often are pro-life, repenting of our profession's involvement in the sin of abortion by fighting it. Others run adoptions services or lead seminars against teenage promiscuity or smoking.

Yet another group thinks that Christian doctors should be in ministry and not business. They donate their services to the poor, or become medical missionaries. They have started inner-city and rural clinics. They have mobilized efforts to feed and clothe the poor, and provide teaching about nutrition, cleanliness, and child

care.

Other doctors work in Emergency Medicine, or Radiology, Anesthesiology, Pathology, or even in large group practices, with the goal of having time and money to spend in other Christian service. Some of these still recognize that their medical work can be Christian service -- witnessing to patients or employees perhaps. Some medical groups form with the goal of sending one of their doctors overseas on a rotating basis.

In contrast to all these groups, there are many Christian doctors who think it is improper even to talk about Christian medicine as if it were separate. They believe that a Christian practicing good medicine would (and should) practice no differently than anyone else. Being the most competent is the most important to them. They think it is improper to mix faith and practice.

There are others that would say that it is not activities that distinguish a doctor as a Christian, but rather ethics. Most who say this have in mind issues such as abortion or euthanasia, or attitudes such as the Hippocratic ideal or concern for the patient rather than money. On closer examination, few of these doctors can articulate any ethical principle that secular medical ethicists could not agree with in the broad construction - principles such as autonomy of the patient, beneficence, and justice. Except on a few specifics, their ethics do not differ from the non-Christians. This is not to say that ethics should not define a Christian doctor, only that many who try to use ethics in this way fail.

Why even define a Christian doctor? What would it change to know what a Christian doctor is or does? For the medical student it is most important, since it defines success in medical training. Success in medical

school is not getting good grades. As the joke says, both the student graduating with the lowest averages and the one with the highest are called doctor. Success is not even graduating with one's faith intact. As important as that is, it is not success. It is only survival. Success in any aspect of the Christian life is becoming what God requires of us. If God requires that we be Christian doctors, then we must know what that is.

Defining a Christian doctor is also necessary in order to choose the proper teachers. In Luke 6:37-45, Christ teaches that a tree is known by its fruit, and a man's words and works reflect the condition of his heart. In this context, he tells a parable teaching that a fully trained student will be like his teacher. Christ is our ultimate teacher, and we must be like him when we are fully taught. Our human teachers must be chosen carefully, lest we be led by the blind. Recognizing a Christian doctor is essential for choosing a proper teacher.

It is also important to avoid improper teachers. You must not become like non-Christian doctors. It is difficult in a professional school to completely avoid improper teachers and influences. Stress and limited time force the student to accept loads of material without proper evaluation. You are even influenced by the massive influx of vocabulary that must be learned. Words are learned without context - words that should carry moral weight. Medical concepts are isolated from ethics simply by learning vocabulary. Medical training often doubles a student's vocabulary. Words are not neutral; they carry connotations and they represent concepts.

Becoming a Christian doctor is important. It necessitates defining a Christian doctor. As mentioned, activity or ethics are often the sole terms in this definition. There is no doubt that our ethics should be Scriptural, and should be distinct from any other consistent system of ethics. Christian activity is commendable as well. Christian medicine is caring medicine. It should be concerned with the poor, the orphan and the widow. These activities alone do not distinguish us from the pagans, however. In fact, pagans often outdo Christians at many of these activities. Christian medicine does treat the whole person but it

was only after others began to promote "holistic medicine" that Christians began to adopt, modify and claim the same depth of focus. The recent emphasis on medicine for the whole person scarcely can claim a thoroughgoing biblical genesis.

Activities and ethics should be important distinguishing factors. There is something deeper, however. Commitment, perhaps, though the pagans are often just as committed to their gods. No, there is a difference at the very root of medicine, the basis, the purpose. A Christian doctor practices medicine to glorify God. Everything we do should be to God's glory, whether we eat or drink or whatever we do.

That a Christian doctor practices to glorify God would not be disputed by any of the groups mentioned at the beginning. Yet, in all these groups there is an implicit understanding that there is a basic set of principles or tenets of medicine, to which may be added Christian attachments; which attachments are important is the only debatable question. It is agreed by all these groups that medicine itself is neutral, to be used for good or for evil, just like a nuclear reaction. After all, it is argued, to practice medicine everyone must learn anatomy, physiology, microbiology, and such. Even the veterinary students take these courses. There is not a distinctively Christian anatomy (unless some change occurs in, say, the pineal gland when one accepts Christ). Histology is no different for a Christian, since the same tissues are examined through the same microscope. So it is concluded that diseases are diseases, and the diagnosis, pathology, and treatment are morally neutral.

Of course, most Christians would admit that some diseases are the result of immoral behavior. Some would even admit that morality should be brought into the treatment decisions for some illnesses, perhaps sexually transmitted diseases or AIDS, or those involving abortion. Everyone would agree that ethics are a part of every treatment decision, but most would deny personal morals from entering at all. This is an example of misused vocabulary begging the question. Some diseases, they would assert, can be viewed differently by a Christian, but for colds and congestive heart failure, for headaches and Huntington's chorea, for tuberculosis and thyrotoxicosis, there cannot be a

distinctively Christian understanding. Some would still admit a Christian approach to the patient with these diseases, but the principles of disease remain the same. A Christian should respect the patient as made in the image of God, for example, or that our relationships should reflect Christ. But, these are seen as attachments to an otherwise neutral science. It is asserted that medicine itself cannot be Christian, only our use of it.

At the most basic level of the purpose of medicine, it is clear that medicine must glorify God. This is the only reason for any human activity, especially for a whole profession. It must be a service to God, and in serving him, a service to our fellow-man. In itself, this contravenes the neutrality of medicine, since it takes away a mere existence from medicine, glorifies God as Creator, and places medicine under his Sovereign control, to be practiced by human agents responsible to Him.

In order to glorify and serve God, we must have specifics. Those specifics must include definitions. What is a doctor? What is medicine? What is disease? What is health? What is a person? Who decides the answers to these questions? Very few doctors can satisfactorily answer these questions. That's what philosophers are for, or theologians. A few doctors will try to answer and find themselves talking in circles, which is also what philosophers and theologians are for. If we allow someone other than the Supreme Authority to answer, we have biased the discussion. When man is allowed to answer, disaster and sin result. As God answered Job, "Who is this who darkens counsel by words without knowledge?" Man has tried to answer the question, "What is a person?" and abortion has skyrocketed. Man has tried to define the role of a doctor, and he has gone from a slave to a god and back again. If man has the final authority to answer the questions, then he can change the answers.

Descartes changed the answers when he introduced his Cartesian dualism. To that point, man, body and soul inseparable, was sacred, to be handled with utmost respect, distinct from and set over all other creatures. Descartes' mechanistic view of the body desecrated it, described it in terms of machinery, allowed it to be invaded with impunity, by knives and drugs and all

manner of instrumentation. Now animals are used as models for man, corpses are dissected and men are treated as things, disposable things.

When man defines disease, alcoholism becomes a disease. Then all manner of sin is labeled as disease, to be cured with chemical, electrical and mechanical treatments. Any sinful habit, from gluttony to fornication, from stealing to bestiality, can become a disease. Now even normal and good functions, such as conception and pregnancy, are seen as diseases. Fulfilling one's calling before God as a wife and homemaker has even been viewed as a disease.

It does matter who defines and who answers. As Christians, we recognize that God's Word is our authority, our answer, our source of definition. In the words of Isaiah, To the Law and to the Testimony. God asked Job where he was when the world was created. God did not ask our advice when he created the world. He did not need our advice. He decreed the boundaries of the sea. He decreed how the wind would blow and precipitation would circulate. He decreed how animals would eat and how plants would grow. Both Job (10:10 - 12) and David (Ps. 139:15) tell us that God is the author and architect of our frames, our bodies. He is the one that oversees the process called embryology. He is the only one that knows the answers to our questions.

Definitions are not neutral, so the fact that medicine requires definitions also contravenes the neutrality of medicine. When Christians assume that medicine is neutral, man will define the terms and answer the questions. Unless we allow God to define and answer, man will define and answer wrongly. The results are the fruit of a bad tree, and evident all around us. Abortion, addictionology, and the American Medical Association (AMA) are just the beginning of man's achievements. The structure of medicine is being shaken, and the foundations are crumbling. High insurance rates point to a misplaced emphasis on health. Health care accounts for 11.5 - 12% of our nation's gross national product (GNP). For lower income families, insurance may require 20% of their annual income. There have been cries for more. In his recent inaugural address, the President of the AMA expressed the opinion that the

majority of Americans would rather pay more, and have the latest technology and get it right away. The fact is, however, that most Americans would be shocked to find out what they pay for health care. They would pay far less for it if they paid for it themselves. Doctors will order less expensive tests, according to the patient's payment source, as studies are now demonstrating. Tests and procedures would cost far less if payment came directly from the patient's pocket, since normal market forces would be allowed to operate. Third-party payment, allowing someone else to make the decision and pay the bill, encourages and feeds upon individual irresponsibility. Scripture demands that the individual is held accountable for his stewardship of his body. When man is allowed to change the answers, irresponsibility and high costs are the bad fruit.

The high cost of health care reflected as a percent of the GNP is not the only aspect of this misplaced emphasis on health. Americans crave the latest technology, despite the fact that medicine has not been shown to be of much benefit in the health of a population. It has been estimated that less than 4% of the decline in mortality between 1900 and 1970 was due to medical measures. There has been a decline in deaths from infectious disease, but that decline is clearly not due to medical treatment. "The cure rates for the major life-threatening cancers remain unchanged since the war on cancer was started by Nixon." Cancer death rates have actually risen slightly.

More Americans surviving birth are living a full life span. This does not mean that longevity has increased. Does it mean that a person has a better chance of living to age 80? Maybe, depending on whether you define a person as God defines him, or as modern statisticians do. By God's definition of a person as including all conceived, American life expectancy has actually dropped back below the 1900 level, due to abortion. Another measure of relative rates of mortality, the years of potential life lost, makes it clear that abortion is the single leading cause of loss of life in America, with cancer and heart disease insignificant in comparison.

Mortality figures may not be the best measure of efficacy. In fact, without defining death and health, it may be a fallacy. Scripture asserts that all will die, and

that death entered the world as a result of sin. So health may be entirely, or partially, unrelated to death. Until health is defined from Scripture, we have no means of measuring it, and no basis for asserting advances. By its own definitions, medicine has been unable to deliver what it has promised. Even if it were able to deliver on its promises, the emphasis currently placed on health is unscriptural. God did indeed promise health as a blessing of the covenant, but he tells us to seek him first, not the physicians only, when we are sick. Rather than looking first to medical studies, we should look to the Scriptures. Most medical axioms have a short half-life, and textbooks are often outdated before they are distributed. The new view can no more be taken as truth than the one it replaced, since both are the result of the same flawed methodology. Scripture, on the other hand, is truth. It has always been true, and will never pass away, or change, or become outdated.

What remains, then, is to glean our definitions and principles from Scripture. This task is not easy, though there are a few principles of health which are quickly found. These principles are unequivocally true. Health is a blessing of obedience to God. Our spiritual attitude affects our physical health and vice versa. Improper use of the sacraments (especially the Lord's supper) can result in sickness and death. Sometimes the wicked are more healthy than the righteous, but their end is clear. Since physical health is not much advantage in hell, this teaches us the lesser importance of physical health.

Scripture also teaches our duty to the sick. In Mt. 25:31-46, Christ teaches that at the Final Judgment, he will judge us by whether we clothed the naked, fed the hungry and thirsty, sheltered the stranger, and visited or comforted the sick. We will not be judged on how many were cured or how long we prolonged life, but whether we comforted the sick. Even if medical care were worthwhile, it is not a priority. Obedience is a priority. Food and water are priorities, but not medical care, especially not super high-tech medical care. Comfort, yes. Caring, yes. Not medicine. When cure rather than comfort becomes the focus, failure must result. Medical training forces the focus on cure. Morbidity and mortality conferences are only part of a system designed to reinforce that death or lack of cure means failure.

Even more basic, and necessary to the development of Scripture's view of medicine is a proper understanding of the way the world works. God created the world and actively sustains it. That is a tenet of Christian belief. The implications are often ignored, however. God tells us that he upholds, directs, disposes, and governs all creatures, actions and things. Psalm 104:10 makes it clear that God causes the springs to flow into the valley. God may use gravity, a force decreed by him, but he says that he causes it. Gravity is not automatic, nor is it a law of nature independent of God. Gravity is merely our description of his decree. It is even possible that gravity is mediated by angels carrying the molecules to a new location. Whatever means God uses, it is clear that he actively decrees and directs.

Psalm 104:15 declares that grass grows and seeds sprout not because of certain temperature and moisture conditions, but rather because God causes the grass to grow, and ordinarily under certain conditions. Nothing happens automatically. Everything happens as a result of God's active hand. God's Sovereignty is not reactive, merely the power to fix what happens. Rather, God planned everything in his good pleasure, decrees it, then works it all out in history. This is the teaching of Scripture and the historic confession of the church. It has important implications for medicine.

We are taught to pray for our daily bread by our Savior. He himself rejected Satan's offer of bread after he had fasted forty days. He reminds us in Mt. 4:4 that man does not live by bread alone but rather is sustained by the Word of God. In referring to Dt. 8:3, he makes clear his meaning. It is by his power alone that our life and strength are sustained. The manna that God fed the Israelites was unknown to them. They asked what it was. God used something other than bread to sustain them that they might learn that it is not bread that sustains them. God ordinarily uses bread, but this is not proof of its power, only of its ordinary agency. God wanted to teach them that when they were prospering in the new land, it was not a natural result, or the result of their labors. Their prosperity, even life, is his gift. The Krebs cycle does not work automatically. It is a description of the ordinary agency of God Almighty; he could accomplish its ends entirely otherwise.

God is active in disease and health. Cotton Mather, the great colonial American theologian and the first American advocate of the germ theory, said of germs, "What unknown Armies has the Holy One, wherewith to ... even destroy the Rebellious Children of Men? Millions of Billions of Trillions of Invisible Velites [soldiers]! Of sinful Men they say, Our Father, shall we smite them? On His order, they do it immediately; they do it effectually." He sought to find a spiritual lesson in every human ailment. A toothache, for instance, should remind us that it was with their mouths that our first parents sinned, and with our mouths we continue to sin, cursing both God and man. We may not always clearly see God's purpose, nor are we to be obsessed to find it, but we can be sure that he has a purpose and is working out all things according to his good pleasure.

Disease, then, is not just disease. The fact of an illness cannot stand in isolation. It is always seen in terms of more basic principles. A headache is different for a Christian. To view a headache apart from the Creator, apart from the biblical view of man, apart from God's view of illness, is not simply an incomplete view. It is a view based on entirely wrong principles, a view based on another system. Since God's system is reality, a headache not seen from a Scriptural perspective is necessarily viewed outside of reality, or in an inconsistent system. This accounts for the failure of modern American medicine to accomplish what it has promised, much less what God requires of it. In a sense, modern American medicine lives in a dream bubble and does not deal with reality.

What is needed is a rethinking of the entire foundation of medicine. Medical training has taught us to think as the world thinks. We must instead train ourselves to think as God thinks. There is no systematic development of medicine to which you can refer. At present, only piecemeal work on specific aspects of health and illness exist. Much work has been done by the church through the ages that is simply ignored, usually because it was written in the pre-scientific age. This fact makes it all the more useful. The ultimate basis for specific answers to the questions and dilemmas of modern medicine is in Scripture, not in chemistry or immunology or electronics.

What does it mean to be a Christian doctor? It means first to be a Christian, striving to please God in every area of life. It means to exercise that in our calling, our vocation. We must serve God in serving our fellowman. We must serve our fellowman by listening to his complaints and ailments. We must serve by comforting him, teaching him about his illness, diagnosis and prognosis, and treatments; but most importantly, we serve by reminding him that there is no comfort outside of Christ. We advise, and counsel, and rebuke on occasion. We sometimes use drugs or other remedies, if they may benefit; but we use nothing without thankfulness to God, asking for his blessing in its use. We seek daily to see God's hand in his world. We recognize that to ignore God's hand is to deny him. We treat the patient as fallen, a sinner in need of redemption far more than he needs our medicine. We remember that the patient has responsibility for himself before God, that we cannot force others to pay for his care, nor can he. We remember that resources are limited, and that medicine is not the highest priority.

The groups of doctors described at the beginning are not wrong for their approach or activities. They are not wrong for their ethics. The underlying view of medicine, however, needs to be rethought and based on Scripture instead of on the foundation of sand. Then medical practice can be truly exciting, fulfilling and Christian. This is a most exciting time to enter medicine, because the foundations of sand are being exposed and Christians can once again build on the foundation of Scripture, with Jesus Christ as the Cornerstone.

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