REPORT

LESSONS FROM SPIRITUAL HEALING RESEARCH & PRACTICE

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ABSTRACT

Healers and satisfied healees report that healing treatments are effective for numerous illnesses. Modern medicine has been skeptical of such reports, suspecting they are no more than placebo responses. This paper reviews a substantial body of research studies showing that healing may bring about changes in water, enzymes, unicellular organisms, plants, animals and humans. Possible partial mechanisms are proposed for the action of healing in a variety of situations, along with suggestions for further promising research.

KEYWORDS: Healing research, complementary therapy, spirituality

INTRODUCTION

here are over 150 controlled studies of healing, of which more than half demonstrate significant results (see Table I).^{1,2} I find little interest in pursuing further the question of whether healing works. On the basis of the available evidence, I believe that if healing were a medication it would be on the market. This is especially so in view of the absence of side effects.

Let us examine, on the basis of research evidence and clinical experience, what healing can offer, what we might deduce about the nature and mechanisms of healing, and what might be fruitful subjects for further research.

HEALING: EVIDENCE AND SPECULATIONS

Treatment of bacterial and fungal infections may be facilitated by healing. Laboratory studies show that growth of bacterial³ and fungal^{4,5,6} cultures may be retarded with healing. Anecdotal reports abound on marked accelerations of recuperation from chronic infections when healing is given.⁷ We may guess that spiritual healing could enhance recuperation from infections by retarding bacterial growth. It would be foolish to give healing alone, without antibiotics, for serious infections when there is no contraindication (such as allergy). There is no contraindication to adding healing to antibiotic therapy. The two combined ought to be more potent than either alone.

Healing might be given to the antibiotic or to the injection water in which it is dissolved instead of giving healing to the patient directly. Evidence from studies of healing with plants⁸⁻¹¹ and animals⁸ indicates that healing may be conveyed by such vehicles as water⁸⁻¹¹ and cotton wool.⁸ This is consonant with anecdotal reports dating back to the Bible, when Christ and the Apostles gave healing through handkerchiefs. Modern day healers confirm anecdotally that this works well.^{12,13}

Healing can selectively enhance or retard growth of particular cell cultures in the laboratory^{3,14} and enhance plant growth. This may also be a mechanism whereby healing is effective in a multicellular organism. Healing might

Subject	No. of Studies	Significant	Results*	Indeterminate
Water	5 2	3		
Crystallization	2	(?)		
Enzymes	12	3 (?) 3 4 2 2 3 4	(+2)	(? +3)
Fungus/yeast	10	4	(+1)	(? +1)
Ba c teria	10	2		(? +3)
Red blood cells	2 5 4	2		
Cancer cells	5	3		(? +1)
Snail pacemaker cells			(-)	<i>i</i>
Plants	26	10	(+5)	(? +2)
Motility				(4
flagellates	2	0		(? +1)
algae	2	1		
moth larvae	· 1	1		
Mice	2			
skin wounds	2 2 2 2 3	2 2		
retard goiter growth	2	2	()	
amyloidosis	2	0	(+2)	
malaria	2	0	(+1)	(2 - 1)
tumors decrease	5 1	1		(? +1)
increase	14	0 9	(.5)	
anesthesia	14	9	(+5)	
Humans allobiofeedback	15	3	(+4)	
	1	0	(+4)	
pre-recorded	1	0		
hemoglobin increase	4	4		
increase/decrease	1	-4		
skin wounds	1	1		
hypertension	3	2**		
asthma/bronchitis	1	$\tilde{0}$		
myopia	1	0		(? +1)
epilepsy	1	(?)		(• • • • • •
leukemia	(1)	(•)		
tension headache	1	1		
postoperative pain	ĩ	Ô		
postoperative pain neck/back pain	1			(? +1)
anxiety	9	4	(+2)	· · ·
personal relationship	1	0	× ,	
diagnosis	1 (+4)	0	(+1)	
distant healing				
coronary care	1	1		
sensations	1	1		
TOTALS	152	65	(+23)	
PERCENT OF TOTAL		43%	15%	

Table I CONTROLLED STUDIES OF HEALING²

* Significance p < .01 or "()" p < .02-.05** One study highly significant but not predicted (?) Indicates possibly significant results but faulty reporting or design which prevent proper evaluation of the studies

selectively inhibit growth of infecting organisms, and enhance growth of cells in the immune system and in damaged tissues and organs.

One study suggests that genetic mutations might be selectively favored by healing, although this may again be selective enhancement of growth rather than of mutation.¹⁴ In either case, there is evidence that healing can assist in the control of infecting organisms and possibly as well in the enhancement of susceptibility to antibiotic treatments through these mechanisms.

Here *ealing may retard the growth of cancer cells in vivo.* Several studies found significant retardation of tumor growth in mice.¹⁵⁻¹⁷ Anecdotal reports abound on benefits of healing with cancers, with occasional medical documentation to support these.¹⁸

Applying linear logic (following the example of radiotherapy), one might be concerned that when a healer directs healing to eliminate an infection or cancer the healee might suffer some negative effects - either at the local site of the infection or to his total being. Such negative side effects have not been reported with healing. When effective, healing appears to target the problem(s) which need treatment. The difficulty with healing is that there is no way to predict when it will be effective or not. It may also be effective with problems which neither the healer nor the healee asked to have healed, while the primary target symptom(s) or disease(s) may improve only partially or may not respond at all.

Healing may enhance body defenses. Enzymatic activity in the laboratory has been accelerated with healing.^{19,20} Normalization of hormonal imbalances might be a mechanism whereby healing enhances recuperation from illness.

Healing increases hemoglobin levels in vivo²¹ and retards hemolysis in vitro.^{22,23} This may enhance oxygenation of tissues and might be especially helpful where there has been severe blood loss, as with hemorrhage and extensive burns.

In one study²⁴ there were both increases and decreases in hemoglobin levels with healing, the combination of the two being statistically significant, while either alone was not. Based on these results, the researcher speculates that there may be benefits to decreases in hemoglobin in some instances, because healing appears in most instances to normalize physiological processes. This is a case

in which we may learn something new about physiological processes by observing the effects of healing, or perhaps learn that the ancient practice of bleeding may have beneficial effects in selected problems.

Healing may be facilitated by the participation of the healee. Anecdotal reports abound of how negative attitudes and feelings of disease sufferers may contribute to the worsening of their illnesses. Self healing by visualization has been shown to enhance immune system function.²⁵ Remarkable recuperations are reported from chronic diseases for which conventional therapy has little to offer.²⁶ These self healings were usually brought about by clear assertions of the will power of the healees, who instituted varieties of mental, physical and dietary changes in their lives.

Healing given by a healer may enhance self healing, either through action of the healer directly upon the healee or indirectly through a variety of mechanisms. Healers might inspire healees to activate their immune defenses through introduction of hope, better attitudes, decreased anxiety and depression, and multitudes of other interpersonal mechanisms.

Healing reduces pain. This has been demonstrated in only two studies^{27,28} but is the commonest symptom anecdotally reported to respond to healing.²⁹

Pain is a very complex symptom, with numerous mechanisms for its generation, including mechanical, chemical and thermal insults, neurological disorders, and more. Perception of pain and its tolerance are likewise most complex. My personal impression is that healing acts upon pain through multiple mechanisms, from physical, to emotional, mental and energy fields.

e must also be aware that there may be motivational reasons for allowing pain to develop and continue, as it is one of the greatest stimulators and teachers for personal growth, not to mention a powerful motivator for social interactions such as generating demonstrations of concern and releasing a person from demanding situations.

Healing improves healees' attitudes to their illnesses. Surveys of healees universally demonstrate that the majority feel healing was of benefit, even when objective findings do not change.³⁰⁻³⁸

*Research shows that healing reduces anxiety.*³⁹⁻⁴¹ This in itself is a blessing, whether the anxiety is secondary to the illness or contributing to its etiology. Clinical reports universally mention that when healing is given, healees visibly relax, flush and may even become drowsy.

With relaxation, some or all of the mechanisms of self healing inherent in psychoneuroimmunology may be activated. These include alterations in hormones, nervous system tension levels, white blood cell and immune globulin levels and potencies, and more.

ne must hypothesize that the introduction of healer inputs adds directly to these self healing mechanisms, though this has yet to be established. A start in clarifying this question has been made with the studies of allobiofeedback, which demonstrate with a very high degree of statistical significance that healers may alter electrodermal activity of healees.⁴² Electrodermal activity reflects the tension levels in the autonomic nervous system and is generally accepted as a rough correlate of emotional anxiety and physical tension. (The lie detector test is based on this.) The studies of allobiofeedback confirm that healers may relax healees when healees do not know the periods of time in which the healer is doing so.

Healing enhances reparative activities of the body. Studies show that healing can accelerate wound healing in mice⁸ and humans.⁴³

On the physical level one could postulate numerous and complex mechanisms for this, including enhancement of enzymatic and hormonal activities, alterations in the bioelectrical balances in and around the wound, and more. The fact that these studies, as well as one on anxiety,⁴⁰ were done with the healer's hands near but not on the body suggests the possibility of an energy field interaction in healing. This will be considered further below.

Healing can enhance recuperation from cardiac decompensation. A study of hospitalized cardiac patients showed that with prayer healing sent from a distance the patients had significantly fewer cardiopulmonary arrests, required fewer intubations and less antibiotics and diuretics.⁴⁴ (Distant healing is considered further, below.)

Healing may be applied as a preventive treatment. This neglected option is evidenced in plant research where the damaging effects of saline on seeds was mitigated by healing given to the water. Anecdotal reports from healers suggest that influenza, bovine foot and mouth disease, and complications of anticipated difficult childbirths might be mitigated by preventive healing.

Studies of healing in selectively wakening one of a pair of anesthetized mice more quickly than the untreated control⁴⁵⁻⁴⁸ suggest that healing might be effective in reducing the duration of anaesthesia in surgery. This could reduce surgical and postsurgical morbidity. Anecdotal reports of healees suggest that healing can alleviate many of the pains and other problems associated with surgery.

IMPLICATIONS FROM THE STUDIES OF HEALING

The biological energy field is palpable to healers and healees as heat, tingling, cold, vibrations, electrical and other sensations. I would hypothesize that the sensations are synaesthesias. They represent stimulations (through the energy field interactions between healers and healees) of dermal nerve endings which are used to palpating heat, cold, electrical sensations and the like. Because healers and healees are unused to sensing healing energies (until after they have learned to identify those of the material world) or interactions between bioenergy fields they report their perceptions of them in more familiar terms. With practice, healers develop a 'vocabulary' of sensations which they can interpret with their hands as specific states of health and illness on physical, emotional, mental and spiritual levels.

Some sensitives perceive the field visually as an *aura* of color around the body.⁴⁹⁻⁵¹ Many of these report they can perceive the aura with their eyes closed. This lends further support to the hypothesis that perceptions through energy fields or clairsentience are interpreted through the brain/mind of the healer as more familiar sensory impressions. Alternatively, it might be that part of our sensory and clairsentient perceptual apparatus overlaps. It would be like having inputs to a TV screen from videotapes and an antenna.

I use the term clairsentience rather than the more common clairvoyance because healers often report that they mirror in their bodies sensations reported by the

healee. These may include pains, stiffness or other symptoms and are helpful to the healers in making intuitive diagnoses. Some healers perceive diagnostic impressions as smells, others may hear words mentally which describe or diagnose the illness.

In some cases these may be simple telepathic impressions received from the healee. In others, as when a particular smell is perceived with specific illnesses,⁵² the clairsentient interpretation seems more appropriate.

Healers claim that the biological field is a template for the functions of the body. The studies where healing was given with healers' hands near the body but not touching it support these claims. Studies of bioelectrical stimulation of regeneration of amputated extremities in salamanders, frogs and rodents are beginning, to a degree, to confirm some of these claims.⁵³ Even more impressive are studies of planarian flatworms. Whole worms regenerate from each segment of a worm which is cut into pieces. Ordinarily, an electromagnetic polarity is maintained by each segment, with a positive polarity at the end of the segment which was towards the head and negative at the tail end. If an external electromagnetic field of opposite polarity is applied to the segments, a reversal of regeneration of head and tail positions occurs.⁵⁴

... Let something appeal to us and we will make sense out of it. Let something offend us, disturb us, threaten us and we'll see that it doesn't make sense...

--J. Eisenbud 55

odern medicine has been slow to realize the implications of Einstein's equation, $E=mc^2$. Einstein observed that matter and energy are interchangeable ways of describing the same thing. This has been amply confirmed through nearly a century of experimentation in modern physics. The same applies to the matter of living organisms. Energy medicine is the quantum physics of medicine.

The laws for subtle energies almost certainly will be counterintuitive in some measure to linear reasoning, as the laws of quantum physics are in many ways to classical physics. Healing defies the laws of conventional medical science and psychology. We ought to stop seeking Procrustean ways to fit healing into linear explanations. We must start with fresh and open minds to observe the phenomena of healing naturalistically. Then we may derive laws which are appropriate to is own domain to explain its actions.

An example of this is in the 'linger effect,'⁴⁸ where one of a pair of mice had been the 'target' for the healer to waken from anesthesia. Mice placed on the target side of the table, subsequent to healings given on that side, tended to waken more quickly even when the healer was no longer present. It appeared as though healing energies or fields attached themselves to the table and were available to mice placed there within the next twenty minutes.

Subtle energy phenomena can be studied personally by experimenters. We are accustomed in industrial society to limiting our perceptions to inputs of external senses and internal kinesthetic awareness of our joints and muscles. If we wish and if we practice certain meditative and healing exercises we may extend our awareness and abilities to interact into dimensions beyond our bodies.^{56,57}

any hold that the mind is a product of the brain. I believe that the mind is a transducer for spirit or soul, which expresses itself through the body but is not the product of the bioelectrical outputs of the brain. The expression of spirit inevitably will be modified by the neurobiological circuitry of the brain and will be given a particular personality through this transduction, but is not originated in the brain.

This does not invalidate the importance of researches on the functions of the brain, nor of measurements of electromagnetic fields around the body as intermediary levels for understanding the expression of spirit through the limiting mechanisms of the body and its bioelectrical fields.

... The gross material body. . . is in a very real sense the prison house of the ego-soul and a central part of human growth is to transcend its limitations. . . Daskalos (K. Markides)⁵⁸

Many have explored these realms already. Healers, meditators and mystics contend that in fact it is in the energy field that consciousness resides, expressing

itself through the energy field and secondarily through the body. The body is viewed as a garment taken up by the soul/spirit for a lifetime of leaning particular lessons. We ought to start by listening to these experienced travellers in realms where we have hesitated to enter, even conceptually.

We need not argue these levels of study in 'either-or' polemics. 'Both-and' are the more appropriate conjunctions to link our explorations into a unified picture of human expression of the tasks which spirit undertakes through the medium of body in the dense world of matter.

ealers, clairsentients and mystics tell us that our perceptions of ourselves as distinct from the world around us is an illusion. Each of us is a part of the All. Perceptive and active interactions between healers and healees begin to support some of these cosmological suggestions and provide ways of investigating them.

Observer and observed interact in very complex manners. The human organism is probably the most sensitive instrument available today for registering awareness of the biological energy field. Its very sensitivity must leave it open to the intrusion of 'noise'. This is confounded further by factors of perceiver expectancies such as cultural biases, past experiences, attentional and emotional states, selective focus, and more. Studies of healers are thus blessed with the finest instruments but plagued by multiple problems which make their use most difficult for linear analyses.

For example, studies of multiple sensitives observing the same subjects showed that differences in observer perceptions and interpretations are more common than similarities. Yet the subjects acknowledged that most of the widely differing reports of the sensitives were individually relevant to themselves.⁵⁹ We are thus cautioned against taking the observations of any single sensitive as more than a fractional representation of reality, while at the same time teased by the possibility that each segment of reality reported by a sensitive might have its own validity.

It is only through a combination of left brain analyses of multiple observers/participants in explorations of inner realities that we may find a middle road between the distortions of individual perceptions which are imposed upon inner realities and the distortions of societal consensual realities which are imposed upon the recordings and analyses of these types of data.

What realities might whales postulate, based on sonar perceptions of their worlds and songs sung to explain them?

It appears increasingly evident that consciousness shapes reality. The more one is involved in healing, the more one questions the possibility of identifying an objective reality. It seems that there may be classes or levels of realities or distinct dimensions where particular natural laws apply.^{56,57,60} We must clarify whether these hypothesized levels of reality are objective realities or the creations of our brain/mind hardware or software.

I am not advocating that we should abandon linear reasoning when we explore intuitive realms, but that we should lay it aside temporarily while we are gathering data. In my personal study of doing healing I made little progress as long as I was constantly asking myself linear questions about what was occurring while I was engaging in healing. The intrusion of my linear thinking interfered in my ability to be in the healing state. It was only when I let go of the anchors of linear reasoning for the period of time during which I was healing that clairsentient perceptions and healing occur.

Inear reasoning is essential to sorting out our understandings of nonlinear realms. No one was more surprised than the sensitives who were simultaneously observing the same patient when they found that each had grasped merely a small piece of diagnostic reality rather than its entirety. Clairsentient perceptions feel to the sensitive more real than sensory ones, perhaps because one is resonating in a more basic fashion with that which is perceived. This can create the illusion that one is perceiving the object in its entirety. It is only by comparing individual perceptions that we sort out what is consensually validated with the subject being observed, what overlaps with perceptions of other sensitives, and what may be distortions or projections of observers' perceptual apparatus or the observers' interpretations rather than the subject's reality.

> Paradigm shifts are required in moving from Newtonian medicine to energy medicine.

We must explore the limits of our abilities to clarify inner and outer neurobiological realities. Speculations such as the above must seem to belong more to the realms of philosophy and religion rather than to science, unless we ground them in testable hypotheses. Experiments can sort out various possible ways to understand our beingness in the world of matter. I propose here two lines of study which appear to me to be promising.

rom studies of psychophysiologic self-regulation, Elmer and Alyce Green⁶¹ propose that more profound changes occur when a person utilizes conscious self-constructed imagery than when guided imagery or unconscious imagery are used. I feel that the same applies with healing. Healing alone may bring about physical and psychological changes, but I think that without cognitive awareness and cognitive changes in the healee these effects of healing are likely to be only partial or temporary. This has been both my own experience and that of several doctors and nurses who either are themselves healers or have healers working with them. Yet healers often report that healing alone is sufficient to bring about satisfactory and lasting physical and emotional changes. A controlled study of healing with minimal counselling/psychotherapy compared with healing plus counselling/ psychotherapy is needed to clarify which view is more accurate. It may prove to be again that 'and' is the correct conjunction. There may be different problems or different responses in different types of people which respond better to one approach than the other.

Gerry Solfvin's experiment on malarial mice⁶² appears to me to be a neglected landmark study. He showed that experimenters who believed that they were injecting mice with two different doses of malaria found appropriately differing degrees of illness in the mice. He further demonstrated that the expectancy of a healing effect produced a modest healing effect, when the experimenters were blinded by the design of the study from knowing which mice were designated to receive healing (but did not have healing sent to them by a known healer). If Solfvin's study can be verified, the likelihood that experimenter beliefs and expectations (the Rosenthal effect⁶³) may be extended through parapsychological mechanisms⁶² seems so great that it is likely that any hypothesis may be proved by experimenters who believe strongly in it. I would suggest that we set up series of psi experiments with experimenters who are led to believe each of pairs of conflicting and contradictory hypotheses. (We would, of course, have to do this within parameters which do not counter the 'normalizing' effects of healing.) I predict that both experimental pairs will be verified.

Once we accept that we are not limited by our physical beingness, it is difficult to define where our boundaries might begin or end. Healers tell us that this awareness may be a gateway to the most important aspect of what healing offers, a sense of spirituality which our material culture has discouraged us from believing in or engaging in.

Answers to the philosophical question of why we are on this earth might also be suggested by experimental methods. We may be reduced to a realization that matter matters only inasmuch as it teaches us that matter is immaterial, which would not be apparent without an excursion of spirit into the material world. Concomitantly, awareness of the world of spirit must be heightened through a contrast with the forgetting of incarnation into the world of matter, which then endows matter with meaning.

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