Rabbi Karff Urges Health Care Professionals to Look for Meaning

Presentation explores the connection between spirituality and medicine

What is the relationship of religion, science and medicine? Rabbi Samuel E. Karff explored this question in the presentation “Healing Body and Spirit” at Baptist Memorial Hospital for Women on Friday, Sept. 13. Baptist Memorial Health Care co-sponsored the lunchtime event with Temple Israel in Memphis. Among those joining health care professionals from the congregation of Temple Israel were Rabbis Micah Greenstein, Daniel Rabishaw and Valerie Cohen of Temple Israel; Scott Morris, M.D., of the Church Health Center; Anita Vaught, administrator and CEO of the Women’s Hospital; Rev. David Drumel, vice president of Pastoral Care for Baptist; Anthony Burdick, director of Pastoral Care for Baptist Memorial Hospital-Memphis; and Kris Azlin, assistant director of Pastoral Care for the Women’s Hospital.

Rabbi Karff, rabbi emeritus of Congregation Beth Israel in Houston, Texas, is an adjunct professor of Society and Health, School of Public Health, at the University of Texas Health Science Center at the Texas Medical Center in Houston. Spirituality and healing in medicine is a mandatory, integral part of the four-year medical training at the University of Texas Medical Center, and there is presently a move for accreditation of the program, which began three years ago. Rabbi Karff shared some of the tenets and findings of the program Health and the Human Spirit.

Until recently, the credo at most medical schools was that the medical outcome depends only on the ability to apply medical technology. Now the medical community increasingly believes that the relationship between doctor and patient also affects the outcome.

“Our spirit drives our quest for meaning, and meaning sustains our will to live,” said Rabbi Karff.

Meaning in life affects health. When the physician understands the patient’s inner world, or that which gives meaning to his or her life, the physician can better understand the circumstances that affect that patient’s will to live and be better able to treat the person.

Rabbi Karff pointed out that spirituality does not necessarily mean a standard religious affiliation. In addition, physicians who are religious must understand the boundaries in medicine of not imposing religious beliefs on a patient, just as physicians who are not religious must learn to encourage the patient who derives strength from faith.

Rabbi Karff believes that if hospital administrators want staff to nurture the spirit of the patient, administrators must nurture the spirit of the staff. He participated in a program for patient care assistants at one of the local hospitals in Houston.

PCAs perform a variety of support responsibilities in patient care. In the first session, the PCAs were asked to list various aspects of their lives. From each list, the group compiled a eulogy for that person to help identify the parts of each person’s life that were the most meaningful. In the second session, the presenters focused on the PCAs’ contribution to healing in the way they talk to patients, keep the room clean, and so on. This helped the PCAs see the power they have. The third session focused on their power to do harm and how various negative incidents could be turned into healing situations. In the fourth session, PCAs identified various obstacles to healing, such as negative comments from
superiors and difficult patients. In the final session, the PCAs developed a "Hippocratic oath" for PCAs. The PCAs had these laminated and attached them to their ID badges.

“People have the need for a sacred vocation,” said Rabbi Karff. “If your work is just a job, it is hard to incorporate it into that résumé that makes up the meaningful life.”

The PCAs made 28 recommendations to administration, and the hospital adopted 25 of them. Next, Rabbi Karff’s group will work with nurses at the hospital, and then with physicians. During his presentation on Friday, Rabbi Karff advised physicians to convince the patient they’ve seen the person and remember that people are more than their illness.

First-year students at University of Texas Medical School learn of the ongoing tension between involvement and detachment in anatomy class. Where do they draw the line between being detached enough to dissect a cadaver and involved enough to remember this is the body of a human being? In their second year, after students diagnose diseases and determine required tests, instructors encourage them to think of each “case” as a person. What would the student want the first encounter with the patient to be if he or she were a relative?

Rabbi Karff used the examples of “I-it,” the detached, analytical aspect of medicine, and “I-thou,” the moment when doctor meets patient as one person to another, “really present, really caring.” During the operation, the “I-it” is acceptable, actually preferable, to patients. But before and after, the patient wants to be thought of as a person.

“When you deny your patient that, you are denying the patient all that goes into healing,” said Rabbi Karff, “but you are also cheating yourself.”

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