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No Other Gods: The Danger of Medical Idolatry

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Modern medicine is a growing part of the public square. In 1950, the United States spent less than 5 percent of its gross national product on health care.¹ In 1994, Leonard Sweet reported that percentage had risen to 11.² The Associated Press recently related a federal prediction that “by 2017, total health care spending will double to more than \$4 trillion a year, accounting for one of every \$5 the nation spends.” This expenditure is truly public; state and federal taxpayers currently pay for 46 percent of this outlay, and are expected to pay for 49 percent in the next decade.³ If the current presidential race is any indicator, that expectation may be dramatically low.

At the same time that modern medicine has been a growing part of public life, evangelicals have been acquiring or recapturing their appreciation for the Christian worldview.⁴ Abraham Kuyper’s call to Christians to elucidate a distinctively Christian worldview as the basis for faith and practice has been answered by numerous authors.⁵ Kuyper believed that, in the face of the overwhelming onslaught of modernism, Christians must understand Christianity to be not just one aspect of their lives among many, but a system of belief which affects every action undertaken. He writes:

¹Hessel Bouma III and others, *Christian Faith, Health, and Medical Practice* (Grand Rapids: Eerdmans, 1989), 145.

²Leonard I. Sweet, *Health and Medicine in the Evangelical Tradition: “Not By Might Nor By Power”* (Valley Forge: Trinity, 1994), 9.

³Yahoo! News/Associated Press, “Confidence Plunges, Inflation Rate Soars,” http://news.yahoo.com/s/ap/20080226/ap_on_bi_ge/economy_rdp, accessed Feb 26, 2008.

⁴For a discussion of the development of the concept of “worldview” and its appropriation by Christians, see David K. Naugle, *Worldview: The History of a Concept* (Grand Rapids: Eerdmans, 2002).

⁵Abraham Kuyper, *Lectures on Calvinism* (Grand Rapids: Eerdmans, 1931; reprint 1994). Naugle provides a bibliography of Christian works on worldview in Naugle, *Worldview*, 349-59.

Wherever man may stand, whatever he may do, to whatever he may apply his hand, in agriculture, in commerce, and in industry, or his mind, in the world of art, and science, he is, in whatsoever it may be, constantly standing before the face of his God, he is employed in the service of his God, he has strictly to obey his God, and above all, he has to aim at the glory of his God.⁶

Christianity, to remain viable in the face of modernism, must present itself as an alternative way of viewing all of life and reality.⁷

Because they attempt to address all of reality, worldviews are often presented in broad categories. Kuyper framed his worldview presentation as a response to three questions, “How does man relate to God? To man? To the world?” Charles Colson and Nancy Pearcey present their worldview within the paradigm of Creation, Fall, and Redemption.⁸ James Sire examines how eight worldviews answer seven questions concerning ultimate reality, external reality, humanity, death, epistemology, morality, and history.⁹

Perhaps because of the broad categories in which they deal, Christian worldviews have not generally dealt significantly with the relationship between Christianity and modern medicine. Some works which do discuss the practical implications of a Christian worldview make no significant mention of the interaction between Christianity and medicine.¹⁰ Others allude to it

⁶Kuyper, *Lectures on Calvinism*, 53.

⁷*Ibid.*, 10-11.

⁸Charles Colson and Nancy Pearcey, *How Now Shall We Live?* (Wheaton: Tyndale House, 1999).

⁹James W. Sire, *The Universe Next Door: A Basic Worldview Catalog*, 3d ed. (Downers Grove: InterVarsity, 1997).

¹⁰These include Albert M. Wolters, *Creation Regained: Biblical Basics for a Reformational Worldview* (Grand Rapids: Paternoster, 1985); Arthur F. Holmes, *Contours of a World View*, IFACS Studies in a Christian World View, no. 1 (Grand Rapids: Eerdmans, 1983); Brian J. Walsh and J. Richard Middleton, *The Transforming Vision: Shaping a Christian World View* (Downers Grove: InterVarsity, 1984); Kevin J. Vanhoozer, Charles A. Anderson, and

only briefly, perhaps subsuming it under the treatment of the broader relationship between Christianity and science. Kuyper, for example, seems to do the latter, noting that physicians, like all other scientists, once operated on Christian “abnormalist” assumptions and asserting that it was through Calvinism that “the study of the body regained its place of honor beside the study of the soul.”¹¹ Colson and Pearcey take a similar approach; while they make occasional mention of how Christians should frame their responses to fringe issues in medicine such as euthanasia, genetic engineering, and abortion,¹² medicine does not receive the chapter-length treatment given to home, school, crime and neighborhoods, society, work and finances, law and government, science, or art. For the most part, medicine occupies a blind spot in the contemporary worldview discussion.

Those who approach the question from the side of medical ethics show a similar reluctance to directly connect theology to the questions of medical ethics. Stanley Hauerwas notes that theologians did not respond to medical questions with a theological ethic. Instead, he writes, they wrote as if “issues in medicine could be addressed without having to worry about how religion might or might not relate to morality.”¹³ In most writing, he continues, “Theological ethics when applied to medicine becomes but another example of ‘quandary ethics’ on the

Michael J. Sleasman, *Everyday Theology: How to Read Cultural Texts and Interpret Trends* (Grand Rapids: Baker, 2007); and Mark A. Noll and David F. Wells, eds., *Christian Faith and Practice in the Modern World: Theology from an Evangelical Point of View* (Grand Rapids: Eerdmans, 1988). Even Os Guinness and John Seel, eds., *No God but God* (Chicago: Moody, 1992), which contains essays about potentially idolatrous Christian involvement in politics, victimization, professionalism, and psychology makes no explicit connection to medicine.

¹¹Kuyper, *Lectures on Calvinism*, 121, 134.

¹²Colson and Pearcey, *How Now Shall We Live*, 125, 130-31, 246-7.

¹³Stanley Hauerwas, *Suffering Presence: Theological Reflections on Medicine, the Mentally Handicapped, and the Church* (Notre Dame: University of Notre Dame Press, 1986), 5.

assumption that ethics primarily involves clear thinking about hard cases.”¹⁴ That is, the ethical difficulties of extreme circumstances were addressed while the broader question of the relationship between Christian practice and medicine in general went unexamined. Those answering medical questions lacked a genuine theological framework through which to view those questions.

While Hauerwas and others have attempted to remedy this lack,¹⁵ there persists in the available literature on ethics a failure to treat medicine as a whole. For example, John and Paul Feinberg address abortion, euthanasia, sexual ethics, birth control, and genetic engineering in their ethics text without ever addressing medicine as a whole.¹⁶ R. A. Higginson’s special section on “The Ethics of Medical Care” in *New Dictionary of Christian Ethics and Pastoral Theology* moves quickly from a brief survey of Jesus’ and the Bible’s interest in healing to typical ethical categories of informed consent, autonomy, love and justice, double effect, and the dichotomy of ordinary vs. extraordinary means.¹⁷ It appears that the relationship between Christianity and

¹⁴Ibid. A similar observation is made in Bouma and others, *Christian Faith, Health, and Medical Practice*, 2. They write, “[I]n the last decade, during which time medical ethics has become a growth industry, Christians who have written on medical ethics . . . have often been more easily identified as followers of some moral philosopher . . . than as followers of Jesus.”

¹⁵Such as Bouma et al., Martin E. Marty and Kenneth L. Vaux, eds., *Health/Medicine and the Faith Traditions: An Inquiry into Religion and Medicine* (Philadelphia: Fortress, 1982), and Franklin E. Payne, *Biblical/Medical Ethics: The Christian and the Practice of Medicine* (Milford: Mott, 1985).

¹⁶John S. Feinberg and Paul D. Feinberg, *Ethics for a Brave New World* (Wheaton: Crossway, 1993).

¹⁷R.A. Higginson, “The Ethics of Medical Care,” in *New Dictionary of Christian Ethics and Pastoral Theology*, ed. David J. Atkinson and David H. Field (Downers Grove, InterVarsity, 1995), 93-99. A similar treatment is provided in R. K. Harrison, “Medical Ethics,” in *Encyclopedia of Biblical and Christian Ethics*, ed. R. K. Harrison (Nashville: Thomas Nelson, 1987), 252.

modern medicine resides in a blind-spot shared by all concerned.

This blindness, however, is nothing new. It seems to continue a historical ambivalence of Christians towards medical practice which Darrel W. Amundsen and Gary B. Ferngren aptly summarize:

Throughout the history of Christianity there has always been a degree of tension, often only latent, between theology and secular medicine, between the medicine of the soul and the medicine of the body. . . . Most Christians have asserted that the human agent of care, the physician, is an instrument of God, used by God in bringing succor to humankind. But in every age some have maintained that any use of human medicine is a manifestation of a lack of faith. This ambivalence in the Christian attitude, among both theologians and laity, has always been present to some degree.¹⁸

Sometimes this ambivalence can even be seen in the work of a single author. Gregory of Nazianzus praises his sister who, after a serious carriage accident, “would have none of any physician, except Him Who permitted it . . . so that she owed her preservation to none other than to Him,” and cautions that physicians, in seeking to restore physical health, do not always seek the best interests of the patient.¹⁹ However, he can also comfortably compare the pastoral ministry to that of a physician, and note that his father when near death sought relief, albeit unsuccessfully, through “the skill of physicians, the prayers . . . of his friends, and every possible attention.”²⁰ Clement of Alexandria approvingly quotes Ecclesiasticus 38, “Honour the physician for his usefulness for the Most High made him; and the art of healing is of the Lord,” and

¹⁸Darrel W. Amundsen and Gary B. Ferngren, “Medicine and Religion: Early Christianity Through the Middle Ages,” in Martin E. Marty and Kenneth L. Vaux, eds., *Health/Medicine and the Faith Traditions: An Inquiry into Religion and Medicine* (Philadelphia: Fortress, 1982), 100. For a fuller discussion of this ambivalence, see their treatment there.

¹⁹Gregory of Nazianzus, *Orationes* 8.15, 2.22, 2.27 (*NPNF*² 7:242, 209, 210)

²⁰*Ibid.*, 2.15, 18.28 (208, 263).

concerns about health pervade his admonitions.²¹ At the same time, his description of how the true gnostic faces “penury and disease” makes no mention of recourse to a physician; the gnostic responds by prayer.²² The modern ambivalence about the relationship between Christianity and medicine has ancient roots.

However, now that medicine pervades western life, it behooves Christians to contemplate where modern medicine fits into biblical truth. Responding to medicine when it infringes upon a single absolute, that of the sanctity of human life, is not enough. Christians need to coherently account for how medicine fits into life, not simply prevent it from dealing out death.

This paper will attempt to show that a Christian should understand modern medicine²³ to be an idol. Whatever the subjective interests of those who go to it, it presents itself as a god, a replacement for God. Like a god it offers life, makes commandments, performs miracles, and claims authority over all of life. While the Bible acknowledges the value of medical intervention and therefore leaves open the possibility that medicine can mediate divine action, Christians cannot rightly assume that modern medicine is, in fact, mediating divine grace.

What Constitutes Idolatry?

Idolatry has long been used as a rubric for evaluating Christian behavior. Tertullian wrote,

²¹Clement of Alexandria, *Paedagogus* 2.8 (ANF 2:255). For example, he writes about the effects of heating wine and cooling flowers on health and about the effect of a soft bed on proper digestion in *Paedagogus* 2.2, 2.8, 2.9 (ANF 2:242-43, 255, 257).

²²Clement of Alexandria, *Stromateis* 7.13 (ANF 2:547).

²³I acknowledge that “modern medicine” is a generalization so broad as to be almost worthless. Medicine is a human endeavor, and there are many humans involved in it, most notably Christian physicians, to whom little, if any, of what follows may apply. I ask the reader’s indulgence as I refer monolithically to medicine as it is presented in advertisements, news reports, and government warnings.

“Thus it comes to pass, that in idolatry all crimes are detected, and in all crimes idolatry.”²⁴ Steve Gallagher treats sexual addiction as sexual idolatry.²⁵ The collection of essays, *No God but God*, considers the idolatrous potential of numerous facets of modern life. The Bible consistently warns God’s people about idolatry in both Testaments. The first of the Ten Commandments warns against the practice. Exodus 20 reads, “Thou shalt have no other gods before me. . . . Thou shalt not bow down thyself to them, nor serve them.”²⁶

For an action to fall under the rubric of idolatry, then, two criteria need to be met. First, the item itself has to qualify as an idol, an “other god.” Second, the behavior towards the object must be of the sort condemned by Scripture. While these two criteria are intertwined, for clarity’s sake they will be briefly distinguished.

What Makes an Idol?

As Richard Keyes points out, while Christians have pushed idolatry to the extreme edges of culture and out of their own lives, idolatry is a central biblical theme used to describe a whole category of unbelief and belief.²⁷ Defining an idol, he writes, “An idol is something within creation that is inflated to function as a substitute for God. All sorts of things are potential idols,

²⁴Tertullian, *De idolatria* 1 (*ANF* 3:1).

²⁵Steve Gallagher: *At the Altar of Sexual Idolatry* (Dry Ridge, KY: Pure Life Ministries, 2000).

²⁶This follows John Sailhamer, who identifies all of Exod 20:3-6 as the first commandment in *The Pentateuch as Narrative* (Grand Rapids: Zondervan, 1992), 285-86. However one structures the Decalogue, it is clear that idolatry, both in the form of worship of other gods and the worship of physical idols, is forbidden.

²⁷Richard Keyes, “The Idol Factory,” in *No God but God*, ed. Os Guinness and John Seel (Chicago: Moody, 1992), 30-31.

depending only on our attitudes and actions towards them.”²⁸ Brain Walsh and J. Richard Middleton seem to agree, writing, “Western culture *has*, in fact, served other gods, many of them—good, created things which we have idolatrously absolutized and religiously pursued in the hope of ultimate fulfillment.”²⁹ Even without images and statues, Christians can become idolaters.

And, in fact, those who write on medical ethics have noted the possibility of medical idolatry. Richard McCormick warns about an “idolatry of life—an attitude that, at least by inference, views death as an unmitigated, absolute evil, and life as the absolute good.”³⁰ Bouma and others devote a section of their work to “*The Critique of Idolatry*,” in which they note that any good can become an idol, be it children, life, the relief of pain, or medicine. Because of the power of modern medicine “we are tempted sometimes to expect too much from it, to look to technology to be our faithful savior. Because of the new powers medical technology provides, it can be an idol, and doctors, its priests.”³¹ Gilbert Meilaender states, “We can make — and probably have made — an idol of medical advance.”³² Christians can center their lives and hopes around medicine, like any other created good, and thus make it an idol.

As helpful as these warnings against idolatry may be for showing that any displacement

²⁸Ibid., 32-33.

²⁹Walsh and Middleton, *The Transforming Vision*, 131.

³⁰Richard A. McCormick, “To Save or Let Die: The Dilemma of Modern Medicine,” in *Bioethics: An Introduction to the History, Methods, and Practice*, 2d ed., ed. Nancy S. Jecker, Albert R. Jonsen, and Robert A. Pearlman (Sudbury: Jones and Bartlett, 2007), 59.

³¹Bouma and others, *Christian Faith, Health, and Medical Practice*, 5, 4.

³²Gilbert Meilaender, *Bioethics: A Primer for Christians* (Grand Rapids: Eerdmans, 1996), 107.

of God from his rightful place is idolatry and therefore sin, they share a troubling orientation. They all present idolatry as a subjective action; idolatry is about attitudes and expectations. The danger is not that some Christians might worship idols, but that Christians might act idolatrously towards some things. There are no idols, only idolaters. To repeat Keyes, “All sorts of things are potential idols, depending only on our attitudes and actions towards them.”³³

The biblical authors and the members of the early church, however, encountered idols as objective realities. They were real statues, physical manifestations and embodiments of the false gods trusted, served, and worshiped by their communities. Israel is commanded, “Thou shalt have none other gods before me,” because it would be tempting for a farmer surrounded by Canaanite farmers worshiping fertility gods to do the same.³⁴ God consistently expresses the concern that Israel will worship the gods of her neighbors.³⁵ Covenants with pagan nations are forbidden because they would lead to pagan worship.³⁶ Paul encountered Athens as a “superstitious” city because the life of the community involved the common service of false gods.

The Bible makes clear that objective idolatry is a concern. Paul warns against any Christian fellowship with idols even though idols are nothing.³⁷ Leviticus 20 raises the specific

³³Keyes, “The Idol Factory,” 32-33.

³⁴Deut 5:7. Peter C. Craigie, *The Book of Deuteronomy*, New International Commentary on the Old Testament, ed. R. K. Harrison (Grand Rapids: Eerdmans, 1976), 152-53. No distinction will be made between gods and idols herein.

³⁵E.g., Exod 23:24, 32-33; 34:15-16; Num 25:1-4; Deut 7:16, 25; 12:2-3, 30-31; Josh 23:7.

³⁶John I. Durham, *Word Biblical Commentary*, vol. 3, *Exodus*, ed. David A. Hubbard and Glenn W. Barker (Waco: Word, 1987), 460-61.

³⁷1 Cor 10:14-23.

concern that the Israelites would sacrifice their children to Molech. Hananiah, Mishael, and Azariah certainly are not in danger of entertaining idolatrous thoughts about Nebuchadnezzar's idol; their refusal to worship is a rejection of an objective idol.

Similarly, the early church rejected the idols of the world around them. Christians died rather than burn incense to Caesar, or any pagan god. Tertullian denies that gods have the power to pollute the ground; they are nothing. Nevertheless, he forbids Christians to enter their presence without a distinctively Christian reason.³⁸

The assertion that modern medicine is an idol, therefore, should not be confused with the assertion that some may make it one. The former is the assertion that modern medicine, as it is presented by its community, serves as a substitute for God.³⁹ As Os Guinness and John Seel point out, "Mere intellectual dismissal of other gods is not enough."⁴⁰ That the Christian knows that medicine is not, in fact, God, does not change the fact that it is an idol or preserve the believer from idolatry.

What Behavior is Forbidden?

The primary biblical metaphor for idolatry is adultery, marital unfaithfulness.⁴¹ Moshe

³⁸Tertullian, *De spectaculis*, 8 (ANF 3:83).

³⁹Some might respond that an objective idol must be part of a religious system. While it would go beyond the scope of this paper, I believe that an argument could be made that modern medicine qualifies as a religious system, meeting the criteria elucidated by Clifford Geertz in *The Interpretation of Cultures* (New York: Basic, 1973), 90 and serving the six religious functions outlined by Stephen Grunlan and Marvin K. Mayers in *Cultural Anthropology: A Christian Perspective*, 2d ed. (Grand Rapids: Zondervan, 1988), 222-26.

⁴⁰Guinness and Seel, *No God but God*, 24.

⁴¹Moshe Halbertal and Avishai Margalit, *Idolatry*, trans. Naomi Goldblum (Cambridge: Harvard University Press, 1994), 1, 10. For an excellent and thorough discussion of this, see *ibid.*, 9-34.

Halbertal and Avishai Margalit note that the prophets portray God as husband and Israel as his wife, and that “the power of this image derives from the exclusivity of that relationship, which forbids the wife to have sexual relations with any other man; thus, by analogy, Israel is forbidden to worship other gods.”⁴² In Hosea Israel is depicted as the prostitute who, believing that other lovers can better meet her material needs, leaves her husband to chase them.⁴³ In Ezekiel Israel forgets her past relationship with the Lord and seeks other lovers, paying them for pleasure rather than having them pay her.⁴⁴ Whenever Israel goes to idols, whether she believes they will meet her needs or can give her pleasure, she abandons Yahweh and commits adultery.

Conversely, this image allows the prophets to construe any act of faithlessness as idolatry. When Israel turns to Egypt or Assyria for military assistance, God views it as forsaking him and equates it with idolatry, saying of Israel, “Thou saidst, I will not transgress; when upon every high hill and under every green tree thou wanderest, playing the harlot.”⁴⁵ As Aloysius Fitzgerald notes, “Such alliances were, of course, the equivalent of false worship because they frequently led to that, and because they involved the implicit acknowledgement that others (human rulers/their gods) apart from Yahweh could save.”⁴⁶ Whenever Israel treated another as she

⁴²Ibid., 11.

⁴³See esp. Hosea 2:5-8. Halbertal and Margalit, *Idolatry*, 13-14.

⁴⁴Ezek 16:1-34. Halbertal and Margalit, *Idolatry*, 17.

⁴⁵Jer 2:18-20; cf. Ezek 16:28-34.

⁴⁶Aloysius Fitzgerald, “The Mythological Background for the Presentation of Jerusalem as a Queen and False Worship as Adultery in the OT,” *Catholic Biblical Quarterly* 34, no. 4 (1972): 403.

should have treated God, she committed adulterous idolatry, idolatrous adultery.⁴⁷

Similarly, commentators on the Decalogue often stress that the first commandment demands far more than a system of exclusive offerings. Commenting on Exod 23:24, Halbertal and Margalit note, “The commandment ‘You shall not follow their practices,’ which is meant as a rejection of the lifestyle of the idolatrous culture, reflects a complex weave of lifestyle, ritual, and faith.”⁴⁸ The first commandment demands from God’s people absolute loyalty that extends well beyond the tabernacle to everyday life. Eugene Merrill notes, “Though worship is the essence of service in the language of the cult, the covenant nature of the relationship between the Lord and Israel would favor the notion of service beyond that. . . . to serve is to express commitment to that sovereignty in a practical, tangible way.”⁴⁹ Patrick Miller makes a similar point, noting that the first commandment forbids God’s people affording gods “their worship, their obedience, and their affection.”⁵⁰

In short, to obey the first commandment is to reject any action which might lend credence to the pagan notion that their gods are, in fact, gods. Drawing from the image of adultery, this would include trusting them for help in times of trouble and seeking them to meet one’s needs. Drawing from the language of service, it would include obeying their commandments, behaving as their other worshipers, or building one’s life around them. The first commandment forbids

⁴⁷Though devoid of any accusation of adultery, 1 Sam 8:8 presents Israel’s desire for a human king as a rejection of their divine king and a continuation of their idolatry.

⁴⁸Halbertal and Margalit, *Idolatry*, 5.

⁴⁹Eugene H. Merrill, *The New American Commentary*, vol. 4, *Deuteronomy*, ed. E. Ray Clendenen (Nashville: Broadman and Holman, 1994), 147.

⁵⁰Patrick D. Miller, *Deuteronomy, Interpretation: A Bible Commentary for Teaching and Preaching*, ed. James Luther Mays (Louisville: John Knox, 1990), 75.

affording to anything other than God the devotion, trust, and obedience owed to God.⁵¹

Is Medicine an Idol?

It has been asserted that an idol is anything that presents itself as a substitute for God. As noted above, many have recognized that aspects of medicine could be idolized. It is often recognized that religion and medicine today touch on the same spheres of life, suffering, and dying, and therefore are in potential conflict.⁵² Their overlapping concern is born out in their connected history.⁵³ Kenneth Vaux, though generally positive about the potential interaction of faith and medicine, recognizes that there has been a “usurpation of life events by the medical establishment.”⁵⁴

This section will attempt to show that medicine attempts to do what God does, that it takes upon itself divine prerogatives. It does in our society what God does for his people in the Bible. It offers life, makes commandments, performs miracles, and claims authority over all of life. Because the basic notion seems to be common, this section will not try to be exhaustive or scientific. Instead, it will briefly highlight a few areas in which medicine seeks to stand as a god before considering whether medicine can mediate for God.

Lord and Giver of Life

⁵¹Mediation, by which we afford to those God has placed in certain positions limited divine prerogatives, will be addressed later.

⁵²Hauerwas, *Suffering Presence*, 39; Payne, *Biblical/Medical Ethics*, 53;

⁵³For a detailed discussion of this, see Marty and Vaux, eds., *Health/Medicine and the Faith Traditions*, 3-127.

⁵⁴Kenneth L. Vaux, “Topics at the Interface of Medicine and Theology,” in *Health/Medicine and the Faith Traditions: An Inquiry into Religion and Medicine*, ed. Martin E. Marty and Kenneth L. Vaux (Philadelphia: Fortress, 1982), 194-95.

The words of the Niceno-Constantinopolitan Creed, “And [we believe] in the Holy Ghost, the Lord and Giver-of-Life,” appropriate to the third person of the Trinity a consistent biblical emphasis: Yahweh is the source, guarantor, and ruler of all life. The creation account looks to God as the original source of all life, be it vegetable, animal, or human. His first blessing on birds, sea creatures, and men is that of progeny, the continuation of life.⁵⁵ His creative acts upon the land are presented as making it fit for human life,⁵⁶ and the garden prepared contains the Tree of Life, from which man might eat and life forever.⁵⁷

This interest in life does not end with the Fall. Instead, the first epic drama in Scripture, the story of Joseph, is cast as God preserving life and accomplishing a great salvation. Sailhamer notes that Jacob, Judah, and Joseph all see God at work preserving the life of his people, and all of Egypt besides.⁵⁸ The Torah is given to the people as a path to life, to living long and well in the land.⁵⁹ The fertility of the people and their beasts, the original subject of blessing, remains under God’s purview.⁶⁰ Moses sums this up, saying that God himself is to his people “thy life, and the length of thy days.”⁶¹

It should be clear that, in our society, it is medicine which is viewed as a source of life

⁵⁵Gen 1:22, 28. Sailhamer also notes the connection of blessing to life in *The Pentateuch as Narrative*, 94, 96.

⁵⁶Sailhamer, *The Pentateuch as Narrative*, 87-88.

⁵⁷Gen 2:9, 3:22.

⁵⁸Sailhamer, *The Pentateuch as Narrative*, 223; cf. Gen 42:2, 42:18, 43:8, 45:1-8, 50:20.

⁵⁹E.g., Exod 20:12, Deut 4:40, 5:16, 6:2, 6:18, 30:15-18.

⁶⁰Exod 23:26.

⁶¹Deut 30:20.

and health. Despite the fact that there is little evidence that specific medical practices improve health,⁶² it is generally granted that modern medical advances have pushed life expectancy from the forties and fifties into the seventies and eighties.⁶³ Local radio advertisements for a battery of cardiovascular tests end with a woman quoting her doctor saying, “They saved your life.” A search for “live longer” on WebMD yielded 1,367 results, ranging from the possibility of new “life-extending” drugs to how building a family medical tree “can help you live longer and even save lives.”⁶⁴ And indeed, the prolongation of life and increasing physical well-being are two of the traditional goals of medicine, though the former is sometimes pursued at expense to the latter.⁶⁵ So strong is the sway of medicine that, as Bouma and others note, “Blind faith in medical science has allowed us to delude ourselves into at least half-believing that sickness—especially our own—will never end in death, that withering and dying can be conquered.”⁶⁶

Medicine is likewise determined to increase its power over the beginnings of human life. Medical involvement in a simple birth, the first of life’s great passages, has long been viewed by many as a necessity.⁶⁷ Now, medicine exercises its power to intervene at the point of conception. Whether it is by fertility drugs, cloning, or *in vitro* fertilization, fruitfulness is offered at the

⁶²Hauerwas, *Suffering Presence*, 48. Bouma and others suggest that 6 percent of health comes from medical care in *Christian Faith, Health, and Medical Practice*, 108.

⁶³Sondra Ely Wheeler, *Stewards of Life: Bioethics and Pastoral Care* (Nashville: Abingdon, 1996), 115.

⁶⁴http://www.webmd.com/search/search_results/default.aspx?query=live%20longer&source=undefined, accessed March 10, 2008.

⁶⁵Bouma and others, *Christian Faith, Health, and Medical Practice*, 105, 269.

⁶⁶*Ibid.*, 270.

⁶⁷Vaux, “Topics of Medicine and Theology,” 195.

physician's office.⁶⁸

All Things Whatsoever I Have Commanded You

It is God's right and responsibility to provide commandments for his people. As creator and again as redeemer, he has the right to require obedience from those he has created and redeemed. As a loving creator, he places upon himself the responsibility to reveal to men what they must know to be freed from sin and to live lives that please him. Because he is unique as creator and redeemer, he has a unique authority to command. Part of the reason Israel was to have no other gods was because Yahweh alone had redeemed them from Egypt.

God commands his people to a certain type of life. Indeed, that language might be misunderstood; it is better to say that the set of God's specific commands is such that it, when lived out, produces a certain type of life. While he offers health-related motivations for obeying some of his commands,⁶⁹ and many of his commands can be correlated with healthy consequences,⁷⁰ his commands are for the most part strictly moral; they connect to health only through the faithfulness of the one who commands. Neither turning the other cheek nor confronting the brother in the sin are obviously connected with health. Indeed, the first is potentially painful and the second is likely to result in the anxiety and stress that accompany most confrontations.

Medicine has also taken on the role of pronouncing commands. It commands people to exercise more (or less), and to eat more (or less) fiber. It commands people to stop smoking, to

⁶⁸Hauerwas presents a wonderfully theological reply to IVF in *Suffering Presence*, 142-55.

⁶⁹This is true even in the New Testament, e.g., 1 Pet 3:10-12.

⁷⁰Colson and Pearcey do this in *How Now Shall We Live?* 308-15.

wear certain clothes in the sun, and to rear their children with certain methods. With its commands, it offers motivational promises similar to those found in the Torah. Obedience brings longer, healthier life, while disobedience risks death.

These commands, presented as they are as scientific wisdom, seem innocuous. However, two things about them should be noted. The first is that they are presented and generally understood as moral commands. Payne contends that the instructions given by physicians regarding the care of the body are inherently moral commands, and that the physician, having placed himself above faith, “easily assumes himself to be an authority on ethics and morals.”⁷¹ Intentionally echoing the words of Paul, Bouma and others write, “Christian advice to the patient in the twentieth century might well be, ‘Be subject to your physician.’”⁷² Medical instructions use “should” and “ought,” the language of moral obligation. And, Vaux notes that the intent of physicians is to ground the norms they command in primal, natural, “prereligious moral perceptions.”⁷³

In addition to revealing the uncertain nature of these commands, a recent WebMD article regarding the eating of eggs reveals the moral tone of these instructions:

For a few decades there, eggs had a rather unwholesome reputation. . . . Then, in 2000, the American Heart Association (AHA) revised its dietary guidelines and gave healthy adults the green light to enjoy eggs once again. . . . With science on our side, we can once again enjoy the wonderfully nutritious egg.⁷⁴

⁷¹Ibid., 109-10, 28.

⁷²Bouma and others, *Christian Faith, Health, and Medical Practice*, 140, fn. 8.

⁷³Kenneth L. Vaux, “Theological Foundations of Medical Ethics,” in *Health/Medicine and the Faith Traditions: An Inquiry into Religion and Medicine*, ed. Martin E. Marty and Kenneth L. Vaux (Philadelphia: Fortress, 1982), 219.

⁷⁴Kathleen M. Zelman, “Good Eggs: For Nutrition, They’re Hard to Beat,” www.webmd.com/diet/features/good-eggs-for-nutrition-theyre-hard-to-beat, accessed Jan 22,

Long forbidden to eat unwholesome eggs, adults can enjoy them once again with the permission of science.

The second thing to note about the commands of medicine is that they are often made in place of God's commands. For example, the Bible is replete with commands regarding the relationship of believers to alcohol which clearly can apply to drugs in general. It appears to countenance the short term use of alcohol for psychotropic and analgesic purposes while forbidding continual use.⁷⁵ However, believers who would never think of getting drunk will live for days, weeks, or years in a state of altered consciousness due to drugs prescribed, i.e., commanded, by a physician.

Payne notes that the family is another area of direct encroachment. Physicians routinely repudiate the biblical command to children to obey their parents by treating them without parental consent or notification. While the Bible stresses the responsibility of parents to discipline their children, many physicians view discipline problems primarily as medical problems.⁷⁶

Greater Works Than These

James Spiceland aptly summarizes the central place of miracles in the Christian view of life, writing, "Belief in miracles lies at the heart of the authentic Christian faith. Without the miracle of the first Easter, Christianity would no doubt long since have passed from the scene,

2008. While not pertinent here, Payne notes that the changing and unproven bases for much medical advice is point of significant concern. Payne, *Biblical/Medical Ethics*, 37-46.

⁷⁵Prov 31:6-7.

⁷⁶Payne, *Biblical/Medical Ethics*, 119.

and would certainly not be around to offend the ‘modern’ man.”⁷⁷ Miracles, though varied in particular manifestations, are events in which God acts contrary to the generally observed processes of nature “to bring the glory and love of God into bold relief.”⁷⁸ The God of the Bible is a God of miracles.

Many of the biblical miracles are miracles of healing and, as Payne notes, the only healings in the Bible are miraculous ones.⁷⁹ A nameless prophet restores Jeroboam’s withered hand. Naaman is cured of leprosy according to the word of Elisha. Elijah restores a widow’s dead son to life. In a single chapter of Matthew, Jesus gives sight to the blind, heals the hemorrhaging, raises the lame to walk, and restores the dead to life.⁸⁰ The ministry of the apostles is likewise characterized by miraculous healings.⁸¹

However, the purpose of biblical miracles is to inculcate belief. As Spiceland states, “The miracles are signs rather than merely wonderful works.”⁸² The widow whose son Elijah restored proclaims, “Now by this I know that thou art a man of God, and that the word of the LORD in thy mouth is truth.”⁸³ Jesus understands his miraculous ministry to be proof that he is the Messiah.⁸⁴ Payne points out that references to healing drop off dramatically after Acts, which

⁷⁷James D. Spiceland, “Miracle,” in *Evangelical Dictionary of Theology*, 2d ed., ed. Walter A. Elwell (Grand Rapids: Baker, 2001), 778.

⁷⁸*Ibid.*, 779.

⁷⁹Payne, *Biblical/Medical Ethics*, 102.

⁸⁰1 Kings 13, 2 Kings 5, 1 Kings 17, Matthew 9,

⁸¹E.g., Acts 5:12-16.

⁸²Spiceland, “Miracle,” 779.

⁸³1 Kings 17:24.

⁸⁴Matt 11:4-6.

supports the conservative belief that “the primary and overriding purpose of all the miracles of the New Testament was to validate God’s presence and action through His Son and His apostles.”⁸⁵

The early church saw unexpected healings in biblical terms. Gregory of Nazianzus reports that his father rose from his deathbed and found healing not in medicine but in the performance of his priestly office. He understands this and a similar occurrence in his mother’s life as miracles, for he states, “The same miracle occurred in the case of my mother not long afterwards.”⁸⁶ Augustine recounts several miraculous healings.⁸⁷ Yet he sees their purpose and results as going beyond physical healing to matters of faith. He writes, “But we cannot deny that many miracles were wrought to confirm that one grand and health-giving miracle of Christ’s ascension to heaven with the flesh in which He rose,” and, “The miracles were published that they might produce faith, and the faith which they produced brought them into greater prominence.”⁸⁸ God’s miraculous workings continued after the close of the New Testament, and as miracles served to strengthen and spread faith in Christ.

Medicine now performs miracles of its own. Sweet states that when medicine began to perform “miracles” in the twentieth century, the church took a respectful step back to give it room.⁸⁹ Carolina Donor Services sponsors a “Donor Sabbath Weekend,” the purpose of which is “raise awareness about the miracles performed every day through organ and tissue donation and

⁸⁵Payne, *Biblical/Medical Ethics*, 104.

⁸⁶Gregory of Nazianzus, *Orationes* 18.29-30 (*NPNF*² 7:263-64).

⁸⁷Augustine, *City of God* 22.8 (*NPNF*¹ 484-91).

⁸⁸*Ibid.* (*NPNF*¹ 484, 484-85).

⁸⁹Sweet, *Health and Medicine*, 141.

transplantation.”⁹⁰ Its web site recounts the story of Madisynn who was born with Berdon’s Syndrome and not expected to live one year. “Madisynn received a liver, spleen, pancreas, stomach and intestines all from one donor. She did amazingly well. It was a miracle.”⁹¹ Certainly, the phrase “the miracles of modern medicine” is not one with which anyone is unfamiliar.

Augustine notes that pagan theurgy produced miracles in his day, and that just as the biblical miracles commended the worship of God in Christ, “those miracles commend the worship of a plurality of gods.”⁹² Medical miracles similarly produce faith. Larry Williams received a transplanted kidney and liver in 2000. “During his surgery, he had a spiritual vision and felt called to use his talent for singing to raise awareness about organ and tissue donation and to express his gratitude.”⁹³ Williams is converted to serve organ donation. Though they do not specifically connect the growth of belief to the concept of miracles, Bouma and others do note that the perceived great accomplishments of medicine have promoted faith. They write, “Too many people believe that technology can rescue them from the effects of unhealthy practices . . . too often patients and loved ones buy into popular notions of medical science and technology as the great cure-all”⁹⁴ Medicine performs miracles, and those miracles ground the trust people place in it for health.

⁹⁰Jeannine Sato, Carolina Donor Services, letter regarding “Donor Sabbath Weekend” dated Oct 2007.

⁹¹“Michelle’s Story,” <http://www.carolinadonorservices.org/storiesofhope.php>, accessed Jan 22, 2008. Sadly, the child died the month after her third birthday.

⁹²Augustine, *City of God* 10.17 (NPNF¹ 191).

⁹³“Larry’s Story,” <http://www.carolinadonorservices.org/storiesofhope.php>, accessed Jan 22, 2008.

⁹⁴Bouma and others, *Christian Faith, Health, and Medical Practice*, 269.

With All Your Heart

The God of the Bible demands that his disciple commit himself wholly to God. All his heart, soul, mind, and strength is to be devoted to loving him. Jesus presented the seriousness and totality of discipleship in absolute terms. A disciple must abandon his claim on his family, his life, and all that he has and embrace the life Christ leads him in; that is the cost that must be counted.⁹⁵

Much like God, modern medicine claims authority over all of life. It claims authority over all spheres of life as well as the full length of life. This first claim is seen in the definition of health offered by the World Health Organization: “Health is a state of complete physical, mental and social well-being and not merely the absence of disease.”⁹⁶ No sphere of life lies outside these bounds. This claim is implicit in the breadth of the medical commandments noted earlier. Medicine makes authoritative comments about eating, sleeping, gun ownership, drinking soda, coffee, alcohol, working, playing, and practically anything else about which one might care to ask it. Not content to leave anything outside the realm of medicine, physicians almost universally refer non-physical problems within the medical community to psychiatrists.⁹⁷ And patients acknowledge this claim; Daniel Foster states that “well over two-thirds of patients reporting to a physician’s office have no serious physical disorder and that the most common single diagnosis made in general practice in [*sic*] nondisease.”⁹⁸

⁹⁵Luke 14:26-33.

⁹⁶Payne, *Biblical/Medical Ethics*, 58.

⁹⁷*Ibid.*, 52.

⁹⁸Daniel W. Foster, “Religion and Medicine: The Physician’s Perspective,” in *Health/Medicine and the Faith Traditions: An Inquiry into Religion and Medicine*, ed. Martin E.

Even the church sanctuary falls under the authority of medicine. Sweet points out how early germ science intruded into the very process by which Christians worshiped. Prior to the discoveries made by Pasteur and others, the almost universal Christian practice was to take communion from the common cup. However, the discovery of germs and the corollary warnings against them swiftly worked to end the practice. Some Christians did object, noting that this was an odd practice to single out given the ubiquity of germs, and seeking in vain any actual occurrence of someone getting sick from the common cup. However, Sweet notes, “Medicine permitted no back talk . . . This would be the first of many lessons for American religion in the authoritative voice of the new priesthood, now wearing white coats instead of black robes.”⁹⁹

Medicine also claims the entire length of life. It is present at its beginning and end, as it is involved in the “ordinary but central human events of giving birth, suffering, and dying.”¹⁰⁰ It urges people to visit it often, even when nothing seems to be wrong.

The real intensity of medicine’s claim on an entire life might be brought home with a true story. Sally, a grandmother, is diagnosed with breast cancer. It is caught fairly early and the physician recommends surgery followed by a battery of chemo- and radio-therapy to last several months. She gives her informed consent and asks for prayer, confident that after several months of suffering through therapy she will have the rest of her life. Unfortunately, the radiation damages her lungs, causing pneumonia. Medication prescribed to reduce the fluid around her lungs has the opposite effect, further damaging her lungs and causing congestive heart failure. Now, some 3 years after her treatments ended, she is weak, is on oxygen, is virtually homebound,

Marty and Kenneth L. Vaux (Philadelphia: Fortress, 1982), 250.

⁹⁹Sweet, *Health and Medicine*, 126-29, 129.

¹⁰⁰Bouma and others, *Christian Faith, Health, and Medical Practice*, 1.

does not attend church, and has a consistent schedule of appointments with the physicians. No criticism of any action is meant here, but it is clear that medicine's offer of treatment required her whole life in exchange.

An Idol Indeed

At the very least, a *prima facie* case has been made that medicine is an idol, a substitute for God. It seeks to do what God does in offering life, commanding morality, performing miracles, and claiming all of life. Other activities of medicine could be added to this list; like God it predicts the future and has priests.¹⁰¹ More evidence could be produced for any of these points; likely each reader could supply his own.

However, rather than belaboring the current argument, this paper will now seek to answer the one obvious and serious objection to this argument. It will examine the concept of mediation and conclude that despite the possibility that some medicine might mediate divine healing, it is a mistake to conclude that modern medicine is a mediator rather than an idol.

Is Modern Medicine a Mediator?

The common response to the argument so far is that medicine is not a substitute for God but a tool of God. This is seen in Clement of Alexandria's approving citation of Ecclesiasticus 38, "Honour the physician for his usefulness for the Most High made him; and the art of healing is of the Lord."¹⁰² It is seen in Cotton Mather dubbing the confluence of spiritual and medical

¹⁰¹For comments on the medical priesthood, see Marty, "Intertwining of Religion," 34; Daniel W. Foster, "The Physician's Perspective," 250; Bouma and others, *Christian Faith, Health, and Medical Practice*, 102, 116.

¹⁰²Clement of Alexandria, *Paedagogus* 2.8 (ANF 2:255).

care “the angelical conjunction.”¹⁰³ As Bouma and others note, it is as absurd to condemn medicine simply because God heals as it is to condemn the government because God rules, or parents because God loves and disciplines.¹⁰⁴ Instead, Meilaender suggests, Christians “need not, I think, fear that seeking medical help necessarily demonstrates lack of trust or faith on our part. It indicates only that we trust God to care for us mediately -- through the love and concern of others.”¹⁰⁵ The reason medicine sounds and acts so much like God is that God is working through it.

Before trying to determine whether the particular example of medical care which is modern medicine does mediate¹⁰⁶ divine healing, it seems prudent to answer two absolute questions. The first is, “Can any medical care mediate divine healing?” The second is, “Can a Christian assume that all medical care mediates divine healing?” To phrase them differently, “Is it possible for medicine to mediate? Is it certain that medicine mediates?”

Can Medical Care Mediate?

Clearly, the consensus is that medicine can mediate divine healing. Despite that consensus, the answer from scripture is not as obvious. As noted above, all biblical references to actual healing occurring are references to divine healing by prophetic, Messianic, or apostolic agency. Nor do the biblical references to physicians, beloved or otherwise, count as comments on

¹⁰³Ronald L. Numbers and Ronald C. Sawyer, “Medicine and Christianity in the Modern World,” in *Health/Medicine and the Faith Traditions: An Inquiry into Religion and Medicine*, ed. Martin E. Marty and Kenneth L. Vaux (Philadelphia: Fortress, 1982), 140.

¹⁰⁴Bouma and others, *Christian Faith, Health, and Medical Practice*, 17.

¹⁰⁵Meilaender, *Bioethics*, 9.

¹⁰⁶Implicit in this use of “mediate” is the idea of moral legitimacy. God worked through the Chaldeans to judge Judah; that did not make their actions morally legitimate. See Habakkuk.

medical care; as Payne notes, all of them are strictly historical.¹⁰⁷

Though it never clearly commends physicians, the Bible does contain two examples of medical care that suggest that it can be a vessel for divine healing. The first is the story of the Good Samaritan. In Luke 10:34, the Samaritan treats the injured man's wounds with bandages, oil, and wine and takes care of him at the inn. Upon his departure, he charges the innkeeper in 10:35 to likewise care for the man. Jesus intends to commend the Samaritan, and the Samaritan's primary activities amount to medical care. The second example is the medicinal use of alcohol. In addition to the statements in Proverbs 31, one finds Paul's admonition to Timothy, that the younger man "Drink no longer water, but use a little wine for thy stomach's sake and thine often infirmities."¹⁰⁸ Payne notes that these two cases are interesting because both show the moral use of a drug and neither involve a physician in the medical care described.¹⁰⁹ Nevertheless, the general Christian responsibility to care for those in need of care, when combined with these two examples of applying available knowledge to aid healing and prevent illness, warrants the conclusion that medical care can, at least sometimes, mediate divine healing.

Can Medical Care Be Assumed to Mediate?

It seems that most who write on the subject believe not only that the human medical endeavor can mediate divine healing, but also that it should be assumed to do so in all but its most egregious forms. Sweet states the grounds for this view well, writing, "Medical healing is the knowledge of God manifested through science. Spiritual healing is the knowledge of God

¹⁰⁷See his discussion in Payne, *Biblical/Medical Ethics*, 101-102.

¹⁰⁸1 Tim 5:23.

¹⁰⁹Payne, *Biblical/Medical Ethics*, 106.

manifested through faith. It is the same knowledge. It is the same God.”¹¹⁰ Kenneth and Sara Vaux are concisely blunt: “Biotechnology is a gift of God and a boon to human fulfillment.”¹¹¹ Given the wondrous power modern medicine wields, is it not obvious that God is working through it?

This line of thought is open to at least two telling criticisms. The first is that it leaves Christians with no grounds for opposing any force which possesses sufficient power. The strength of arm and firearms by which a gang rules its turf come ultimately from God. Hitler’s rise to power was ultimately attributable to the one “removes kings, and sets up kings, “who gives wisdom unto the wise, and knowledge to them that know understanding.”¹¹² Yet it would be a mistake to legitimate the actions of gangs or Hitler on this account.

The second criticism is that the Bible specifically rejects the assumption that physicians always mediate divine healing. In 2 Chr 16:7-9, Hanani the seer upbraids Asa, king of Judah for seeking military aid from Syria rather than the Lord. While Asa will gain temporary refuge with Syria, he would be plagued by continued war due to his faithlessness. This rebuke is not included in 1 Kings 15. The Chronicler offers a similar editorial comment on the king’s struggle with the disease of his feet, writing, “Yet in his disease he sought not to the Lord, but to the physicians.”¹¹³ The parallel is obvious, and is aptly summarized by Meilaender, who writes, “Its clarity lies in the starkness with which we are required to ask whether the measures we take to secure ourselves — politically, medically, or in other ways — bespeak a lack of trust and

¹¹⁰Sweet, *Health and Medicine*, 142.

¹¹¹Kenneth L. Vaux and Sara A. Vaux, *Dying Well* (Nashville: Abingdon, 1996), 21.

¹¹²Dan 2:21.

¹¹³2 Chr 16:12.

confidence in God.”¹¹⁴ Neither the Syrians nor the physicians, whatever power they might wield, mediated God’s care to Judah and Asa.¹¹⁵

Meilaender is quick to note, however, that the passage presents the difficulty of suggesting that God’s help is never mediated, and that therefore it should not be absolutized.¹¹⁶ Other moves are made to limit this difficulty. The NIV inserts an “only” into the verse, which therefore reads, “He did not seek help from the Lord, but only from the physicians.” Paul Chappell writes, without obvious warrant, “Asa sought a physician who was the equivalent of a pagan magician.”¹¹⁷ Given that the previous section concluded that it was possible for medicine to mediate, it does seem necessary to interpret the verse in that light.

Regardless of the method used to harmonize this verse with some use of medical care, it should be clear that it rules out the assumption that physicians always mediate. It is inconceivable that the Pentateuch would criticize an Israelite for “going to Moses, and not to the Lord.” Moses was the mediator; going to him was going to the Lord. Naaman goes to Elisha without any specific faith commitment to Yahweh;¹¹⁸ however, because Elisha is the man of God, the divinely appointed mediator, going to him is going to the Lord, and Naaman is cleansed. God views those who go to his mediators as those who go to him. That Asa going to the physicians was in any

¹¹⁴Meilaender, *Bioethics*, 9.

¹¹⁵Syria is interesting in that Scripture specifically attributes its rise to power to the work of the Lord in 2 Kings 5:1.

¹¹⁶Ibid.

¹¹⁷Paul G. Chappell, “Healing,” in *Evangelical Dictionary of Theology*, ed. Walter A. Elwell (Grand Rapids: Baker, 2001), 540.

¹¹⁸While Naaman’s “now I know,” in 2 Kings 5:15 does not exclude the possibility of prior knowledge (cf. Gen 22:12), his commitment to future pure worship and his desire for earth from Israel show a genuine change in belief.

sense not going to the Lord shows that these physicians were not mediators, so none can be assumed to be.

The Bible forbids any absolute response to medical care. It cannot be absolutely forbidden, nor can it be absolutely trusted. Given that the answer to both “Is it certain that medical care mediates?” and “Is it impossible that medical care mediates?” is “No,” the question returns to the specific type of medical care under examination, modern medicine.

Does Modern Medicine Mediate?

It has been stated that modern medicine presents itself as if it were God. It has been suggested that only case in which Christians can tolerate this behavior is that in which modern medicine is in actual fact a mediator. Because it is possible, but not certain, for medical care in general to mediate, it is theoretically possible, but not certain, for modern medicine to mediate. Despite this theoretical possibility, however, three truths make clear that modern medicine does not, in fact, mediate, and therefore remains an idol.

The first truth is that God does not claim physicians in the Bible. When he deals with the question of why the bronze serpent was not an idol, Tertullian offers a simple response: because God commanded its construction.¹¹⁹ The mediatorial roles of human government and human parenting are specifically endorsed by Scripture.¹²⁰ Servants give service to their masters “as to the Lord.”¹²¹ While Bouma and others suggest that modern Christian advice should include, “Be

¹¹⁹Tertullian, *De idolatria* 5 (*ANF* 3:63).

¹²⁰E.g., Rom 13:1-7, Col 3:20.

¹²¹Eph 6:7.

subject to your physician,”¹²² the reality is that the Bible does not even hint at such a command, despite the appearance of physicians in the biblical narratives. And, as Payne points out, the Bible connects neither healing nor what would count as medical advice with physicians.¹²³

It might be argued that the Bible does not endorse the physicians of its day because their medical practice was pre-scientific and based upon mistaken beliefs. This merits three responses. The first is that medical science is constantly changing; if possession of absolute truth is the criterion for mediation, it still has not been met. The second is that parents and governments are ordained as mediators despite their imperfect beliefs. The third is that modern medicine is based upon beliefs that are just as wrong and pagan as those held by physicians in Jesus’ day.

This observation leads to the second truth. Modern medicine does not claim God. Modern medicine operates within a framework of evolutionary naturalism, not theism.¹²⁴ Whereas in the nineteenth century most American physicians were Christians and there was a general understanding of the conjunction between physical and spiritual care, the twentieth century saw that “angelical conjunction” dissolve as medicine became secular.¹²⁵ Modern medicine is secular medicine, medicine conducted on the specific premise that God is not involved.¹²⁶ This secularization is not always apparent to patients, for physicians can dishonestly encourage people to seek divine aid and claim to serve as mediators even when they do not believe in such things. Foster writes, “Such an approach is not cynical or hypocritical even if the

¹²²Bouma and others, *Christian Faith, Health, and Medical Practice*, 140, fn. 8.

¹²³Payne, *Biblical/Medical Ethics*, 106.

¹²⁴Payne discusses this at length. *Ibid.*, 11-22.

¹²⁵Sweet, *Health and Medicine*, 140-44.

¹²⁶Marty, “Intertwining of Religion,” 33; Hauerwas, *Suffering Presence*, 9.

physicians find a particular religious belief naive or abhorrent, since the aim is to help a sick and otherwise helpless patient.”¹²⁷ Noting that religious beliefs can affect how a patient approaches medicine, Foster continues, “The problem is very real in the United States, where a majority of the population specifically believe in God.”¹²⁸ In what system that mediates for God can belief in God be a problem? Payne makes a passionate plea for Christians to recognize this reality:

The practice of medicine is saturated with, and founded upon, principles that are *antithetical* to the Christian world view. Christians *must* understand this situation. This antithesis explains in part why the ‘spotlighted’ ethical issues have occurred. The Christian physician is *not* in friendly territory within his profession.¹²⁹

It is a mistake to impute to a system that intends to exclude God the role of mediating for God when God himself has not done so.

The final fact that excludes modern medicine from a mediatorial role is that it has different goals from the God of the Bible. While several could be mentioned, medicine’s goal of eliminating suffering will be highlighted. Hauerwas notes that this is a key point, writing, “I want to at least raise the possibility that the most decisive challenge which medicine raises for Christian convictions and morality involves the attempt to make suffering pointless and thus subject to elimination.”¹³⁰ He notes that medicine is so determined to eliminate suffering that it countenances eliminating the sufferer by, for example, endorsing the denial of esophageal reconstructions on retarded infants, or championing abortion lest a child be born into a less-than-perfect family.

¹²⁷Foster, “The Physician’s Perspective,” 248.

¹²⁸Ibid., 249.

¹²⁹Payne, *Biblical/Medical Ethics*, 31.

¹³⁰Hauerwas, *Suffering Presence*, 24.

Even when it does not end in death, medicine's assault on suffering ignores the biblical witness to God's work through suffering. While not all illness is connected to sin, God does use illness to discipline the sinner.¹³¹ Physicians, by ignoring this connection, insulate the sinner from the consequences of sin and ground a sense of invulnerability which is dangerous.¹³² Vaux recounts an experience of a PCP user overdosing, being rushed to detox, and leaving confident that his drug use can continue because the physician can rescue him.¹³³ Some suffer so that the glory of God might be manifested, and others lest they become proud.¹³⁴ However, if modern medicine mediates divine healing, the Christian is put in the odd position of claiming that the only suffering which has meaning is the suffering which medicine cannot eliminate.

Conclusion

Since modern medicine is not claimed by God, does not claim God, and pursues different goals than God, can it rightly be said to mediate for God? It would seem not. Modern medicine's claims to give life, its moral commands, its miracles, and its claims to authority over all of life remain incommensurable with God's claims to the same. Modern medicine is an idol, a reality which a community offers as a substitute for God, and the Christian response to modern medicine as a whole should be grounded on that truth.

¹³¹E.g., Exod 15:26, Lev 26:16, Num 12:10, Deut 28:21, 1 Sam 5:6-12, 2 Sam 12:15-18, 2 Kings 5:25-27, 2 Chr 21:11-18, 26:16-21, Jer 14:21, Hab 3:5.

¹³²Meilaender, *Bioethics*, 9.

¹³³Vaux, "Theological Foundations of Medical Ethics," 222.

¹³⁴John 9:3, 2 Cor 12:7-9.

