

# Textbook on Evidence-Based Holistic Mind-Body Medicine

Basic Philosophy and Ethics of  
Traditional Hippocratic Medicine

SØREN VENTEGODT ♦ JOAV MERRICK



Health and Human Development  
Joav Merrick (*Series Editor*)

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**HEALTH AND HUMAN DEVELOPMENT**

# **TEXTBOOK ON EVIDENCE-BASED HOLISTIC MIND-BODY MEDICINE**

## **BASIC PHILOSOPHY AND ETHICS OF TRADITIONAL HIPPOCRATIC MEDICINE**

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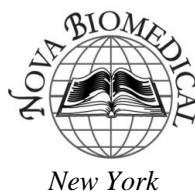


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**SØREN VENTEGODT  
AND  
JOAN MERRICK**



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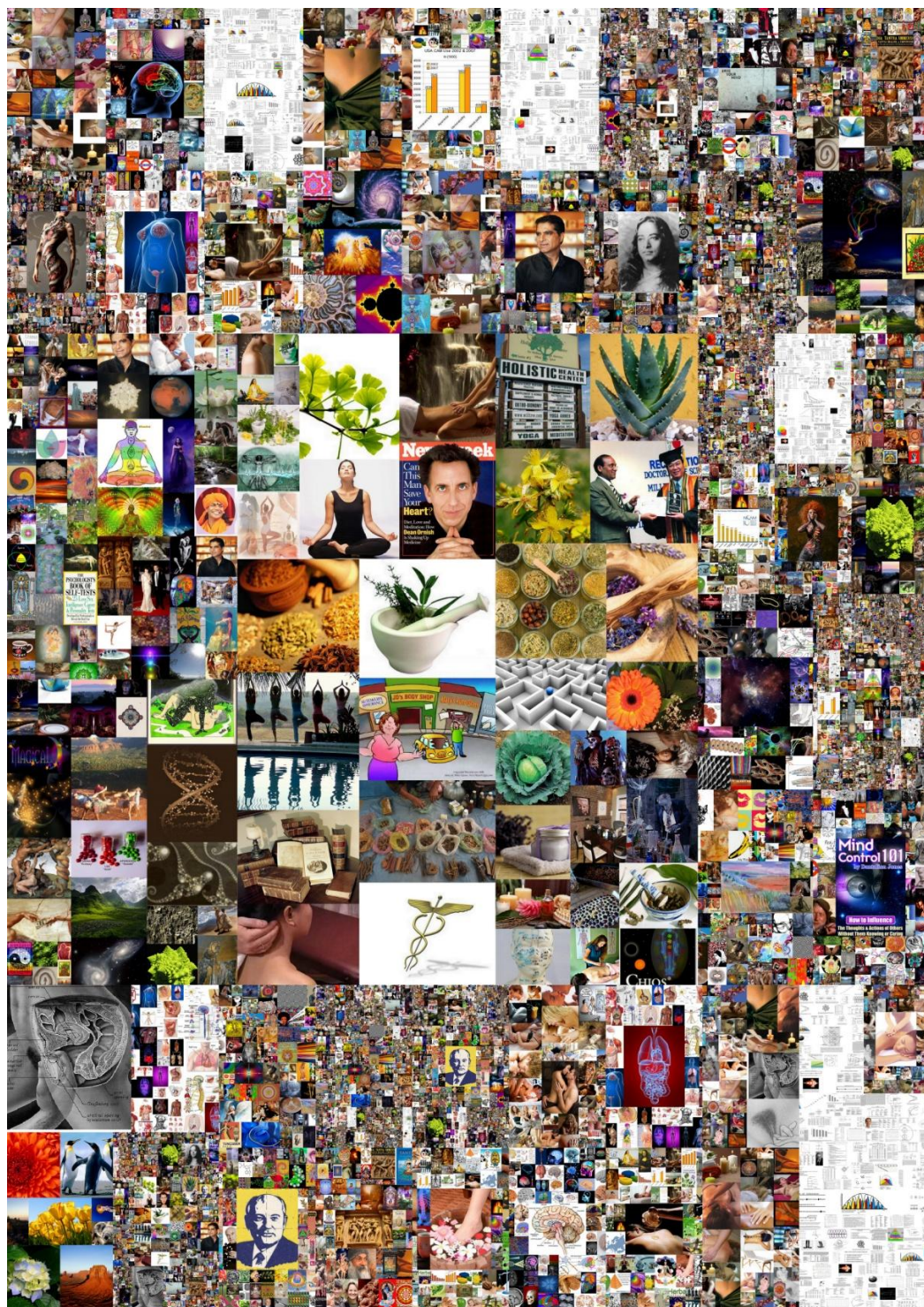
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## Foreword

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***Professor Niels Jørgen Andersen\****

Porsgrunn, Norway

“In a sense, medicine is burning, as old ideas and methods are fading on every hand. But medicine’s fires are purifying: New life is emerging from the ashes as it always does. The re-inventors are stepping forward and healing is in the wind. The rebirth has begun”

*Larry Dossey. Reinventing medicine, New York: HarperOne 1999*

Holistic mind body medicine, as it is presented in this new book, which is the second of a total of six books on mind-body medicine, could be called the traditional European medicine as it originates from the famous Corpus Hippocraticum, documents that shows a well-established science already at the times of Hippocrates 2400 years ago. Hippocrates (460-377 BCE) and his students treated thousands of patients at his large hospital, the Asklepion, on the island of Kos, which included temples, holy baths, massage clinics and more treatment facilities.

Hippocrates classical medicine was holistic in the broad meaning of this concept. It addressed all aspects of the human being, body, mind and spirit. The primary tools were talk and touch, but Hippocrates also used a wide range of medical plants and mineral drugs, but they were only administered on the skin; the patients were not allowed to swallow any drug, as the physicians felt that they could harm, and the principle of “first do no harm” – “Primum non nocere” - was the most basic rule of this ancient medical tradition.

With the industrialisation and the development of modern chemistry and pharmaceutical drugs this European style of traditional holistic medicine was somewhat forgotten. But in recent years the traditional medical systems of America (the Medicine wheel), China (i.e. Acupuncture, acupressure), Nepal (herbal medicine), India (Ayurveda), Africa (the Traditional Sangoma healers), Australia (the aboriginal healers) have been revived and serious research has started to look into this traditional medicine, sometimes called alternative medicine, but in reality we should be talking about integrative medicine.

The present textbook on holistic mind-body medicine is the basic principles, while the following books will take us through all areas of medicine; teaches us somatic medicine,

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psychiatric healthcare, and even the loving and spiritual support of the patient. It has excellent chapters on sexology, and in general it helps the physician or therapist to understand and support also the patient in all kind of existential trouble. From minor psychological problems to suicidal states, this book tells the physician or therapist how to interpret what is going on in the patient and what to do – and not to do – about it.

Love, understanding, care, empathy, kindness... these crucial human qualities are re-introduced into medicine with this book and it is my wish that this book will be well received everywhere and that it will help doctors and therapists to assist patients in need of help and support for healing and positive life development.

It is an honour to be asked to write a foreword to this book that might inspire physicians and others to experience how mind-body treatment can help their patients. I wish that the book will be read by anyone interested in the health and wellbeing of human beings. It might help thousands of good-hearted doctors and therapists to assist millions of today's patients so desperately in need of help and support for healing and development.



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## Preface

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Holistic medicine, or quality of life as medicine, as we often call it, is basically a strategy for improving the patients quality of life, through mobilizing of inner resources. This can never harm and will almost always benefit the patient's wellbeing and often also help him or her to fight back the disease. The cure is very much the same for all patients: Help to know yourself better and to step into character and be more yourself, and more in tune with the universe. So it can be started right away, also without a specific diagnosis. Is modern, holistic medicine powerful? Oh yes, very much so. Holistic medicine is a truly powerful medicine, in spite of nobody really understanding the deepest structures of consciousness, the connection between mind and body, and the way holistic medicine works. But just because our scientific understanding admittedly still is limited we should not stop doing what we know works. In this book the authors cover the basic principles of philosophy and ethics of traditional Hippocratic medicine from a new and modern scientific approach.



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# Introduction

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*Søren Ventegodt and Joav Merrick*

*To err is human, to learn from ones mistakes is divine*

In the beginning of your career as holistic medical practitioner you will make mistakes. You are likely to make all the possible errors there are. Do not be sad. Fortunately holistic medicine is not like biomedicine, where an error can kill your patient. An error in existential therapy will deprive the patient his or her gift of therapy and might destroy your relationship. This is very bad for you and for the patient. But not harmful in the sense that the patient is worse off after than before the therapy. So in that sense holistic medicine is fool-proof.

And you will be the fool. And you will make one mistake after the other. There are many reasons for that, the most important being that you are a neurotic and flawed being. You have so many negative beliefs which you will manifest in so many negative life events. But if you take learning and let go of the negative believes as you identify them, you will grow. And little by little you will become a purer person coming more from your good and loving heart and less from the cold and calculating waters of your mind. The mind is programmed for helping us survive; our soul and heart is destined for love and generosity. You will get out of your mind and into life as times goes by when you practice holistic medicine. The continuous effort to serve other people will help you grow.

In the end what is wrong with us is our negative philosophy of life. Our reality is according to existential philosophers like Kierkegaard and Sartre a materialisation of our world view. Therefore only by developing our worldview can we create a better world for ourselves, a better life. The patient's philosophy of life is what has created the mess the patient presents to you. It is difficult to understand consciousness and the structures it holds on to. It takes time to learn to know the reefs under the dark waters. But little by little you will make progress, and you will find ways to learn the reefs from the waves above. You will improve your own philosophy of life, and having a positive and constructive approach to life yourself, you will be able to help other people improve their philosophy of life. For us, this is the true essence of practicing holistic medicine.

“As to diseases, make a habit of two things - to help, or at least to do no harm” (1)

If you understand ethics in full depth you do not need to understand anything else; you will be a perfect holistic physician. According to Hippocrates a doctor's value depended solely of his personal goodness, his personal level of ethics.

The famous Hippocratic Oath was a promise of ethical conduct at all times, in private and professional life. Hippocrates was keenly aware that physicians often did more harm than good to the patients; he was against the internal use of medical plants and minerals as he believed these to have more adverse effects than beneficial effects. He was a wise, highly respected man, who believed in love, good care, honest talk, therapeutic touch, and in direct and conscious processing of the emotional and philosophical causes of diseases.

Hippocrates believed that all problems were caused by not knowing who you are. In the same way as the Oracle of Delphi had the saying "Know thyself" over the door, Hippocrates and his students believed that self-awareness and self-insight is the key to healing of body, mind and spirit, and the path to human happiness. So the physician needed to know himself. That was the most important. During the process of self-exploration love and humility would be seen as human core qualities. The physician's job was to support self-exploration. He did this by his goodness and wisdom.

Interestingly the Hippocrates Oath has survived till this day. But the content has been completely changed. It is correct that Hippocrates students, as we also do today, promised not to abuse the patient's body and to treat all people alike. But "first do no harm" has been completely forgotten. Today physicians use highly poisonous drugs which often harm one in two or three patients; surgery and other medical procedures are often also very risky for the patients. Loving care and support has primarily become a job for the nurse and the physical therapist and is often not seen as therapeutic anymore.

So what happened to medical ethics? Well, to a large extent it went down the drain with the technological and commercial development of medicine. You cannot make a biologically active drug un-poisonous. You cannot cut people open without a large risk. So modern medicine is only possible because we systematically deny our ethical obligations as physicians.

Now it is up to you what kind of medicine you will practice. We suggest that you take ethics seriously, and adjust your professional behaviour to your ethical consciousness. This will not be easy for you. But you will start to do good and – first you will do no harm.

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## **Section 1. Positive philosophy of life**

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## **Some errors, problems and difficulties in scientific holistic medicine**

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In the introduction to this book we explained that holistic medicine is wholeness-centred, focusing on the whole human being. But holistic medicine includes more than that: It includes the patient's whole world. Many schizophrenic patients are being treated for years with no results, but the day they find a boyfriend or a girlfriend and establish a close, intimate relationship they often recover spontaneously, as the literature of recovery has shown. So healing takes resources, and these resources have to come from outside the person, from intimate relationships. This is the principle of resources.

To heal the existence – enter the state of healing often called salutogenesis - the patient needs to encounter the painful emotional material creating the inner conflicts that show themselves as mental illness on the symptomatic level. To help the patient overcome their emotional resistance and confront the historical problem the physician or therapist needs to support the patient in processing by helping the patient to get into the gestalts or painful, traumatic, early moments of life. This is done by the principle of similarity, as Hippocrates and his students found out some 2400 years ago (1). The principle of similarity states that to heal you must be helped back by “clues” that signifies the content of painful events. This can be done in many ways from simply sending you back in time in regression therapy, to working on your emotions and sexuality as it is done in psychodynamic psychotherapy (2-4). Psychodrama, holotropic breath-work (5) and other active methods can help you remember and confront.

Today we know of literally hundreds of different “non-drug” methods to introduce salutogenesis, as we shall see later. These methods have been used for at least two thousand years in Europe and has – in spite of their often dramatic appearance - been found to be extremely safe (6) and in accordance with the famous ethics of Hippocrates (1). The patient will heal in the opposite pattern of the way he or she got ill; this is the famous law of Hering – the third principle of holistic healing.

The fourth principle of holistic medicine, also going back to Hippocrates is that you should use as little force as necessary – “Primum non nocere”. The fifth principle is that you should always try to heal the patient's whole existence, not only a specific symptom. Table 1 lists the five principles (7).

## **Errors in holistic medicine**

When you know the principles of healing you also know what NOT to do – the formal errors of holistic medicine (7).

When you know and understand the principles of healing and the errors following from not respecting them, you are ready to start treating your first patient with holistic medicine. Beginning is really that simple. Mastery on the other hand takes years of practice, and countless hours of effort and reflection.

### **Errors regarding the principle of resources (healing happens in surplus of resources)**

Therapy gives support to the patient, in many different forms of resources, and only when the patient gets exactly the supportive quality what was missing at the moment of the trauma – security, love, care, acceptance, acknowledgement - can the healing happen. To do this takes a lot of empathy and understanding.

The most common reason for lack of resources is lack of confidentiality, intimacy and trust. If a therapist is afraid of intimacy and do not dare to touch the patient, when and where the patient needs to be touched, the healing will not happen.

A strong indication of lack of sufficient resources is that therapy becomes very painful for the patient. Even the most traumatic and painful of traumas, i.e. from incest, rape, and violent abuse, becomes bearable if resources are plenty.

### **Errors regarding the principle of similarity**

The most common error is not understanding or ignoring the principle of similarity; this means that the therapist or holistic physician only treats the patient in a good, supportive and kind way. To really induce the process of healing, the patient must be guided into the repressed material that made him or her ill. According to the famous principle of similarity, originally formulated by Hippocrates and today used in many types of holistic medicine and CAM i.e. by the homeopaths, the patient must be exposed to a small dose of what originally gave him or her the traumas that made the patient ill – violence, neglect, abuse, mental pressure or whatever.

The principle of similarity means that only by burdening the patient with a moderate degree of “evil”, will he or she be healed. This is in sharp conflict with the moral rules of most modern societies, and therefore many physicians and therapists avoid giving the therapeutic dose of “evil”, that is necessary to get the patient into the process of salutogenesis, or existential healing.

The holistic therapist needs a thorough understanding of evil. Section four, especially chapter 21, explains human evilness. At the core of the difficult art of holistic medicine is the ability to expose the patient for a well-dosed “evil” stimulus in the good intent of healing and helping.

### Errors regarding the principle of using as little force as possible ("Primum non nocere" or "first do no harm")

Errors regarding the principle of using as little force as possible happen when the therapist uses more force than necessary, i.e. coercive persuasion, unnecessary fixation, medication with antipsychotic drugs when psychotherapy could have helped better. Errors of this type typically lead to re-traumatisation i.e. the patient getting another trauma that represses the patient even more than before. A special type of "implanted memories" also comes from use of excessive force in therapy, and should be avoided. The only way to be sure that this principle is not violated is to see if all the smaller therapeutic steps likely to help, placed on a scale from no-force to max-force in the therapy, have been tried before the next level is taken into use. For clinical holistic medicine such a scale has shown its usefulness. Obviously there will always be an element of guess here, as to how small a tool is needed and to what tool is likely to cause the patient unnecessary suffering. Fortunately side effects even with the largest tools are extremely rare in clinical medicine, clinical holistic medicine and CAM.

### Errors regarding the hering's law of cure (that you will get well in the opposite order of the way you got ill)

Errors happen here when the therapist fails to notice symptoms or to understand that the symptoms and diseases that appear during the treatment is actually a necessary replay of event from the patient's personal history, which must be re-experienced and integrated, for the healing to happen. An example is to treat the patient for a skin-disease, the patient had as a child, instead of allowing the patient to confront it and understand its inherent significance and psychodynamic meaning (i.e. problems in the contact with mother). According to Hering's law of cure such a symptom indicates the release of material from deeper layers or more vital organs in the body. Hering believed that if the patient were not allowed to re-experience these things, the spontaneous regression necessary for healing could not take place.

## **Evidence-based holistic medicine**

Knowing the healing principles and formal errors of holistic medicine empowers us to identify holistic medicine, in the jungle of complementary and alternative medicine (CAM), where elements of the entire world's many different cultures contribute to the colourful, but not always too effective mix of CAM-methods.

Holistic medicine is alternative medicine in the sense that it is complementary to modern day biomedical psychiatry (drugs), but it is not really alternative medicine; it is rather classical, Hippocratic medicine, only made alternative by the dominance of biomedicine and pharmaceutical drugs. It is scientific and has been used for millennia. It is believed to be completely safe and also highly efficient. But how can we know for sure?

To know the positive and negative effects of holistic medicine we need to make it evidence based. When we test drugs we have the randomised clinical trial (RCT), but this

method has severe methodological problems connected to it, making it less than a perfect method for testing the effects of medicine in general. When it comes to the scientific methods that should be used for documenting the effects of holistic medicine we recommend the simple methods of testing the holistic therapy on chronic patients that have been ill for several years. We know for sure that these patients rarely get better, so it is safe to say that if they do during intervention with holistic medicine, the cure came from the treatment, not from spontaneous recovery. We can thus measure the efficacy of holistic medicine from the fraction of cured patients.

Holistic medicine works by developing self-awareness and self-insight; it intervenes on the patients' consciousness. In that sense holistic medicine is placebo. The intervention only changes the patients' consciousness. But as our life to a large extent is a materialization of our consciousness (8), then this in fact is what makes the change. When it comes to mental disorders this is even more obvious than for physical diseases. But then again, how can we know that DNA and changed brain chemistry is not really running the show?

A simple way to argue for the need of holistic medicine in psychiatry is the lack of safe treatments with pharmaceutical drugs. The drugs used for treating the mental disorders are known to have many adverse effects, and recent metaanalysis has documented that the positive effects on patients mental health (mental state) are small at best (9-11). Actually the results indicate that the drugs are not improving the patients' mental state at all (see Section 1). In this book we will not make the radical claim that no patients are helped by pharmaceutical drugs, in spite of the data pointing in that direction; we will look at the "therapeutic value" of the drugs used in psychiatry and say that the therapeutic value is low. In sections 1 and 10 you will see that the likelihood of getting adverse effects is higher than the likelihood of getting a positive effect, meaning that the therapeutic value of the drugs at best is very limited. We therefore find that holistic medicine has much to offer compared to the drugs.

In Denmark we have socialized biomedicine meaning that all mentally ill patients get free pharmaceutical treatment of their mental illness. Unfortunately we know from the official statistics that today one in four of the Danes have a chronic, mental disorder that cannot be cured by drugs. So the drugs may help some patients, but a medical system based on drugs will indisputably leave the majority of patients uncured – as chronic patients. It seems from the documentation we will present in section 13 that holistic medicine can cure every second mentally ill patient. This seems to be better than the improvement rate of one in three often found in psychodynamic psychotherapy (2-4). The major difference between psychodynamic psychotherapy and holistic medicine is that the latter includes the body in the treatment (see section eleven). But still, the effect of psychotherapy is much better than the effects of the pharmaceutical drugs according to the research made by Leichsenring (2-4).

In conclusion medicine must be evidence-based. Evidence-based holistic medicine cannot use the standard RCT-test as a placebo intervention cannot be tested against placebo. Instead the efficacy of holistic medicine can be tested directly on chronic mentally ill patients who are not likely to recover spontaneously. In this section we shall take a critical look at today's psychiatry, its safety, its efficacy and its hypothesis.

In sections two and three we shall then see how holistic medicine approaches the mentally ill. In sections four and five we try to understand man and his brain. In section six we then focus on the aetiology of the mental disorders from a holistic perspective. Section seven is about the problems of decision making and sexual transference in the patient-

therapist relationship. In section eight we focus on personality disorders and schizophrenia. In section nine we take a broader, social perspective, and look at the consequence of sexual trauma for mental health. Section 10 is about children and adolescence. Suicide and suicide preventions are discussed in section 12. Section 14 gives tools for research and quality assurance in the holistic medical clinic and finally section 15 goes in depth with the important ethical aspects of holistic medicine.

## **The holistic approach in practice or the helicopter perspective**

Many problems are easier to solve than the hard core mental problems the patient might have, and the solution of these problems will almost always facilitate the cure of the mental disease. We therefore always start by screening the patient (using QOL10, see Section 10) for problems that could be solved in the start of the treatment with the following questions:

- Q 1 How do you consider your physical health at the moment?
- Q 2 How do you consider your mental health at the moment?
- Q 3 How do you feel about yourself at the moment?
- Q 4 How are your relationships with your friends at the moment?
- Q 5 How is your relationship with your partner at the moment?
- Q 6 How do you consider your ability to love at the moment?
- Q 7 How do you consider your sexual functioning at the moment?
- Q 8 How do you consider your social functioning at the moment?
- Q 9 How is your working ability at the moment?
- Q 10 How would you assess your quality of your life now?
- We collect the answers using a five point symmetrical Likert rating scale:

1. very good
2. good
3. neither good nor bad
4. bad
5. very bad

or

1. very high
2. high
3. neither low nor high
4. low
5. very low

Regarding Q 1 “How do you consider your physical health at the moment?”, small physical health problems like nail problems, eczema, allergy or chronic infections should be

cured. Physical appearance and self confidence is very important for the patient's general feeling of self-worth. If you want to treat these health issues with holistic medicine we recommend our book on the holistic treatment on physical disorders (12). Most likely your physically ill patient will suffer from pain, often chronic pain, so we have included the holistic treatment of pain in this book as chapters 43 and 44.

Physical pain is a serious hindrance to mental healing so to treat patients in pain you will have to address the patient's pain first. This is done by the use of therapeutic touch, as described in section eleven. Again there are no magic tricks to it, just touch the part of the body that hurts and find out why it hurts and listen to the story the body has to tell. Be naive. Go to the body as a parent would to a child in pain. Just be caring and comforting. Helping a patient in pain is not difficult. It is just a question of expressing you liking for this person in a physical and intimate way. We know of course that just this simple thing might scare the best of biomedical psychiatrists, who have used half a life on treating patients on the other side of the desk. But believe us: As soon as you have starting practicing holistic medicine and noticed the miracles of healing that comes from intimacy, you would never want to sit 6 feet from your patient again.

Regarding Q 2 "How do you consider your mental health at the moment?" This question is the most significant of them all, making you and your patient agree on the common goal: That the patients should experience a good or very good mental health in the end of the treatment. Self-rated mental health is presumably the best predictor of future good, mental health, signifying that the patient really is permanently cured if you can reach that goal together. To measure this before and after the treatment will also allow you to document your clinical success in a simple way.

Regarding Q 3 "How do you feel about yourself at the moment?" This question is always a great opening for at talk about existence in holistic medicine.

Regarding Q 4 "How are your relationships with your friends at the moment?" Friends are important and often the patient needs new friends. Support in re-establishing a social network is an important part of holistic treatment.

Regarding Q 5 "How is your relationship with your partner at the moment" Many patients have problems in their intimate relationships especially their one-to-one relationship. If they do not have a partner, helping the patient to get one is an important part of holistic therapy. This can be done in many ways, from advise on behaviour (get outdoors! Use the city! Go dancing. You will not find him or her in you private home!) to the improvement of personal hygiene and self-esteem. Support that leads to psychosexual development might be the most important help here.

Regarding Q 6 "How do you consider your ability to love at the moment?" Love is a spiritual thing. To reconnect the patient to his or her soul and opening the heart is essential in holistic therapy.

Regarding Q 7 "How do you consider your sexual functioning at the moment?" Sexual problems are common among mentally ill patients and often the sexual problems are more easily cured than the mental disorder itself. With a well functioning sexuality the patient is much more likely to find a loving and supportive partner that can be a real resource for the patient. Holistic therapy for sexual problems is usually extremely efficient. If the patient has sexual problems these problems needs to be addressed as a part of the treatment. Often it makes things clearer to define the treatment of the specific sexual problems as a parallel sexological treatment. We recommend our book on holistic sexology (13).



Sexuality plays a profound and important role in holistic medicine; the original treatment of female mental disorder was basically a sexological treatment as the Hippocratic doctors believed that mental disorders was a product of arrested psychosexual development.

The issue of sexuality is therefore likely to appear in holistic therapy of any mental disorder. Instead of making sexuality a thing that little by little reveals its importance, the speed of therapy is dramatically increased if sexuality can be an issue from the beginning of the treatment. This is most elegantly done by defining a specific treatment for the sexual problems to be done in parallel with the treatment of the mental disorder. Later the two treatments serving the two different purposes, one to rehabilitate sexual ability and one to rehabilitate mental health, will slowly merge into the healing of the patients' whole existence. The more specific goals that can be set, which all points in the direction of existential healing, the faster and more efficient will the treatment be.

Regarding Q 8 "How do you consider your social functioning at the moment?" Social functioning is often low among patients with mental disorders. Many treatment systems put lots of focus on this aspect and we find it important as well.

Regarding Q 9 "How is your working ability at the moment?" The working ability is often low and the patient often dream of studying and working. It might seem an impossible goal but it is important to let the patients have his or her dream of a healthy and normal life. We have seen schizophrenic patients heal and one of the schizophrenic patients described in chapter 34 just finished his masters' degree in computer science. So it is possible to come back and it is important to support the patients also in this aspect. They should not start to work or study before they are sufficiently well, but the direction towards a normal life means everything to them. This goal is important to motivate them to work as hard as they can to get well again.

Regarding Q 10 "How would you assess your quality of your life now?" The quality of life is important as a goal. The patients' philosophy of life should be developed during the treatment and often philosophical exercises, that allow them to express their thoughts and beliefs, are extremely valuable parts of the treatment. We recommend our book on holistic philosophy of life to the doctor or therapist who wants to work philosophically with the patient (14).

Holistic therapy addresses all aspects of life. The art of holistic medicine is to understand the order of things and the issues to focus on. In a way this is simple, because the patient will by the symptoms signify his or her needs right away. It is an art because of the resistance. The patient will not confront the difficult emotions if it is possible at all to avoid them.

The first step is always to win the confidence of the patient. To do this the goal must be clear, the strategy convincing, and the emotional pressure on the patients neurotic side low. With the confidence the patient will open up, and receive support from the therapist and from other people, and with more resources available, more difficult problems can be addressed. In the end the most difficult existential problems that causes the symptoms known as the mental disorder, can be confronted and solved, and the patient is cured.

We recommend that you use the QOL10 questionnaire and notice the 10 answers in the patients' records. You will then be able to document the effects of your treatments, and you will be able to see your improvement as a therapist as the years go by. Do not miss this important opportunity to gain self-confidence as you see your clinical results documented in the case records. If you want to write a research paper on your work you will in five or 10 years find that the data you have collected in this simple way to be of immense value. Section

fourteen will teach you more about research and quality assurance in clinical holistic medicine.

To practice evidence-based holistic medicine is after all more than anything about being sure that what you do for your patients really works based on scientific evidence! So use these few minutes to collect that evidence. Interestingly failures to help patients and reflections of what went wrong are the most important source for learning. Only by collecting the evidence that we are NOT HELPING some of our patients (in the first years most of them) can we take this painful lesson or else we will make our self belief that we are helping. Do not fall into that trap.

## Getting started - start today

If you understand the five principles of holistic healing in table 1, you are ready to start practicing holistic medicine. You can of course also wait until you have read the whole book and understood every word of it. But the sad thing is that when it comes to the practice of holistic medicine it is as much an art as a science.

The leaning comes through practice. It is *leaning by doing*. What you need to find out is how you, as the person you are, can help your patient to heal. Every patient is unique as you are. Therefore every treatment will be unique also.

In biomedical psychiatry, every specialty takes care of their specific part of the human being; the psychiatrist thus takes care of the brain. If you are a medical doctor, and wants to practice holistic medicine, you must start by understanding that this approach does not work in holistic medicine. You need to take care of everything and every little detail is important. It is very much like a mother or father taking care of a baby.

**Table 1. The five central principles of holistic healing in clinical medicine, holistic medicine, clinical holistic medicine and CAM (7)**

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- The principle of resources: only when you are getting the holding/care and support you did not get when you became ill, can you be healed from the old wound.
  - The principle of salutogenesis: the whole person must be healed (existential healing), not only a part of the person. This is done by recovering the sense of coherence, character and purpose of life of the person.
  - The principle of using as little force as possible (Primum non nocere or first do no harm), because since Hippocrates (460-377 BCE), "Declare the past, diagnose the present, foretell the future; practice these acts. As to diseases, make a habit of two things - to help, or at least to do no harm." it has been paramount not to harm the patient or running a risk with the patient's life or health.
  - The similarity principle: only by reminding the patient (or his body, mind or soul) of what made him ill, can the patient be cured. The reason for this is that the earlier wound/trauma(s) live in the subconscious (or body-mind).
  - The Hering's law of cure (Constantine Hering, 1800-1880): that you will get well in the opposite order of the way you got ill.
-

Actually, according to holistic medical aetiology the patients often got ill because of poor parenting early in life. So you need to be the good parent. You need to be caring, loving and supportive. If you can be that, you can start the treatment. It is not that difficult. Just explore the patient together with the patient. Holistic medicine is clinical medicine which means that the examination of the patient together with the patient, giving the patient a thorough understanding of him or herself, IS the cure. We therefore often call it clinical holistic medicine. It doesn't matter what you call it. Just be there with the patient, help him or her understanding existence and life in sufficient depth and the existence will heal and the disease will be cured. It is that simple. So start today.

Pick yourself, among all your many patients, the patient you care most for, the patient that is closest to your heart and who you most want to help. Simply spend one hour every week or more together with this patient, just helping the patient exploring him or herself. Just sit close and talk.

Start being personal; open up and share what is happening in your own life, also the difficult parts of it. Do not burden your patient, do not ask for advice. Just share to show that you care. Win trust by showing that you trust. Be close. Give of your love. Make the healing happen in small, but important steps. It is not that difficult. What is most difficult is getting started, and having your first success. When you have had this, just treat all the other patients the same successful way. When you can do this with a majority of your mentally ill patients, you have become a holistic psychiatrist.

Do not wait. Start today. Read this book while you are treating your first patient. You will find that many of the questions that arise from your clinical work with this single patient will be answered little by little by this book. It will be difficult for you to understand what is going on in the patient, in you and between you. You will most likely make most of the errors mentioned above, and more. But do not worry. If you come from a good intent these errors will not harm your patient, but only make the treatment take longer time. If you get into the difficult area of sexual transference, which you most likely will if you treat a patient of the opposite sex, which we always recommend, make sure that you keep your sexual borders and behave ethically. We do recommend that you read section 15 before you start treating your first patient, and definitely before you start including bodywork (even holding hands) in your treatment.

The treatments of your first patients with clinical holistic medicine are likely to take several hundred hours. After practicing holistic medicine for about 20 years we can treat most of our patients in about 20 sessions of therapy (see section thirteen). Holistic therapy takes time, much time in the beginning and less time in the end. The first year you can only treat a small number of patients; when you are experienced you can treat hundred patients a year or even more.

You will find that your ability to help your patients corresponds perfectly to your ability to love. Practicing holistic medicine will teach you to love thy neighbour as thyself. It will open your heart. It will challenge and develop you. This is why it will be interesting for you to practice holistic medicine for many years to come. Never forget that to cure your patient is an act of love. It is not an act of power, not an act of force, for you can never force your patient to heal. It is not even an act of knowledge for your knowledge and understanding will not help your patient, only the patients' own understanding will help him or her. Therefore the art of helping is the art of caring.

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## Exercises

1. Find a person in your personal circle that you care for and want to help. It should not be close relative, but maybe a close relative of one of your best friends, like a little sister or brother. If the person is interested in your help, you can help this person to know him or herself better by analysing first the state of being using the 10 dimensions of QOL10 and after that the five dimensions related to mental illness in this chapter. As the person gets a thorough understanding of how the personality helped survival in childhood but now only disturbs and destroys life, you will see the loss of identification and at the same time the betterment from the mental disease.
2. If you during the course of treatment gets into problems you must find a professional therapist to supervise you. If you feel insecure this must be a smart thing to do in the beginning of the treatment.

3. If you are a group of students working together to learn, it can be of huge value to make a Bálint group where you meet and share your experiences. Find a professional Bálint instructor to help you set the group up and if possible take the leadership in it until you are able to run it yourself.

### **Box on Bálint**



Michael Bálint was born Mihály Maurice Bergmann, and was son of a physician in Budapest. He changed religion from Judaism to Christianity. During World War I Bálint served at the front in Russia. He completed his medical studies in Budapest 1918. His wife was Alice Székely-Kovács. Bálint read Sigmund Freud and attended lectures of Sándor Ferenczi, who in 1919 became the world's first university professor of psychoanalysis. Bálint and his wife Alice was later educated in psychoanalysis. In 1924 the Bálints returned to Budapest and gained fame in Hungarian psychoanalysis. During the 1930s they emigrated to Manchester, England, where Alice died in 1938, leaving Bálint with their son John.

In 1949 Bálint met his new wife Enid Flora Eichholz, who worked in the Tavistock Institute of Human Relations with a group of social workers and psychologists on the idea of investigating marital problems. Michael Bálint became the leader of this group and together they developed what is now known as the "Bálint group" (1,2). Here 12 practitioners or so meet regularly and share all their feelings, experiences and difficulties with their patients and most importantly with themselves. The first group of practicing physicians was established in 1950. Michael and Enid married in 1958 and in 1968 Bálint became president of the British Psychoanalytical Society.

Love, understanding, forgiveness and learning are core values in the Bálint work.

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## **The holistic theory of healing**

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Holistic medicine is about healing on all levels of human existence. The basic idea of healing is that the patient's life is wounded, damaged, disturbed, closed down, repressed, or in some other way destroyed and compromised. To function well again the patient will need to heal.

The paradox here is that what is harming the person is really only history. There is no objective reason that the person should not be healthy and happy. Being human means constant adaptation. And this adaptation changes the inner life of the being. It changes the way the being is set up, the way the internal energies are moving and flowing.

What keeps the being in the dysfunctional state is really only the being itself. The wound is coming from the negative learning. And the moment the being lets go of this learning, it is back on track, in full vigour.

The deepest wounds are sexual, spiritual and existential wounds gained early in life. We have found in regressive therapy that these wounds often happen either in the womb or in the first three years of life, during the establishment of the personality. Healing sexuality or spirit is not different from healing mind, body, emotions or other aspects of the human being. To be able to heal, the holistic practitioner must understand the basic principles of healing.

It is possible to understand the process of healing from a holistic perspective. According to the life mission theory that we have developed (see later this section), we can stretch our existence and lower our quality of life when we are in crisis, to survive and adapt, and we can relax to increase our quality of life, when we later have resources for healing.

### **Introduction**

The process of healing seemingly takes place on two different levels in the organism. Though not completely understood, medical science has a good understanding of the local process of healing that takes place when a specific tissue or organ gets a wound. Healing can also take place on the level of the whole organism, and this is far more mysterious.

Biomedical science has been successful in explaining processes on the level of the molecule and the cell, but often unsuccessful in explaining the processes at the level of the organism. It has accordingly not yet been able to explain what happens when patients spontaneously recover or heal completely even from a severe mental or somatic illness, like



cancer or schizophrenia. To explain what happens on the level of the whole organism is the objective of holistic medicine (1). The holistic process of healing seemed to be a complete mystery for medical science, but in the second half of the 20th century, several scientists succeeded in explaining important aspects of this complicated phenomenon. One of the most brilliant was Aaron Antonovsky (1923–94) from the Ben Gurion University in Beer-Sheva, Israel with his model for holistic healing using the famous concept of “salutogenesis” (2,3). Antonovsky’s idea was to help the patient to create a “sense of coherence”, an experience in the depth of life, strongly related to the concepts of meaning, understanding, and action. In recovering the sense of coherence, the patient accesses his or her hidden resources and improves quality of life, health, and ability to function at the same time.

Pioneers in the field of holistic medicine have developed different holistic approaches, some fairly successful. Experiments done primarily in the United States through the last decades call on a revisited and more concise explanation (4-6), a contribution to which we hope to give in this chapter.

The explanation presented below accentuates the subjective and global level of the human being. It is holistic and will therefore not deal either with the biology of single cells or with molecules. We are working on explaining the biological mechanisms behind the holistic process of healing. We hope that the scientific community will accept the model in spite of its abstract character, where we take our journey through the life mission theory (7) and not in molecular biology. However strange, the model presented in this paper seems to be of great utility in the daily clinical practice of the family physician, where patients with chronic diseases often need the holistic approach if they are to become better. This model is to be understood as a practical help or tool for the physician, not the final explanation, as we also need the mechanistic explanation at the level of the cells, but that is not given here.

## **Three stages of holistic healing**

Working directly with the consciousness of the patient is possible because the level of meaning and purpose can be acknowledged by both the patient and the physician in order to work with it and develop (7-10). This is often called personal development and is now an increasingly popular trend in our western society. Personal development and holistic healing is also the aim of much alternative, complementary, and holistic therapy.

The human existence can be interpreted as extending from the most abstract level of existence (the consciousness, the spirit, and the soul) to the most concrete level of cells, molecules, and atoms — the physical matter. Taking this as our frame of reference, we can place the phenomena body, feelings, and mind in between the abstract and the concrete level, as shown in figure 1 (8). The cells can be found between the level of matter and the level of the body. When these cells are disturbed because of “blockages”, illness and suffering arises.

When man experiences unbearable emotional difficulties, these can be solved by repressing emotional pain from the surface of consciousness. This happens by making a negative decision that denies the original constructive intention, which causes the suffering (8). The existential pain is, together with the whole perception, turned into what is known as a gestalt (a “frozen now”), which is from that moment found as a chronic tension in some part of the mind or the body.



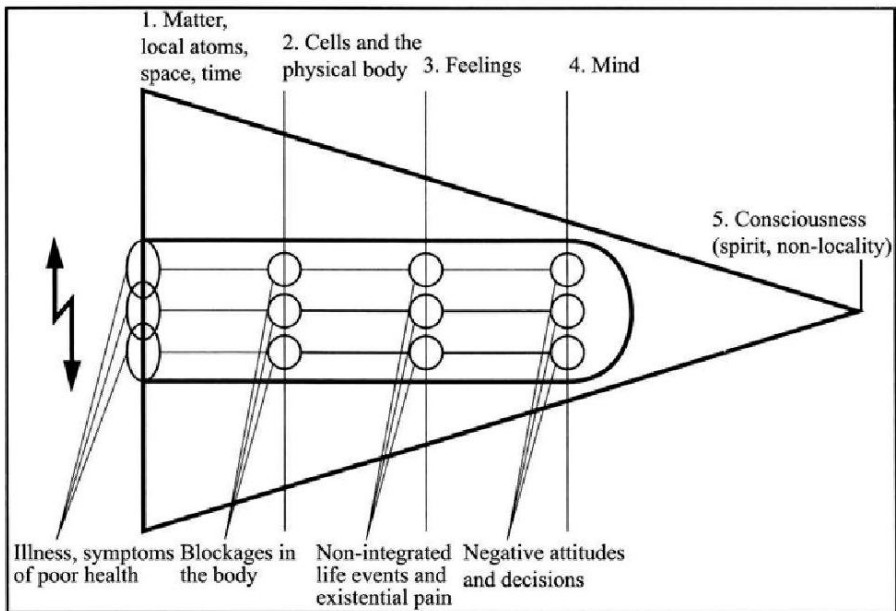


Figure 1. The holistic process theory of healing can be divided in three steps: “to feel, to understand, and to let go”. “To feel” is to set feelings on the body, “to understand” is to set words on the feelings, and “to let go” is to set consciousness on the words. During these three steps, the illness and suffering is treated causally, as the aetiology seen from the holistic perspective is the “blockages” in mind and body. The blockages are caused by feelings, suppressed by negative decisions into the tissues of the body. In the optimal process of holistic healing, the three above-mentioned steps occur at the same time.

Working with our patients in holistic therapy, we typically discover these tensions as chronic tightening in the skeletal muscles, but the smooth musculature (such as muscles in the intestines or the uterus) can also hold tensions. Principally, any tissue can hold any kind of tension. The symptoms of these tensions are known as health problems like chronic back pain, chronic stomach pain, and bleeding disturbances without any identified physical cause, or psychosomatic origin. According to this theory, sickness often occurs because emotional pain is suppressed and placed in different tissues in the body, which thereby hold the painful occurrence, the gestalt, until this is processed and reintegrated.

The holistic process of healing is exactly the opposite process of a crisis, creating the problem in the first place; we can identify the same three stages as are found in a crisis, just in the reverse order:

- The patient initially opens himself up for repressed feelings, feeling them again. Getting rid of the emotional pain is the last step in the crisis.
- The patient deals with the occurrence in his consciousness and understands his own responsibility about what has happened. Denying the responsibility and escaping the conscious scenario and the painful perception is the intermediate phase of a crisis.
- The patient perceives the decision that once was made, and understands the inappropriateness of maintaining it. This causes him to let go of it, and heal. Taking

this negative perspective or decision is what initially brought the patient into the crisis; of course, this is usually provoked by some unfortunate condition of life.

This three-step model was developed after years of studying the best and most successful kinds of alternative treatment. These were intervening on the levels: body (bodyworks like Rosen therapy), feelings (gestalt psychotherapy), and mind and soul (philosophy of life). The intention was always to help the patient be himself, understand, and take responsibility for his own life. Step 1 was facilitated by body massage and other kinds of physical contact and care, step 2 by psychotherapy and conversations, and step 3 by life philosophical training and reading of insightful books.

For a long time, the three-step model seemed sufficient as these steps really seemed to be what was needed for holistic healing. For several years, we combined bodywork and psychotherapy with philosophical training at the Research Clinic for Holistic Medicine in Copenhagen. The approach worked well for some patients, but most patients were unable to achieve complete recovery and reach the level of full self-expression that was the ultimate goal in the holistic treatment.

Realizing that the alternative therapy gave the patient an experience of getting help without a full recovery made us re-evaluate our approach. We learned that the recovery was sometimes only temporary and that observation forced us to develop the model further, into the holistic theory of healing, presented below. For example: Could a patient with low back pain, treated by holistic bodywork, after a period of feeling better for one month, come back and need a new treatment, and so forth, year after year? Just moving the problem out of the body and into the domain of the patient's feelings did not help the patient, because it was not sufficiently integrated emotionally.

Another example was the common experience among psychotherapists, that in spite of rapid and visible progress in the beginning of the therapy, incest victims very seldom got back their normal ability to feel; in spite of many years of therapy, their feelings did not heal. Only by making sure that the patient gets through all three stages — in the same therapeutic session or series of sessions — the problem is conclusively solved. When the patient has let go of his negative decisions by the end of therapy, the trauma is completely healed and the experience is like the traumatic event never took place.

To make sure the patient goes through all three steps and obtain real progress in the holistic therapy, it is of advantage that the therapist masters all three dimensions of the therapy.

The therapist must be holistic in the broadest sense of the word. We learned that if the holistic therapist also is able to give acknowledgment of the soul and spiritual dimension of the patient, and acceptance of the body and sexuality of the patient, he can take the patient into a state of being that we now call “being in the holistic process of healing” or “being in process” for short. When a holistic therapist is able to take his patient into this process, even the most severe earlier traumas seem to go all the way to complete healing.

The entire and complete healing, where the problems are solved by the root of existence, is consequently the goal of holistic medicine. The model has been tested in a sequence of pilot studies (9,10) since 1998, as well as in clinical practice, and it is still being developed. From the clinic follows the example below.

## **Case story**

As an example of such a patient from our own clinical practice, we can refer to a female patient in her twenties called Anna (11). The story of Anna is her own story, as she has recalled it in the therapy. As Anna decided not to confront her family with her memories, these recollections have not been confirmed nor dismissed by adult encounters with the people of her childhood reality. We therefore do not know for sure if her recollections are “implanted memories” or factual events (see chapters 18-21). From the dramatic positive effects on her mental health and general well-being from integrating these events we have reached the conclusion that these events most likely actually happened as she has recollected and described them. The way Anna recovered was so remarkable that she in many ways has served as our ideal model-case (see chapter 23-25).

Three different men, including her father, raped Anna many times as a child with some of the abuse extremely violent. On arriving at the clinic, she appeared very confused, psychological disturbed, weeping, labile, and with poor social functioning. She believed that she was on her way to a nervous breakdown, or maybe even a psychosis at the beginning of the therapy.

In the holistic therapy, she found approximately 200 negative decisions that she successfully let go of. She went through the process, which took two years and approximately 100 therapy sessions of one or two hours, besides thousands of hours of homework for her to do. Afterwards, she returned to a normal and healthy emotional state, and could begin to have a natural relationship with others and normal sexuality. The therapy occasionally required a substantial holding from several individuals, and during the process she continuously and spontaneously returned to her childhood, until there was no more traumatic material to heal.

During some of the most intense trauma sessions, the patient was in a state of such profound regression that her condition could be described as psychotic. She passed these episodes unproblematically and without any kind of medication, and was capable of taking care of herself between the sessions.

After two years of therapy, she entered a calm and stable phase, and was able to make an appraisal of her situation. She gained confidence and self-esteem, and felt that she was in full control of her life. She realized that her intelligence had increased to such a degree that she successfully could study at the university. She started a new life of higher quality, taking into use her intellectual, social, sexual, and many other talents.

## **The holistic state of healing: being in process**

“To be in holistic process” is our designation for the state of holistic healing, achieved by a patient, who is able to trust and receive the holding and processing offered by competent therapists. The patient needs to have the necessary personal resources, in a setting where the intention from both the patient and the physician is the healing of the patient. The process is a “high-energy state of consciousness” often with high arousal, since it has the same intensity as the trauma that originally caused the patient to escape from an overwhelming emotional pain. The result of this holistic process of healing is a spontaneous transfer back to one’s self from the position of the ego (12).

It can be extremely painful and almost unbearable to be in a holistic process, because existential life pains are coming back just as if they had never been deserted. An especially interesting recent finding from our laboratory is that the process does not have to be painful, if the patient is supplied with all the necessary resources in the therapeutic session. If the patient is now receiving what historically was missing, the gestalt is not painful, but joyful to confront, as the pleasure of receiving in the present now is greater than the historic pain. We believe this to be an important discovery, since it means that even the most painful traumas can be integrated in a graceful and noble manner into the holistic therapy. We have identified nine factors that facilitate the process of the patient entering into the holistic process of healing, and staying in it until the process of healing is completed:

The physician has a perspective in accordance with life. This comes from a personal philosophy of life that holds life, existence, and every individual soul as sacred and of immense value.

- The patient has a perspective in accordance with life.
- The patient appreciates fully the value of his own life, even if this value is not experienced in present time.
- A safe environment, peace, calmness and time. Personal resources, rest, tasty food, no crises with family or friends.
- The patient has a will to live and to be happy.
- The physician has the intention that the patient will heal.
- The patient has the intention of healing himself.
- The patient has enough trust to receive the holding and processing.
- Substantial and competent holding from the physician, nurse, or other employees.

The five fundamental qualities of holding the patient to “go into process” are:

- Awareness
- Respect
- Care
- Acknowledgment
- Acceptance

These qualities correspond with the three existential dimensions of mankind (11):

- Purpose or love – axis: as whole persons we want to give to others. Here the essential is the relationship to other people and what we have to offer (our purpose in life) (11). The holding need is acknowledgment of our soul and talents.
- Power – axis: body, feelings, and mind. Here the essential is our consciousness and survival. The holding needs are awareness, respect, and care.
- Gender and sexuality – axis. Here the essential is pleasure and the ability to enjoy. The holding need is acceptance of body and sexuality.

## The holistic process of healing the existence

If our life is viewed from the perspective of the life mission or purpose in life, the process of holistic healing can be understood in a very simple way. In our natural condition, we live in a balance between “to be”, giving us happiness and “to do” giving us often severe emotional and existential pain. Being is in essence a wonderful thing, happiness is an intrinsic factor in life; doing is mostly connected with trouble, effort, failure, and learning. In our natural state of being, life is a dynamic condition in which our existence can be presented as an energy-filled and dancing spring (see figure 2), the energy of our life — of our being — coiled around our purpose of life, the source of our doing.

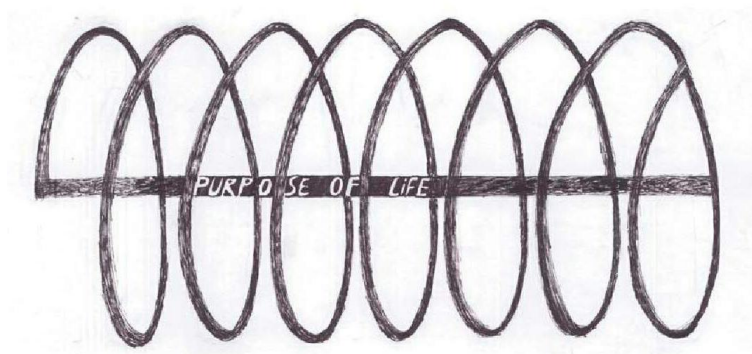


Figure 2. In our natural condition our existence can be compared with an energy-filled and dancing spring.

When our existential needs are not fulfilled, and especially when we feel that our survival is threatened, which gives us the highest intensity of pain, we may make one or several decisions that modifies our existence. This is done to get what we want, and to survive. Our decisions now stretch the spring, and bind the energy that previously was dancing freely around. As we make more and more negative, existential decisions throughout life, we move further and further away from our natural state of being (see figure 3).

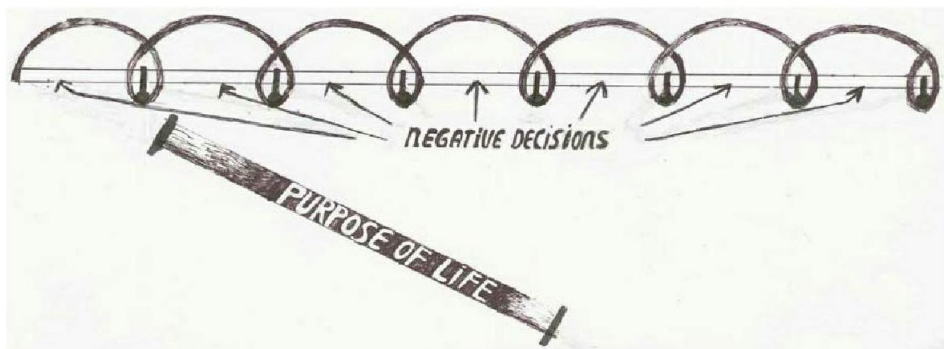


Figure 3. Low quality of life; poor health and poor functional ability in relation to social life, work life, and sexuality are derived from locking up your existence with negative decisions. The condition is rigid and un-dynamic and can be illustrated by a stretched spring that lost its ability to dance and vibrate freely.

Psychologically we are losing the contact with our genuine selves. Mentally we might lose the ability to observe reality from different perspectives, or maybe even our psychological health. Emotionally we might lose the ability to feel. Bodily we might lose our physical health. Sexually we might lose our ability to engage, feel passion, and take pleasure. Spiritually we lose our sense of coherence and meaning. The holistic process of healing our existence brings all of this back, together with our quality of life, health, and functional ability in general.

When considering children, it is a little more complicated, because children usually still have parents that are not completely competent holders. When parents solve their existential problems in their own lives, which often prevent them from giving the child the necessary holding, the children will normally get back their quality of life, health, and functional ability. Often it is much more efficient to help parents be better parents, than to work directly with the children. Often, one hour of competent holding of the child by the doctor demonstrates what is needed sufficiently to give the parents a better idea of competent parenthood, and this alone can solve many of the problems for the child.

## **Conclusion**

If the physician adapts the necessary skills in holding — acknowledgement, awareness, respect, care, and acceptance — meeting the trusting patient is often enough to make the patient spontaneously go into the holistic process of healing. This process is characterized by a certain feeling of “existential movement” also known from a crisis (a feeling much like if the ground — the basis of the whole patients life — is moving). The existential movement of healing is just the opposite of the movement of crisis and adaptation for survival. In principle any problem caused by disturbances of the cells and tissues by “blockages” can be healed.

From the most abstract, holistic perspective, every problem, illness, or suffering related to the wholeness of the person basically needs the same holistic treatment: The five-dimensional holding and intention of the physician that brings the patient into the state of existential healing. This condition is often very intense because it has the same intensity as the original trauma that forced the patient into modifying himself using the immense power of decisions.

The state of healing is not painful if the holding supplies the patient with the necessary resources. Even with the most severe traumatic life events, the confrontation of the most severe emotional pain will often be over in a few seconds or minutes if all the patient’s resources are fully engaged in the process of healing. Sometimes the holding process needs more persons than just the physician or therapist, and sometimes an expanded amount of time (days) is needed for the patient to initiate, go through, and conclude the process of returning to his more natural state of being.

If the intention by the patient or the physician is unclear or a lack of correct holding, the process of treatment can drag on for a long time or may even prevent the patient from recovering or getting healed. If the physician does not succeed to get the patient through the holistic process of healing, this is usually because the physician or patient needs a more positive philosophy of life, a more safe environment, more personal resources, clearer intentions, more trust, or a more substantial and competent holding from the physician, nurse,

and other employees. If the problem is with the physician, this can often be rectified through the use of existentialistic, oriented therapy.

To the reader who finds our explanation complicated and difficult we want to say: You do not have to understand this in your head. If you dare to care for and unconditionally love your patient and give your gift honestly, in spite of all resistance and trouble this endeavour might help your patient to heal in the end. When this happens you will witness this divine process of healing yourself. First when you get this experience you will fully understand what healing is about and eventually you will find your own words to describe and explain the miracle of existential healing. Just trust your instincts, give your love without doubting yourself, follow your intuition and inborn sense of wisdom and the miracle of healing will happen also to you and your patient. It is not complicated; it is not a mind thing. It's all about meeting heart to heart, soul to soul, and human being to human being. Meeting from the bottom of your heart is really all it takes. As you practice you will be still more capable of doing it. Love is not a thing you can expect to be able to; for a loving heart in the end to be able to embrace and contain everybody it must be trained and developed every single day.

In many ways sexuality seems to be the antidote to love; the animalistic side seems to be the opposite of the spiritual. But this dichotomy is the illusion. Love and sexuality are in the end from the same divine energy within all living beings. Only love can heal sexuality. Only by being loved and accepted unconditionally, your patient can return to be the true version of him or herself. And this journey back to natural existence is what holistic, existential healing is all about.

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## **Exercises**

1. Discuss the idea that all that needs to heal is consciousness.
2. What do you think: Is life a materialisation of consciousness, or is consciousness an emergence caused by matter? Is there a balanced philosophy where both matter and consciousness can be causal to health and happiness? What is your personal preference?
3. What is healing in your understanding?







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## **Introduction to positive philosophy of life**

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Your philosophy of life is the sum of all the beliefs you hold in your mind. These beliefs can be in accordance with life or in conflict with life. We call this: positive and negative attitudes. So life is our fundamental and basic value here. Everything that supports life and makes it blossom is good, and everything that represses and destroys the natural expression and blossoming of life is bad.

You might very well disagree with this position. Say, if you are a very religious person, you might find God to be more important than life. You will kill to serve your belief. The Christian crusaders did that on a big scale and before and after them millions of people have died in the name of religion. You can also be a materialistic defeatist. You can believe that the world is going its way, as it is programmed to do by the natural laws. And there is not much we can do about it. In a few billions years the Sun will burn the Earth to ashes anyway, so why bother. Then again you might have a very differing understanding of what it means to blossom. You might find that fine culture, art, opera and theatre is blossoming, while sex and parties are primitive and low activities not worthy of cultivated human attention.

We do not expect everybody to agree with our philosophical position. You might disagree a lot. This is not really important. What is important is that you become aware of your own beliefs and start to observe the consequences they have. We are convinced that if you start looking at reality as a materialisation of your personal philosophy of life, you will adjust it to optimise your experience of life, other people and the world at large. These adjustments are the errand of this and the following chapters.

### **Sparks of life**

If you take a walk in the woods on a winter morning and see the sun sparkle and glimmer in the newly fallen snow on the treetops, or if you sit one morning on the pier with the one you love and watch the glowing sun rise above the sea, or if you suddenly discover that it has turned dark outside, while you have been totally absorbed in your work without a thought for anything else, you may suddenly think that there are far too few moments like these in your

life. Some people experience several high points like these throughout life, when the earth somehow spins the right way around just for a brief moment. Others only experience this a few times in their lives.

For some it often happens under certain circumstances, whereas others experience it by pure accident. Sometimes, one of these experiences can change the course of a person's life. You cannot force these experiences to happen, but invite them by making an effort in your life and doing your utmost in every situation.

In order to do so, you need to understand the importance of making the right decision in even the smallest of situations. Self-discipline and personal energy will give you control of your life. When you sincerely do your utmost to be in control of your life, you can catch a glimpse of a major obstacle to success: your inability to understand life, the world around you and yourself. However, what is missing is not merely intellectual or rational insight. It is primarily existential knowledge, which is related to being genuinely present in life, or in other words, wisdom.

Where does personal energy come from? The tiny sparks that life can hold—like Tinkerbell's magic dust? The abundance and vigour that make us feel utterly alive? The sparks are an expression of what you could call a high personal energy level. Why do some people have so much energy? Why are some people so much more alive? Far more capable of living—better at living their lives and seizing the opportunities in life, solving problems and so on? Briefly put, vital energy arises from the experience that life has meaning. The person who knows the meaning of his or her life will persistently fight to realize the dreams and longings that the heart and the soul are full of. The person who deep within knows what he or she wants and lives for is strongly and persistently and continuously struggles to make the dreams and ideals come true.

There are many people who do not strive for quality of life, a meaningful life, but who prefer to play it safe and live the secure, predictable life and cultivate the more superficial pleasures and spontaneous, sensual enjoyments. Typically, such people lead a life that is relaxed or perhaps even lazy. Instead of being in control of their lives they take things as they come. However, when these people experience problems there is often an increased temptation to put the responsibility for their own lives into the hands of experts—the physician, the psychologist, the social worker, etc. However, in many cases a person may do much more for herself than any expert can. When we begin to invest our resources in our own existence we can substantially improve our lives over a long period of hard work—often through hard battle and at great pain. If you already give up at this point and go for the easy life and leave it up to other people to solve your problems, you probably do not value your life all that much after all.

Perhaps this irresponsibility reflects your lack of love for life, yourself, your own existence, other people, animals and plants on earth, this love that is a necessary ingredient in the good life. Naturally it is impossible to supply an exact recipe for the good life, but you could say that each person has to find his own way and follow his own heart. I believe all people sense the meaning of life in their innermost soul.

However, this feeling is not enough. If the meaning of life has to run through your existence like a red thread it must be articulated in a more deliberate and specific way. You must put it in words. Every single person has to have his own well-reflected and verbally formulated version of the meaning of life. Not until we definitely know what we want will we cease to exist like a dead leaf, always blowing in directions controlled by external powers.

## **Philosophy behind quality of life**

In this chapter the material used is based on work done at the Quality of Life Research Center in Copenhagen, Denmark (1) and we make the argument that knowing the meaning of your own life and living in accordance with it, is the real source of health and well-being. We wish to point out that by seizing the meaning of life you can help yourself experience new health, well-being in your personal life, and more talent and ability in your professional life. With an ever-deeper understanding of life you can solve more and more difficult problems. By beginning with the simpler problems and ending with the most complicated ones concerning physical and psychological health, we will try to make it plausible to the reader that the art of taking care of your own health is basically about developing a sufficiently profound understanding of life. This also includes adequate ability to solve problems, sufficient self-confidence and a sufficiently responsible way of living –altogether key ingredients in the quality of life. Philosophy is not science, it is not made of scientific facts, it is not even based on such facts. It is quite the opposite: philosophy is the foundation of science, giving it aim, direction and background. Wisdom is not science. Science has structure, clear concepts, logic and rules. Wisdom has none of these, because wisdom is about simply being, and therefore knowing. But being and calmness is slowly been substituted by doing and business as the world develops its economical wealth, and likewise is wisdom slowly being substituted by science. To keep wisdom in our human culture in the future, we must try to make a science that contains it, preserves it and if possible even develops it. It is our hope that the science of the global quality of life, developing in medicine in the last decades and taking its offspring in the brilliant work of Maslow (2) and Antonovsky (3), eventually will contain this wisdom, and that our medical science eventually will be able to remind everybody who needs a better life about the basics of human existence.

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## **Exercises**

1. Describe how you understand the subjective experience of “having energy”?
2. What gives you this energy? If you have problems with your personal level of energy, why do you think that is?





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## **Quality of life, happiness and meaning of life**

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Philosophy of life is unfortunately soft. It can be justified by data, by research findings, but you can never really proof a philosophy. It follows from the nature of philosophy that it is beyond science; it's more fundamental, and science builds in it; it cannot be built on science. It is like math... If you have a mathematic problem you can apply it to science. But you cannot really argue that this type of mathematic is the right choice, as another type not tried yet may make everything look much simpler... Simplicity is connected to truth, and the philosophy and math that gives us the simplest worldview might be the best. But then again, life might not be simple; the universe might be complex by its very nature. Death is simple, life is not. So if we take life as a standard, the truth is what looks like life, not what looks the most simple.

In the Danish Quality of Life Survey we asked 10,000 people about their quality of life with the validated SEQOL (Self-Evaluation of Quality of Life Questionnaire) questionnaire with more than 300 questions on their quality of life. How did they feel, how content were they with their lives, how happy were they, did they feel their needs were fulfilled and many more questions. We asked the questions we believed to be important for their quality of life (QOL). The results were quite surprising and forced us to recontemplate the following philosophical questions:

- What is quality of life, happiness, meaning in life?
- What is a human being?
- Do we need a new biology?
- Is the brain the seat of consciousness?
- How do we seize the meaning of life and by doing this, will we becoming well again?
- What are the key concepts of QOL?

Most thinkers within holistic medicine would say that the meaning of life is about connectedness and personal development. It is about realizing every opportunity and potential in one's existence. And the opportunities have to be found and acknowledged. What do you find when you find yourself deepest down? You find your real self and your purpose in life.

You realize that you are already a part of a larger totality. Antonovsky called it coherence. Maslow called it transcendence. Frankl called it meaning of life. We call it simply being. To test if these philosophical questions were actually relevant for medicine we looked at the consequences for patients being taught the QOL philosophy. Quite surprisingly we learned from our pilot studies with “QOL as medicine” that just by assimilating the basic concepts of the QOL philosophy presented in this section, patients felt better and saw their lives as more meaningful. The improvement of the patients’ personal philosophy of life seems to be the essence of holistic medicine, helping the patient to assume more responsibility for his or her own existence.

## **Introduction**

Philosophers have through all ages been occupied with the immense questions and seemingly unsolvable problems related to the quality of human life (QOL). For half a century grand thinkers have been reflecting on the meaning of life and how to improve it and quite surprisingly, a sign of our time is that these problems are starting to soften up on the thinkers (1-3). For more than a decade, the Quality of Life Research Center in Copenhagen, Denmark, and its scientific co-workers, have walked this path also, publishing books (4-11) and scientific papers (12-29) on the good life and the good work.

Except for two books (4,5) and one paper (12) our works have often been discussing philosophy related to the concept of quality of life (QOL) and quality of working life (QWL), but without addressing the philosophical questions directly. But as philosophy is the basis of science this is not wise. We need an explicit discussion of the philosophy behind the major aims and developments in our medical science, especially as medicine is not merely a natural science, but as much a humanistic science, embracing difficult subjects like consciousness, happiness and meaning of life. In this book on QOL philosophy we take our offset in the Danish Quality of Life Survey, where we asked 10,000 people about their quality of life with the validated SEQOL (Self-Evaluation of Quality of Life Questionnaire) questionnaire (16,17) with more than 300 questions on their quality of life. How did they feel, how content were they with their lives, how happy were they, did they feel their needs were fulfilled and many more questions.

We asked the questions we believed to be important for the QOL. The results (8-11,22-27) forced us to contemplate deeply on the following philosophical questions, which are expressed in the concepts:

- Quality of life, happiness, meaning in life
- What is a human being?
- Understanding the biological connection between quality of life, disease and healing
- The brain and consciousness
- Seizing the meaning of life
- The concepts of quality of life research

To argue that these philosophical questions are actually related to medicine we need to look at the consequences of patients being taught this philosophy laid out here. Quite



surprisingly it seems like just assimilating the QOL philosophy already makes things feel better and more meaningful. We call this QOL as medicine (28,29) and this improvement of the patient's personal philosophy of life seems to be the essence of holistic medicine, helping the patient to assume responsibility for his or her own life (30). The quality of our reflexions are soft and general – pretty vague, if you are accustomed to the “hard” quality of natural science - as much philosophy is. Nevertheless we find such general perspectives of utmost importance as all science is build on such general considerations of values, perspectives on reality, interpretations of life and preferences of focus. So please bear with this vagueness and look for the abstract, QOL-supportive perspective, which materialise in our papers on QOL philosophy, as we believe that such a positive interpretation of life and reality can help many patients.

## **Starting to wonder**

Studying the results from the Danish QOL Population Survey, a very clear and somewhat surprising picture emerged. Other researchers have in the same period found similar results and had similar reflections (31-44). The essence of what we found was this: Executives do not feel substantially better about their lives than the people on the shop floor, people who work with knowledge on the highest professional level do not feel better than unskilled workers or in simple terms the rich did not feel better than the poor. Apparently, money, power or learning was not the most important aspect of the good life. Oddly enough, it is exactly these things people in our culture run after like crazy. How come? How has it come to be that money has become a value in itself? Something worth striving for in and of itself? Has everybody gone mad? Let us ask what is it, all in all, that gives us the experience of a good life. According to our study some of the most important factors were: How we relate to ourselves, how we relate to other people and to the extent that we do something we really like. Expecting these three things from life appears obvious, almost commonplace, but in reality they are very hard to get.

Recall one of those rare occasions when you spoke confidentially with your best friend. You were having a nice dinner with a good bottle of wine, and you told the friend about your life, relationship, work, friends, all your dreams. Suddenly you may experience great sorrow or perhaps even begin to cry. Life did not quite turn out the way we dreamt about. Somehow life must have more in store for us. Is this all there is for us? Life is often difficult. The senses and feelings carry us away, what others expect from us, all that we have learned about being sensible, inhibits and pressure us. The reality can easily seem to be one chaotic stream in which you are caught. Or you can experience the world as being hard as granite: You cannot scratch it with a nail; you cannot make other people change, you cannot make any difference at all. When you are low and without energy you are also often unlucky and not able to understand what it is all about, and what you can do to get on in life. Life as an entity, the entire existence when all circumstances are considered, can be perceived as good or bad, sometimes better and some times worse. There are many ways to evaluate life. When taking stock, it is usual to compare yourself with your neighbour. Is my life better or worse than his or her life? You can work your way through life systematically and look at your health,

economy, partnership, friends, family and your working situation. Also, you can just sense if you feel better, is more on top of things and have more energy.

When you compare yourself with your neighbour it is normally not that hard to conclude that you do have a decent life. It is far worse when you look deep within yourself, i.e. you can use your innermost dreams about the good life as comparison. Do I have the life I really wanted, deep down? Is my partner the love of my life? Are my friends sincere and intimate friends with whom I can share everything and whom I can really trust throughout my lifetime? People who wants the very best for me? Is my relationship with my children, my parents, my siblings and the rest of the family truly as good as it could be? Is my work as interesting as I dreamt it to be? Do I do what I really want to do? Do I continue to improve myself or have I stopped my development? Do I genuinely use my skills at work, expand, and prove useful in the world? Do I profoundly make a contribution in order to make a better world? Does my life make a little difference here on Earth?

## **Your innermost dreams about life**

When we begin to dream the great dreams of life – or perhaps when we remember the dreams we had in our youth, just before we turned adult – it is clear that the life we live at the moment is often a far cry from the dreams and the hopes of our youth. “I have been so naive” one thinks, “at that time I believed that the great love could last forever. Well, now I know that a love affair fades away and life together inevitably turns into routine, when you know each other intimately. We have been together for five years now, and I cannot expect it still to be new and interesting.” One may speculate that such thoughts contain numerous lies and self-deceptions that indeed make us accept the sorry mess we sometimes are in. Do we really know ourselves at all? Is life not a profound mystery? Do we not continue to discover new and unexpected dimensions of ourselves that we can use to grow and blossom? Can we not keep our hearts warm, even when things are changing? Should we not consider our dreams precious and refuse to give up? Is it not foolish of us and completely wrong to sell out our dreams, just making them come true turns out to be harder than we thought? Some people have self-confidence. They seem to handle everything in style. And what they do not know how to do, they quickly learn. Such people are almost unbearable. When we struggle with life and have all sorts of problems, we see these people being successful again and again. They plunge themselves head-strong into new and impossible tasks and projects. They are often rough-handled, but it does not seem to bother them. After a certain number of attempts, they usually succeed. Things turn out as they want them to. The rest of us feel like quitting, when the things we are working on keep failing. It is hard to understand what drive these people to persevere when others seem to give up. What kind of force makes them keep going?

It is obvious that people with genuine self-confidence somehow have luck on their side. The unceasing efforts, which help you learn all the time and improve your next attempt, will lead to triumph eventually. A steady flow of successes gives the self-confidence that is required for you not to give up. But where does this energetic persistence come from? What is the difference between the person, who give up and the winner? We believe that people who fight the struggle of their life and gladly take the existential challenge upon them really want a better life. The meaning of their life is obvious – they know what they want and fight to

reach their goal. In reality it might be put as simple as that. Life is about being aware of what you want, to know your innermost dreams, to know the opportunities around you, which means to know the world you are living in, and to have the values that make it possible to unite your dreams with opportunities that reality presents (45). In this way life is about building a bridge between the deep existence and the world around us (46). The meaning of life is to create a connection between our inner depths and the outer world. It is about finding the dreams and all the hidden potentials and fighting to bring them out. This is the idea of quality of life as life self-realization (2).

## **Our map of reality**

Our brains help us build a bridge between the inner individual and the world around us (47). The brain holds a mental map of the world: a very detailed description of the world around us, of ourselves as persons and of the life inside us. Some examples of what we know about the world around us: we know specifically that a red light means stop, “a” is the first letter in the alphabet, coffee is drunk from cups, and metal that glows red is extremely hot and should not be touched. What we know about ourselves include the all too common self-assessment deriving from hearing the words “Just who do you think you are?” too often: “Oh, well, I am nothing special, I am not sexually attractive, my looks are nothing to write home about, I am not particularly smart.” What we know about the life inside us include the meanings of numerous inner sensations – some physical, such as fatigue, desire or pain, and others more emotional, such as a feeling that something is valuable, meaningful or true.

In our view, the quality of our mental map of reality is of the utmost importance for our quality of life. When we sense – see and hear – the world around us, we interpret it by means of this mental map. We filter, so to speak, all the impressions through over description of the world. And we end up being fairly well adapted to the world. We are pretty good at sensing, thinking and acting. The world appears very familiar to us. Apart from the odd detail that becomes obsolete and has to be corrected now and then, we tend to believe more and more firmly throughout life that the description of the world that our parents and our teachers taught us is correct. This happens while we act in the world on our own and experience again and again that the map is, in fact, true. The few details we change in our parents’ map, so as to make it more truly our own, become an important part of our own identity and thus end up being disproportionately prominent.

In general terms, the fairytales of childhood, become the reality of adulthood. There are many terms for this mental map: philosophy of life, self-image, worldview (48), weltanschauung (49), ontology (50) – all terms for very much the same thing. The map contains a description of our view of inner life, the outer world and our self-image in between. The point of having an awareness of reality is clear enough: we need it to realize our dreams and wishes more efficiently. It gives us an opportunity to navigate reality and act single-mindedly and with great effect. Because we are conscious of the world we can change it. Unfortunately, we have not yet harnessed our amazing effectiveness, where the entire rain forest in Brazil may be cut down twenty years from now, thanks to greediness, irresponsibility and the invention of twenty-foot chainsaws. The detailed description of the world that our mental maps in our heads represent gives us serious problems, because you can

be lost in your own description of the reality. For example, your mental map says that the important things in your life are x, y and z. Then you fall seriously ill. You may discover that other things in life are far more important. You come to the painful realization that you have lived your life on a lie. One of our biggest problems is that we become experts at lying to ourselves, because we are free to describe reality any way we want. Our inherited descriptions of the world constantly confirm themselves. For example, some people are raised with little love. Bitter experience has taught them that other people are neither loving nor trustworthy. Understandably enough, they treat other people without love and trust, whereupon they discover that people are not loving or trustworthy. The pieces fit. What we have learned is perfectly true. Nevertheless, there is little truth in it, because with another set of assumptions about what to expect from other people, one's view of the world and one's behaviour would be much different. And one's quality of life would improve.

## **A philosophy of life with focus on the human being**

How we experience life is a direct result of our mental map. By nature we are free to describe the world in an amazing variety of ways, but once our parents and our culture have chosen a description, we are forced to live accordingly. Everything in life adjusts itself to this description. Life as a whole is tinted with a certain colour. Grey and dull, black and sinister, or happy and colourful, depending which chord is struck in the mental map. People who learn to believe in themselves seem to be wiser than people who have little faith in themselves. If the philosophy of life does not allow the individual any special opportunity to solve problems and create value in her or his own life, the person is caught in a trap, unable to tap the wisdom in the depths of life (51). People who do not believe that they can follow their heart and live in harmony with themselves and hold an inner truth about life will never be able to listen for this inner wisdom (52). People's philosophy of life makes them open to life, or close them up. Large parts of Denmark's health-care and welfare systems are based on a philosophy of life that does not hold much room for – let alone believe in – the individual's own wisdom of life and capacity for solving his or her own problems and make the right decisions.

Keeping the tradition, medicine regards a human being as an ingenious machine that physicians are able to repair with as little interference from the patient. Generally, the medical profession does not believe much in the causality of consciousness, in spiritual dimensions of existence, or in that people can help themselves get well to any appreciable degree. There is very little faith in the power of the individual over his or her own existence. An alternative philosophy of life is needed, where every change starts with the individual person, meaning that a sick person is able to do much more for him-or herself than any physician. A lonely person can do more for himself than any psychologist.

A person with sexual problems can help himself to a greater extent than any sexual therapist. Problems with bringing up children are far better solved through a personal, independent and goal-directed effort than by handing over the responsibility to educators and child psychiatrists.

It is far healthier to reflect on what is good for you to eat than being guided by a dietician. The truth probably lies in between these views. In principle, we are personally in favour of

the latter view, but of course this does not mean that there is no need for physicians or psychologists anymore, merely that their roles should be different from what they are now. The world is complicated and we need profound and certain information from experts, but the experts have to stop being autocratic authorities and become more humble consultants that respect the fact that ultimately, we know as individuals what is right and wrong for us.

## **Taking responsibility for your life**

When you have lived a bad life, full of insoluble problems and great difficulties and without any real happiness or meaning, what you need is something rather peculiar: To pull yourself up by your bootstraps. Naturally, this is not about defying the laws of nature. It requires acknowledging that life holds wisdom that is not currently part of one's mental map. In order to open yourself up for life, to place yourself in the power of life, it is necessary to ask yourself: What is it that I have not yet understood about life? What do I have to believe and recognize beyond any reason and experience, if I love life? It is necessary to demand of yourself that you understand why your life is not filled with opportunity, freedom, love and meaning. That is the beginning. You must try to fathom your deeper existence, your heart or soul. You may well entertain abstract philosophies, but you can easily end up philosophizing the rest of your life.

However, revising your view of life means to take responsibility. This is not a rational process; rather, you recognize that life with its immense complexity cannot be figured out. As a consequence, you have to stop solely to observe and analyze things mentally and instead start a new life as a participant. The good life is about acting, being part of, being a participant in life. It is about closeness and direct understanding through the meeting, the confrontation, and the touch, the melting together. The hallmark of life is communication (53). The cells in our body communicate so efficiently that the distance between them practically disappears and they melt together to what we know as ourselves: "me". For example, when we have a partner whom we love deeply we may experience that the distance disappears and you melt together as one. In a close moment you understand each other fully. It is this closeness that love is all about. This is what ought to fill life in all its relations, in the relationship to the partner, the friends, the children, the work – in order to make life genuinely good.

## **Quality of life is more than satisfaction**

If asked how you feel, you may answer "good" or "bad." Inspired by the Danish psychiatrist Anton Aggernaes we have called this part of quality of life "feeling good." When life is not genuinely good – which is often the case – there are many tricks you can use to save appearances. Superficially, you can live your life better than it is, but at a deeper level, this lie does nothing to make things better. If you happen to get your spinal cord ripped over in a traffic accident, you are most likely paralyzed in your arms and legs for the rest of your life. You can only play computer games with your nose and most of us would rather die than end

up in this situation, but surprisingly enough, it turns out that persons who live a stabile life in this way after 5-10 years are content with their existence.

In general terms, any kind of difficult situation which stabilizes and remain so for some years – whether chronic illness, prostitution or extreme poverty – in time becomes a habit. Likewise we can adjust ourselves to almost anything, as long as the situation is stable and a sufficient period of time passes by. Our capability to adjust ourselves is extremely high. We can become content under basically any kind of circumstances, if only we live a stable life in them for a long time, without any chances of change. The quality of life that you achieve by adjustment is called contentment. It is a subjective (experienced, inner) dimension of quality of life, which in reality does not hold much about the real quality in life, below the surface. The contentment is mental, in the mind: When we dream our dreams small enough, to make them fit our pitiful life, we become content. In this view, contentment is a trap that we fall into all too easily. Once you have become content and well adjusted, the driving force that could have propelled you and made you fight for a better life has completely vanished. Contentment is relevant to the quality of life, but only in a minor way.

“The Quality of life” is a kind of umbrella description that encompasses many ways that life may appear good or bad. There are profound and superficial ways to feel good. Some involve seeing life from the inside, some from the outside. Some involve seeing your existence very locally, some regard life as a whole. Contentment, for example, is something superficial, it is life regarded from the inside (subjectively contrary to life regarded from the outside: objectively), and it is something local (because it is mental, in your mind). Other ways to look upon life locally are sensual pleasures, eating (it feels good in the mouth). Some people are able to divide their bodies and minds so efficiently that the delight of eating can continue long after the body has fulfilled its need, leading to obesity. Other people are obsessed by sex. Their efforts to find sexual pleasure distort their lives, especially when combined with an inability to hold on to life as whole. The worse you feel inside, in your heart or in total, the more tempting it is to give yourself away to more superficial and local pleasures now and then (54).

## **Happiness and the fulfillment of needs**

Happiness is another and more prominent aspect of the quality of life. Happiness involves our entire existence. When we are happy every fibre in us hums to the right tune. Happy people are radiant. We become happy when our life succeeds. Happiness is about our visions and big dreams coming true. You do not get truly happy by getting another stamp for your fine stamp collection. Yet another aspect of the quality of life is covered by the concept of needs, even though they overlap each to some extent. We have needs for certain things – friendship, for example – but we do not need stamps in the same way. The stamps are an example of something we are rather free to choose as one of our values, but it is hardly a basic need. Of course, there may be stamp collectors who live extraordinarily good lives – because the stamps have become a good opportunity to share and have fun with other people. In a closer analysis, it often turns out that the urge to collect stamps is just an expression of an enormous surplus of energy by this person, and that his or her quality of life does not come from the stamps per se. A better example than the stamps may perhaps be money. A lot of people build

their entire existence on acquiring money. In our population study we found no association between annual income and happiness in the Danish population. On the average, people earning USD/Euro 8.000 per year are precisely as happy as people earning more than USD/Euro 70,000 per year. Thus, money is an example of something you may choose to strive for, but which will only give you very little pay-off in existential terms.

We are rather free to choose our own external or superficial values, but we are not that free to choose our internal or deeper values. Happiness results only when our chosen values are in accordance with our heart or soul, with our deeper natures as human beings. The American psychologist Abraham Maslow (2) concluded in the sixties that the human has four basic needs: needs related to the body (heat, food, sex, shelter), social needs for genuine relations to others, needs for being useful, and finally a need to “actualize” oneself. Maslow was quite pessimistic about the fourth need, which he thought merely three or four people in the world had managed to fulfil. Therefore, the idea of a hierarchy or a pyramid of needs was introduced, in which you start with the bodily needs and end up with the need for self-actualization. Later on problems with the pyramid arose. Hungry children also play! Because there are so many conceptions of human needs, and because these conceptions are culture-bound, is it rather difficult to determine what needs a person actually has. Thus, the concept of needs has been criticized by many scholars for being diffuse, unsuitable for research, and as material for personal development. The realization of our profound potentials, which we also call self-realization, appears to us as a more precisely and useful concept.

## **Self-realization**

“Self-realization” covers deeper and more comprehensive aspects of the quality of life (2). To me, it is more fundamental and closer to the soul than the notion of needs fulfilment. It says more precisely that life is about the creation and realization of something that issues from a person’s innermost depth – the heart or the essence of existence. The number one enemy of self-realization is resignation or the process in which we dream our dreams smaller as we downsize our ambitions, thanks to hundreds of minor and major lies about the values in life. Most adults wear a whole woollen sweater knitted by these many lies. It is an effectively armour that keeps us from recognizing and sensing our innermost soul. Any symptom – from headaches to financial problems – can be seen as the price you pay for the distance the sweater keeps between you and your soul. But somehow the sweater is never perfect; there are always loose ends to the yarn that the sweater is made from. Always little holes from which frustrated life dreams and deeper imbalances will emerge, sometimes as a dull, nagging, existential pain, at other times as distinct symptoms of something that is wrong in your life. If you have the energy you could unravel the whole sweater of lies.

In your efforts to do so, you have to ask yourself: Why? When you get the answer to that question, you could ask again: What is the reason behind it? (For an example: Why do I have a headache? Because I just had an argument with my wife. Why did I argue with my wife? Because I wanted her to do as I told her. Why did I want that? Because it is easier to change her than to change myself. Why do I resist changing myself? Because I feel that I am going to die if I begin to let go of my stubborn ego). Again and again you could unravel, until the whole set of self-deceptions, illusions and misunderstandings are revealed before your eyes. Slowly

you may begin to realize that life is much greater and more mysterious than you thought – and that you are facing far bigger problems within yourself than you imagined (50).

## **The meaning of life**

If we descent even deeper into existence we reach the deepest level that we can verbalize (55). Deep down in the core of existence, we find the very recipe for being a human. It has evolved from the time when life started in the primordial soup on Earth about three billion years ago, and it is still evolving, in a flow that is faster than ever. To us, the meaning of life is about placing yourself in a direct connection with that flow. About giving yourself totally to life and serving the great powers in the world, the powers that create, transform and restore our world. We believe there is an underlying order, an intelligent or creative process that exerts pressure to create and renew everything that exists. There is also something even deeper, something spiritual at play. This brings us close to the point where words tend to be inadequate. Probably you cannot go any deeper with language. You may rely on art and express yourself through poetry or music. Artistic creativity certainly expresses the very intelligence of life, which manifest itself directly, beyond the bounds of limited reason.

One way to an understanding of the profound things in life could be through biology. The powers that operate in living matter and drive biological development and evolution are quite peculiar – and apparently far more complex than Charles Darwin suggested in “The origin of species” (56), namely natural selection through the struggle for survival. In a later chapter we will address life and biology more directly. For now, let us just mention that our dreams (whether dreamt during the day or the night) about a better life seem to be under the influence of gigantic powers, which in the end work for the further development of humanity as a whole, by means of some profound coexistence or an subconscious community between all people. The evolutionary development of human being is presumably not finished at all, but may continue for thousands of years into the future. Through the realization of one’s deepest dreams, every person can unfold his or her own life in an extremely creative way and thereby also contribute to humankind’s great developmental project. The idea that you contribute to the development of humankind as you grow personally makes the fact that personal growth is so cumbersome seem more reasonable.

## **Conclusion on the core of life**

Even if it is not possible to articulate the deepest dimensions in life (and therefore not possible to measure them in spite of our best research efforts), we somehow have to find a way into the core in life if we want to live the good life. We have to open ourselves to a wordless, intuitive, but intensively meaningful part of life that is often denied by our rational part. We need to access the core of life itself, the wildness or the madness that lies just beneath the skin and which longs to be set free and express itself. We do not mean crude and uncontrollable drives, but we have to find the fire within, find the commitment and presence of mind to be in intense exchange with our reality, within and without. We have to give everything we have got and be able to take what the world has in store for us. This may sound



a bit starry-eyed – as something we might try to do during a vacation in Bali, but which is hard to fit into our everyday lives at the office. But if we talk about professional development, for example, this is exactly a process in which we try to master our job so well that we can express ourselves fluently, untroubled and spontaneously.

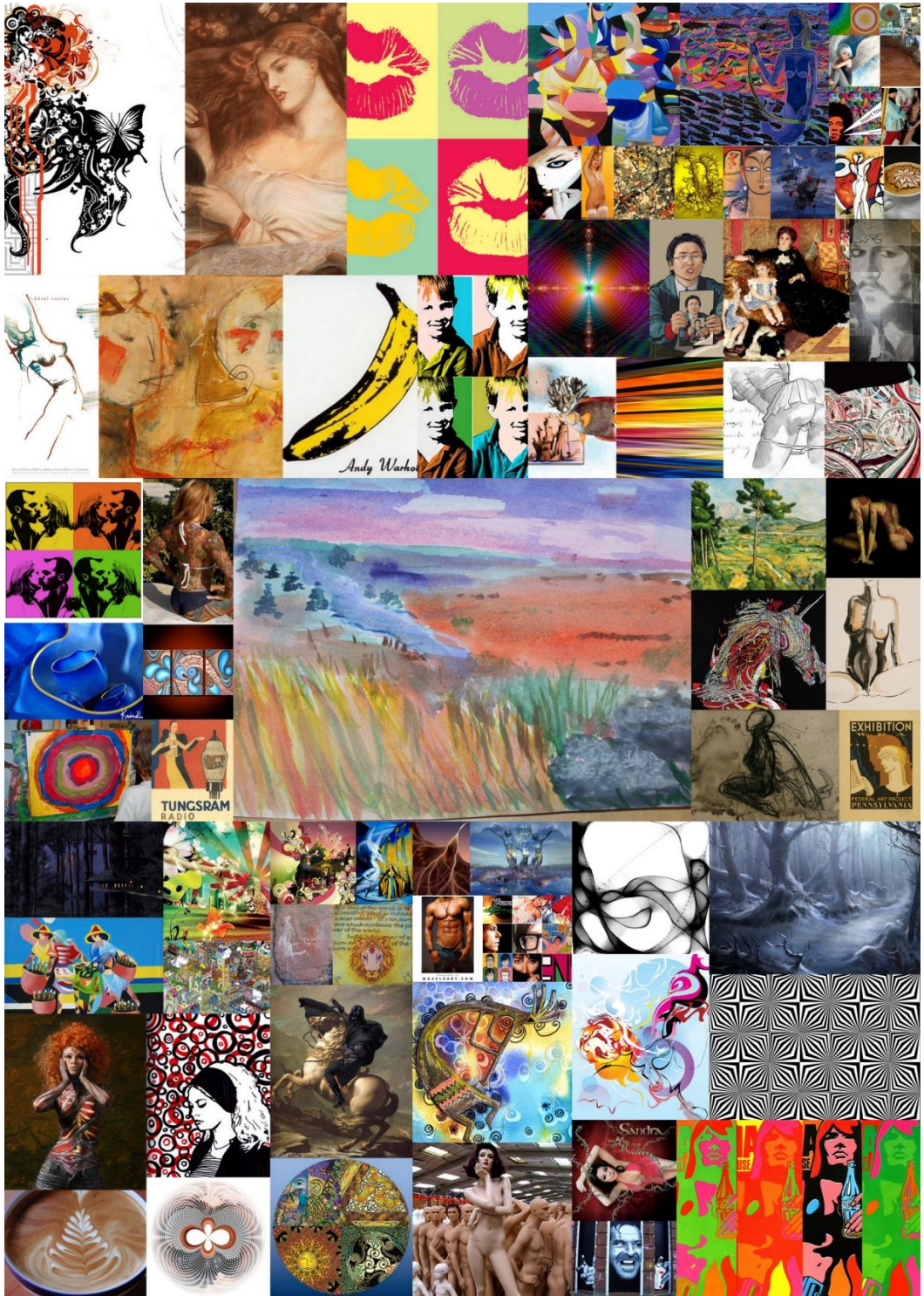
Life's peaks are where we truly use our resources to the full and give ourselves completely to what we do, where the barriers disappear and we become one with our activity. Life does not get any better than this: where we forget ourselves and live with our entire heart, our entire existence. Life flows in intense, new forms and patterns that are pregnant with meaning. You know that what you are doing is precisely what you were put on Earth to do. This experience is the full and complete life. The meaning of life is connectedness and development. It is about realizing every opportunity and potential in one's existence. And the opportunities have to be found and acknowledged. What is it you find when you find yourself deepest down? Your belly button? An island disconnected from others? No, you find connection. You find your real self and your purpose in life (12). You realize that you are already a part of a larger totality. Antonovsky called it coherence (1). Maslow called it transcendence (2). Frankl called it meaning (3). We call it simply being.

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## **What is a human being?**

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Many places in this book we take for granted that a human being can be described a body, mind, spirit and heart; a person can be seen as an "I" integrating an Ego, Id and Soul. This simple model is going back to Greece and the Hippocratic doctors; it has been so integrated a part of our culture that many people accept it as a natural thing – just the way things are. In this chapter we would like to step back and make some considerations about what a human being is.

The human being is a complex matter and many believe that just trying to understand life and what it means to be human is a futile undertaking. We believe that we have to try to understand life and get a grip of the many faces of life, because it can be of great value to us to learn to recognize the fundamental principles of how life is lived to the fullest. Learning to recognize the good and evil forces of life helps us to make use of the good ones.

To be human is to balance between hundreds of extremes. Sometimes we have to avoid these extremes. But at other times it seems we should pursue them, to better understand life. With our roots in medicine we believe in the importance of love for a better health. The secret of the heart is when reason and feelings meet and we become whole. Where reason is balanced perfectly by feelings and where mind and body come together in perfect unity, a whole new quality emerges, a quality that is neither feeling nor reason, but something deeper and more complete. In this chapter, we outline only enough biology to clarify what the fundamental inner conflicts are about. The insight into these conflicts gives us the key to a great deal of the problems of life. To imagine pleasures greater than sensual pleasures seems impossible to most people. What could such a joy possibly be? But somewhere deep in life exists the finest sweetness, the greatest quality in life, the pure joy of being alive that emerges when we are fully present and life is in a balance. This deep joy of life is what we call experiencing the meaning of life.

## **Introduction**

The human being is a complex matter. Many people believe that just trying to understand life and what it means to be human is a futile undertaking. There are so many things in life, so many words, so many aspects to comprehend. But of course we have to try to understand life

and get a grip of the many faces of life. It can be of great value to us to learn to recognize the fundamental principles of how life is lived to the fullest. Learning to recognize the good and evil forces of life helps us to make use of the good ones.

To be human is to balance between hundreds of extremes. Sometimes we have to avoid these extremes. But at other times it seems we should pursue them, to better understand life. Whatever we do on the surface of life, the crucial point of living is to be in balance at a fundamental level, that is, always live by our inner purpose.

Later on we will explore the question of what the living state is, in an attempt to understand the connection between physical illness and a poor quality of life, but in this chapter, we outline only enough biology to clarify what the fundamental inner conflicts are about. The insight into these conflicts gives us the key to a great deal of the problems of life.

## **A young woman is off to a dance**

We are all familiar with situations where we want to do something that we know to be foolish. A battle is fought inside of us. Sometimes reason wins, sometimes that other part of us does: intuition, feelings, sexual passion or simply the temptation to eat just one more cookie. Every time we make a decision that is not right for us we create a chaos in our lives for which we will eventually be held accountable. If we are too emotional and let ourselves be swept away, there will often be a price to pay later: we wasted our time and energy, we were used, and we did not get our hearts into it. For example, an unchecked sexual desire can lead to pregnancy or venereal disease or erratic eating habits to overweight and dental problems.

If a young woman goes to a dance and feels the urge to be with a man, she can choose to do so. Later she will have to deal with all the problems this might lead to: a bad relationship with him later, fighting with her parents, maybe an unwanted pregnancy or a venereal disease. Or she can be a nice girl, who does not fool around. In that case she will stay home and may start feeling sorry for herself that she never has any fun, like all the not-so-nice girls do. Striking the right balance between emotion and reason is obviously crucial. If a woman becomes too easygoing and loose, it could very well mean the end of her good life. Socially and existentially, it could ruin her life. Particularly if she goes to extremes and throws herself into the arms of a succession of men, who also have many changing partners, because they too, are unable to maintain a normal relationship. Often, the price paid is emotional and sexual defeat, loneliness and fear—and perhaps even AIDS.

Many women prefer the other extreme, controlling themselves, never letting go. Perhaps she will live her whole life without ever-knowing real sexual pleasure or satisfaction. In one sense this niceness is deadly, because denying our bodies and our emotions makes us cold, remote, rigid and barren.

To live only through reason is no better than living only through the feelings and sensations of the body. The woman, who knows how to balance sense and sensations, which goes to a dance to find the one she will truly love, is the woman who will know love. This is the secret of the heart: when reason and feelings meet, we become whole. Where reason is balanced perfectly by feelings and where mind and body come together in perfect unity, a whole new quality emerges, a quality that is neither feeling nor reason, but something deeper and more complete. The reason in the brain is a local thing and the feelings in the body, such



as sexual desires, are also local. But where reason and emotion come together we find the whole human being. True love. Living with your heart is living in wholeness.

If the woman becomes pregnant, she may be in doubt whether or not to have the baby. Her feelings want to have the baby, but her reason, influenced by reactions and expectations of other people, might prefer an abortion. If reason prevails over feelings she decides to have the foetus removed, but then she might spend the rest of her life missing that child, because in spite of everything, having the child would have been the right thing to do, even under circumstances less than ideal. The only way to find the right answer is to ask your heart. To seek in the depth of your own being for the right answer (1). Obviously, we also need to think things through, so that reason is also part of the process. Equally obviously, we must let our feelings have their say. But the final decision must not belong just to the emotions, nor just to reason. It must follow the whole, the intuitive knowledge of life, the heart.

## **Love and making dreams come true**

What does our little love story tell us about being human? The young woman falls passionately in love with a young man. She dreams about him and wants to spend all her waking hours with him. If he has the same dreams, then the two of them can get together and start sharing a home and things just work out. If they even find a shared set of values, then they will hopefully be happy. Happiness derives from dreams that come true. Small, modest dreams and a pretty new dress just do not cut it. Even if, in our minds, we are completely free to choose our own values – clothes, jewellery, and expensive cars – it is not until we choose to strive for what our hearts want at the deepest level that we become truly happy. Otherwise, we will be no more than content to have reached our superficial goals.

For life to succeed, our head needs to recognize what the whole—the heart, or our deep self—wants. Only when we know what we truly want then we are able to realize the good life. What are those dreams about the good life, dreamt deep within our souls? These big dreams can be about many things, but they all share a certain intense and valuable quality. It is the dream about the one and only love, the dream about the genuine, warm and close friendship and the dream about raising a family. There is the dream of expressing life through artistic creativity. The dream about the good work, where we use ourselves to the fullest and become extremely good at what we do and really accomplish something. There is the dream of a pure, spiritual life. The dream of making a difference and making the world a better place or the dreams of experiencing the great outdoors, of being one with nature, of the great connection between man and his surroundings. It is of little significance, which dreams we seek to realize. Since, in one sense, life is really terribly banal. It almost always comes down to the same things, which we need to feel good about ourselves, about other people and we need to do things that we really enjoy. If we look at life with our hearts, it is all about the love of being, the love of our own existence and everything around us.

Why is love so difficult for so many of us, the love of life and of each other? When we are young it is so easy to fall in love, but this is merely the projection of pictures of love onto another person, without any real contact or dialogue with that person. But deep, persistent and glowing love seems to be quite rare. As we see it the human being is, by nature, meant to love, so it really should be easy. In practice, however, it is difficult because we are so easily

caught up in our own limited and rather unloving view of the world. When our values are not rooted in our existence, they take on a life of their own. Our existence becomes fragmented. Life gets to be about all kinds of little joys and temptations (the local pleasures), detached from the greater context that exists in our whole and is about love.

## **The dialogue between living cells**

Let us try and plunge into the reality of biology, into the deep recesses of existence and ask: What does it mean to be human (2)? Who am I? What am I? What does it mean to be alive? Our lives consist of billions of small living creatures that communicate with each other and the outside world: the cells.

The cells are tiny little animals that are so good at communicating that the distance between them practically vanishes. Biologically speaking, human beings are highly organized blobs of slime. This puts us on an equal footing with all other big, living creatures on Earth, the trees, the fungi and the animals. Looking into a microscope, we will find that every little piece of us is a crawling and creeping heap of amoebas, all wandering around among each other.

They all know exactly what to do, when and where, wherever they are. This is why it is possible for such a gigantic colony of cells, a human being, to exist. When we observe one another, we prefer to imagine that we are firm and stable structures. Many people think of cells as firm little building blocks, like bricks in a wall. But this is not the case, as we realize when we look into the microscope. There is very little firmness in the colonies of cells. The whole enormous order we can observe in an organism, in some ways, is an illusion, because cells die all the time and are endlessly replaced by others. The order exists only due to continuous, dynamic processes.

The only permanent thing in our biology is the recipe that specifies a human being (3). The cells read this recipe together. They realize it in the organism, thanks to their incredible communication skills through which they all find out exactly what to do, when and where. This fluidity makes life very sensitive to imbalance and disturbance. As we shall see in the next papers this gives us the key to understanding most diseases. Unfortunately this fundamental concept of man being formed by cells communicating and sharing a “informational master-plan” of the human being is not supported by empirical evidence, neither is it in conflict with fact; the problem we face here is the most fundamental problem in the interface between philosophy and science: the problem of consciousness and perception known as the hermeneutic problem.

Our philosophy of life is the framework we use to interpret reality; it is not something we can conclude from our perception of reality. Naive inductionism is a rare philosophical position these days; most philosophy of science seems to agree that our preconceived ideas – our scientific paradigm with the famous Kuhn’ian concept - are forming our perception, interpretation, and understanding of the world. So this concept of biological information embedded in this paragraph is one of many possible ways of looking at man. We believe it to be of value as it implies a perspective of human growth and development of utmost importance for our patients, as we shall see.



## **A self is born**

During the embryonic stage, as we develop into humans, it all begins with the reading of the recipe. One single cell, the fertilized egg, divides itself again and again. When the dividing cells reach a certain number, they coordinate their decisions as to which cells are going to turn into what: skin, bone marrow, liver, nervous system etc. This is done in a highly organized way that lays out the embryo in exactly three layers of cells, as found in very primitive organisms such as jellyfish. Later, a regular fish embryo emerges with gill arches etc. As the embryo develops, we see features from toads, mammals and, finally, humans. A billion years of evolution played through in just three months. More than anything else, what living cells know is how to communicate. When the cells inside of me communicate with each other, they do it so well that they practically melt into one big lump or the person that is called “me”.

Actually, there are two selves: The ego, which is part of the mind and who we think we are. And the deep self; who we are meant to be by nature, to be implemented into a human being by all the cells' continuous communication with each other (4). The fact that the colony is not perfectly unified is a crucial point that makes room for disease and ultimately death. We can understand death as the breakdown of the colony, the loss of wholeness. Since, in reality, we are not perfectly organized, one could say that we are all somewhere between being completely broken or fragmented, that is, dead, and completely coherent and whole, that is, alive. The latter state occurs is when we live completely in accordance with our deep self and human destination. The more coherent and whole we are, the better the lives of the little cells can pull in the same direction. The happier we feel the more meaningful our lives. The clearer we can manifest our will to live; the better will be the sum of all the cells' common desire to live.

Let us return to the subject of love. When we meet another person we are, by nature, equipped with faculties for really loving this person, being close, communicating, being friends, lovers, comrades, co-workers and more. Deep in our lives, this is what we really know how to do. Creating closeness through communication, which by the way is not a bad definition of love. When looking deeply into our biology we are, in fact, made to realize communication, closeness and love. We were born to love. As we all know, however, loving is the hardest thing to do. A person's ability to love expresses how coherent and whole he or she is. As we mature and develop as persons, we rediscover the coherence and wholeness that makes us capable of loving. That this process also improves our health is an important point, as we shall see later. Just being able to love oneself is terribly difficult, but a prerequisite for being able to give love to others. Being on good terms with ourselves, maintaining a good relationship with ourselves -so to speak- is of the utmost importance if we want to create coherence and wholeness in our lives.

## **The relationship with oneself**

The human animal is a complex creature. This is no more evident than in our ability to experience inner conflict which, apparently, animals are not bothered by. We can hate ourselves, be at war with ourselves, so that our “relationship with ourselves” is very poor.

This relationship may deteriorate to the point, where people become estranged from themselves and end up feeling that life is completely empty, devoid of purpose or meaning (5). Life no longer has any value. If we do not accept or like our own existence, or ourselves chances are that we will not be of any value to ourselves, nor to the people around us. If, on the other hand, our good relationship with ourselves is good, we love ourselves and are at peace with us. The problems we have with ourselves turn up when, for instance, we dart around, not knowing what we really want. When we do not know our own deep dreams and yearnings and, hence, allow ourselves to be distracted by all kinds of superficial and meaningless temptations that help us forget the emptiness and harshness of life for just a little while. And when we consider taking our own life (as approximately one in twenty Danes do at times, according to our survey on quality of life in Denmark) it is because we have fundamental problems with the meaning of life, with placing ourselves in life's greater context.

Our peculiar tendency to have inner conflict may be explained by our having two selves: The ego in the mind and the self in the organism, the greater whole or a superficial self and a deep self. The superficial self, the ego, derives from identifying with all the things we have learned about ourselves. Everything that parents and teachers and other authority figures have told us that we are. Since we believe what we have been told, out of deep loyalty with our parents and other significant others, we cling to our egos. The ego is an important part of our detailed inner map of our self and the world. I am this and that person with such and such characteristics. The ego is placed centrally on the map and helps us to focus inwardly on our lives and dreams and outwardly on the world and its possibilities. The ego's task is to make sure that we have a good individual strategy—a good "personality"—that weaves together the inner dreams with the outer possibilities. Without a strong, dynamic and sensitive personality—strategic, patient, disciplined etc.—we cannot expect to succeed when trying to realize our big dreams in life. Thus, the ego serves a crucial function in life and cannot be done away with. However, the ego must be cultivated so as not to get in the way of life. However, human beings are so much more than this. Our lives and our deep selves are much more complicated and amazing.

Deep in the biology of humanity lies a recipe for being human; and this recipe has tremendous potentials for love and meaningful relations. But there is even more to life: Through life's complicated communication systems we are also connected to the world around us. That is why, intuitively, we know so much—not only about ourselves but also about the world at large—even if this deep knowledge is not always easily expressed. Apparently, the big problem in life is to get this deep knowledge to work for us and to be expressed in everyday life (6). Our ego gets in the way. Everything we have learned about life, the world and ourselves, is preventing any immediate recognition and realization of our deep self. Deep within, everyone holds truths about human nature that are unfathomable and abstract and yet, at the same time, so simple and self-evident that living by them should be the easiest thing in the world. However, if we stick to reason and make a little sensible system out of everything we learned about the world from our parents and teachers, life may just elude us. It may seem easy to go by reason, but the result is often that we go through life like zombies. The unreflective reality of reason, in which we still believe, holds all the rules and "facts" we were taught when we were naive and impressionable children. In our opinion, this is what drives us away from real values and toward the shallow, inconsequential life, the life that revolves around meeting other people's expectations and the norms prescribed by society.

## **Doing the right thing**

The good life requires us to learn to do the right thing, in every given situation, throughout our lives. To do the right thing is not really about acting according to societal or learned values, but much more about finding the natural and true values of your life within yourself (7). This requires sensing, deep within our souls, what is right and what is wrong and living by it. When we live by our hearts and fullness, all the decisions we make will reflect both the inward and the outward life. This is the balanced or focused life, with the human being in equilibrium.

Such a life is not necessarily unproductive or vegetating, as many people mistakenly believe. When we find the balance and the deep meaning of life, the level of energy rises dramatically. The sense of joy and commitment, deriving from feeling fully and wholly alive, is beyond words. So, within ourselves, at the deepest level, we find the source of everything valuable. The very core of life, intuition, creative intelligence, spontaneity and also foolishness. This is where we really discover who we are and what values we want to live by. And this is where we become really valuable to ourselves and to those around us: our spouses, friends, families, workplace, society and the world. To be a whole person we must know ourselves, our dreams, our nature and live these dreams to the fullest. Express ourselves, actualize our potentials and become complete human beings. This, of course, is the very purpose of life. But committing ourselves to the process that should take us there, as people do when they fully realize the meaning of their life at a very personal level, is something we often shy away from at almost any cost. When it comes down to it we are lazy, slack, undisciplined, messy and without direction.

It takes a high level of self-discipline and determination to make life succeed and to take advantage of all the opportunities that life offers. Most often, we prefer to think of this discipline as unattainable, rather than fighting a battle against high odds. But there is no alternative to this battle if we want to be whole. The people who meet the challenge, who are happy because the challenge and the meaning have been found and who are doing their best under the circumstances given to them by fate, those are the people who live good lives. Those are the people who gradually solve the problems of life. Finding and recognizing meaning in our lives releases a nearly inexhaustible source of energy for our use.

## **Wisdom and life compency**

People are inscrutable. Our lives are great mysteries. Our flesh and blood holds pieces of eternity, for as the latest generations of living organisms; we have been uninterruptedly alive for the past three billion years. Life has been passed on through the cells, from generation to generation, since the origin of life. Living matter carries a memory. This everlasting memory, of the beginnings of time, is a reservoir of information for us to draw on. Within us, we have all the accumulated wisdom of the world. This wisdom, deeply rooted in our biological matter, we call our "big suitcase", as opposed to our "small suitcase," which is all the things picked up by our reason throughout our individual lives. It is this deep wisdom that makes it possible, for all of us, to live good lives. This, however, presupposes that we believe enough in ourselves to revise the view of the world we were raised to believe in, and to replace it with

our own, personal knowledge of life's great truths. Many of the world's great religions and mystical systems have this as their central message: Trust yourself! Do not live your life in blind obedience to other people's expectations (the fact that religions can lose this message when faith is institutionalized is a different matter). Believing in oneself means expanding one's insight into life; a deeper insight into life leads to better decisions, which in turn makes for a better life (8). Whoever rebels against external authorities and puts him- or herself in their place win the opportunity of becoming the real experts in their own lives and living life first-class.

## **The first, second and third class of life**

Taken as a whole, life can be better or worse. Let us suggest the following crude, but rather useful division of the quality of life into three fundamental classes. Travelling life first class makes for an excellent existence (problems are mostly perceived as challenges). On life's second class, where most of us find ourselves, every day is full of problems (problems are perceived as heavy and difficult to overcome). On life's third class, people are actually succumbing to physical or mental illness, drug abuse or some other form of misery (problems have become insurmountable). We may say that we are viable, when we function well in all areas of life and travel first class through life. Viability means we are able to solve conflicts systematically and take on problems as challenges we can learn from. When problems do not make us give up, but merely obligate us even further to do our best.

In our survey on quality of life in Denmark we asked people three questions: 1) How they felt at work, 2) How they felt at home and 3) How they felt in their free time. The results showed that some feel good at work, some feel good at home and some feel good in their free time. Likewise, some feel bad at work, some feel bad at home and some feel bad in their free time. Somewhat surprisingly, statistics revealed that it is the same people (those travelling first class) who feel good in all three areas; just as it is the same people (those travelling third class) who feel bad in all areas. Those who travel second class through life do fairly well in all areas, statistically speaking. People who cannot manage their lives fear being laid off at work, feel threatened by divorce at home and fear breaking a leg when on a skiing holiday. This leads to an interesting perspective: For instance, people who try to escape a difficult love life by embracing their careers often end up losing both. Viability presupposes an optimal view of the world, a good map of reality that is continuously brought up to date.

If we maintain the good attitude to life, with persistence, patience and humour, we get good lives. When we are open to the irrational and intuitive sides of life and see the world as full of opportunities to be mined and engaged, we get good lives. But many people feel quite the opposite. They see themselves as having no value, as being undesirable, unlovable, untrustworthy and unproductive. With an attitude like that it is very difficult, if not impossible, to be viable or seeing that life is a good thing. The inferiority complexes that most of us carry around make it very hard to be in touch with our deep selves, or to even understand and accept ourselves. Deep within us lays the divinely beautiful recipe of human nature that we try to realize. This crippled self-image does not at all match our deep selves. Therefore, the bridge we try to build between our deep selves and the outer world does not turn out very well. Building this bridge is the purpose of life. It is easy and very tempting, to

fill one's life with the quality that derives from satisfying a small part of our existence. We may satisfy our mouths (through the joy of food), genitals (sexual pleasures) or minds (academic discussions). It is far more difficult to obtain the kind of quality of life that comes from connecting our inner lives with the world outside (9). Only people who maintain this balance throughout life are able to lead the good, complete lives that we all carry within as a potential.

## **Conflict between our sexual, spiritual and middle-class lives**

In his two novels, "Steppenwolf" and "Siddharta", the German writer Herman Hesse (10,11) related the problems his protagonists go through as they try to strike a balance between life's three major, competing values systems. Each has its own blissful joy, and each tends to usurp and exclude the other two. The erotic and sensuous dimension is the first set of values. The second set is concerned with spirituality, the joy of contemplation, insight and enlightenment. The third lies in the life of the virtuous citizen or, in our time, middle-class values: the joy of professional and domestic accomplishment or having a career and a family. The pleasures deriving from these domains are very different and do not manifest themselves at the same time. If you think about work, while having sex, it just will not work. If you think about sex, while trying to seek spiritual knowledge, forget about it. If you worry about marital problems at work, you will not be able to do your best. The art of living requires attention to all three domains, but never at the same time. It is a paradox that to understand the essence of these values, we must surrender ourselves to them, but if we indulge in just one of them we destroy the balance in our lives. We have to go to extremes to obtain full awareness, but we have to live in balance if we want to be happy. Luckily, this paradox can be solved when we fully enter into our lives and give ourselves fully to everything we do while, at the same time, balance life by continuously doing what we know deep inside is the right thing for us.

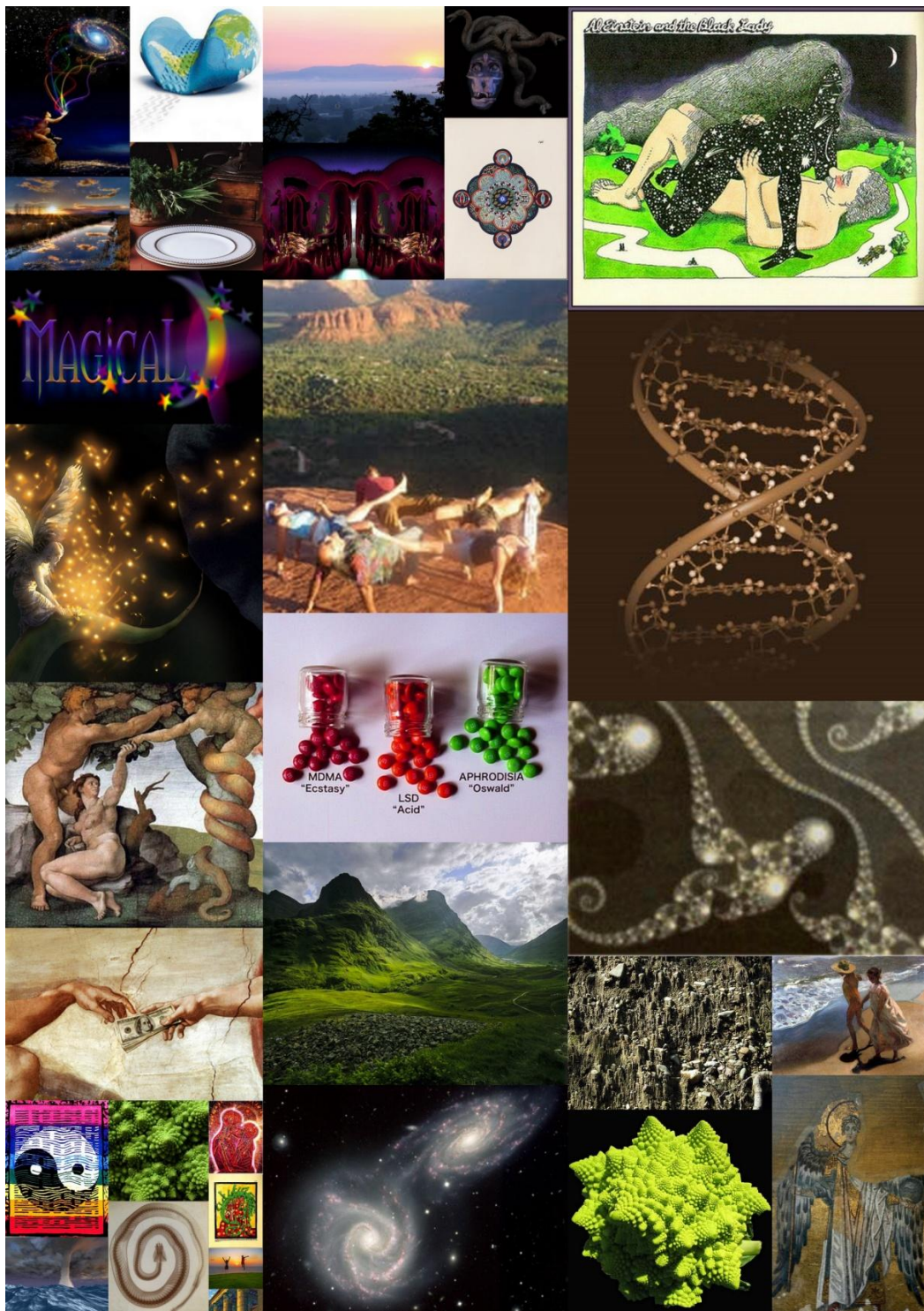
Sexual pleasure is probably the greatest sensuous pleasure known to man. But the person, who becomes obsessed with chasing sexual satisfaction, is lost, because such a life will never be rich and balanced. It is easy to imagine the misery that comes from leading a life that centres solely on sexual gratification. To imagine pleasures greater than sensual pleasures seems impossible to most people. What could such a joy possibly be? But somewhere deep in life exists the finest sweetness, the greatest quality in life, the pure joy of being alive that emerges when we are fully present and life is in balance (5-12,13,14,15). This deep joy of life is what we call experiencing the meaning of life.

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## **Understanding the biological connection between quality of life, disease and healing**

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This chapter addresses in a philosophical way the complex and enigmatic interface between matter, life and consciousness in modern medical science. The problem today in understanding living matter is not at the molecular level, but at the macro level where all molecular activities in the individual cell are coordinated and especially at a higher level, where the activities of all the organism's cells are coordinated. Although we understand very much of the body's chemistry we have only just started to get the gist of the tremendous organization of living matter. We are just beginning to acknowledge the enormous flow of information that is needed to make everything function in a healthy organism, including consciousness, where every cell does exactly what it has to do to make the organs function. A concept that seems to be able to bridge the scientifically very different domains of matter, life and consciousness seems to be "biological information". If a cell is seen as a liquid crystal in which the cell's molecules constantly connect in firm mutual relationships only to dissolve again and become fluid and free, whenever the cell needs it, the backbone of the cell seems to be the information that organizes the cell. For example, in cell motion a cell is able to crawl with the help of a skeleton of fibres that can be created guided by biological information, whenever the cell needs the solidity provided by the fibres. The moment it has finished crawling or is intending crawling in another direction these fibres will dissolve again. The fibres are made of millions of molecules that connect in an arranged pattern, and they dissolve when these molecules again let go of each other.

How the cell precisely regulates such processes is today a complete mystery. How cells co-create consciousness is also an enigma. All we can do is describe the cell and the organisms arising from its cells as filled with energy and information as well as an unbeatable ability to organize itself way down to the molecular level, where apparently the cell is in control of almost every single molecule. Our understanding today of how the information is stored and how it flows through living matter is still very limited. The source of the qualities (the qualia) characterizing the human being as a whole, like joy, love, motivation, consciousness, free will, wisdom, intuitive competence is still practically unknown and

scientifically unexplained, more that 50 years after science has turned itself towards these fundamental problems. We believe that we need a radically new biology and medicine to give the scientific explanations of the structure, dynamics, and quality of life, and of its consciousness.

## **Introduction**

We will now take a closer look at the biological organism that is the foundation of human life. We do not mean biology in any narrow, materialistic sense, like biochemistry. Although biochemistry is a useful science, its description of life is still very crude and mechanical. Life cannot be reduced to chemistry and physics, which many modern biologists nevertheless try to do. As will be shown, chemistry and physics explain so very little of biological reality. The recipe for a human being that lies hidden in the depths of life. Figuratively speaking, one can talk about the essence of existence, the person as a whole, heart or soul. Intuition is a facility we can cultivate and use. Of course, to explain such complex phenomena from the world of human experience in biological terms we need a rich and open-minded biology. In the future, one of the most important research programs will be the creation of such a broader biological science, which does not reduce life and awareness to simple chemistry. In this chapter we take a philosophical perspective. We shall try to penetrate the mysteries of life and try to understand the extraordinary forces that characterize a living organism.

## **Matter, life and consciousness**

The thoughts presented here comes in part from the summer institute “The spontaneous order of life” held in 1996 at the Niels Bohr Institute in Copenhagen (1) and from a group that study the complexity of biological systems. The study group, which also took the initiative to the summer institute, is called “Matter, life and consciousness” and it addresses three very fundamental questions that turn up if you try to understand any living organism: What is matter? What is life? What is consciousness? One might imagine that medical science has a good answer to these three questions, since, typically, a physician will manipulate the living body with chemicals and physics to change the way we feel about ourselves. But this is not the case at all. When the physicists in the group are asked what matter is – for example, Professor Holger Bech-Nielsen, by many considered the best brain just now at the Niels Bohr Institute – they give oblique replies like this: “When we look to quantum mechanics for an answer to such a question we will discover that all our preconceptions about matter are nullified. As a matter of fact I am beginning to doubt whether matter really exists at all” (1). And so on. When we asked the group’s theoretical biologists what life is we get the typical reply: “Today, we do not understand what life is. However, we have some models... oh, well, these models do not recreate anything remotely like life as we know it but still, it’s a beginning.” Answers like that (2). When members who are knowledgeable are asked about consciousness, like the musician Peter Bastian, who wrote a best-selling book on the experience of music (3), what consciousness is, a typical reply is: “You cannot put it into words. Language cannot capture consciousness.” And so on. By and by, we realize that the

sciences do not possess proper answers to these three quite fundamental questions. Science has a great problem with understanding its own basis. The study group was started because of the suspicion that we need the various sciences together in order to tackle their fundamental problems satisfactorily. Perhaps the various sciences hold answers to each other's problems and our real difficulty will turn out to be the demarcations. Perhaps the sciences need to be transformed through an internal dialogue that will enable them to meet and provide a comprehensive and coherent theory of the world.

## **Problems in understanding reality**

Science has great problems understanding reality (4-6). The scientific disciplines are somewhat arbitrarily defined and their subject matters do not cohere across disciplines. For instance, it is probably impossible to understand matter, of which everything is created, without a deeper understanding of consciousness and our own brains that are attempting to understand reality. And without a basic understanding of matter you are probably unable to understand life, because the living is part of the creative principles that are found in matter itself. Life was created on the basis of a driving, developing force in matter. Perhaps we are not even close to understanding this force. Biology is usually understood on the basis of chemistry and physics. Maybe we should turn this process upside down and start learning physics and chemistry from biology. Maybe life itself is best able to disclose the profound possibilities and properties of matter. Quite possibly, consciousness and the brain cannot be understood unless we have a different and more fundamental insight into life than the one science possesses today. There is much talk about all these models of artificial intelligence, neural networks or adaptive programs, but they totally lack the basic creative dynamic we know as awareness or the mysterious light found in living organisms, which is the basis of awareness itself. So, as far as the phenomena of life are concerned we draw a blank with the models we use in biology today. We need new principles if we want to explain the very strange phenomena that characterize anything living, such as the subjective experience of one's life and its expression on quality of life or in disturbed processes in the organism. But first, let us talk a little about the understanding of life held by most of today's biological scientists.

## **DNA only explains very little of life**

Traditionally, life is explained from biochemistry: It is based on DNA. In the centre of every single cell is a very long, thin structure that contains our hereditary material, our genes. Directly and indirectly, this DNA molecule contains the recipes for all the other molecules in the body. When the DNA is "run" or activated all these other molecules are created from the DNA's recipes. Scientists know quite a lot about this today. However, science does not know much about what governs the activation of the DNA. Also, little is known about how the molecules whose creation the DNA controls are directed to the right places in either the cell or the organism. The DNA tells you what substances there are in the cell or organism, but not where they are or what they do, that is, how the cell or the organism is structured and what

processes are taking place and when. So the DNA molecule does not explain the shape of the body or the function of the organs. Neither does it explain complex, high-level processes like consciousness or communication between living organisms. How cells communicate in order to know their individual place in the scheme of things is a major, unanswered question. Within the science of biology there are various trends, schools of thought or systems of faith, if you like.

The most popular system maintains that the living state can be reduced to chemistry without any problems. According to this credo, you will think that you understand a flower if you know all the molecules within it and know how these molecules influence each other, just like you understand how a car works by taking it apart, bit by bit. According to this theory of life everything living is based on what is called self-organizing processes, in which the molecules themselves can create and build the finished organism. To imagine that the flower is pure chemistry is like imagining that the car can assemble itself, because the bits and pieces are “clever” enough to do this by themselves with a little help (like a good shake-up). But this is not enough; the finished car must also be able to drive itself up and down a busy street. Even though it cannot be ruled out that in the final analysis, life can be explained as ‘molecular self-organization’, it is still our opinion that life needs much more information than what is found in molecules. The point is that information is needed to put the car together.

This information is only found in the brains of the manufacturer and the auto-mechanic. Likewise, information that guides the organization of life’s molecules must somehow be present in every living organism. In our opinion, this information is associated with anything living in such a complex way that completely new laws of nature must be discovered, before we can give a reasonably adequate account of the living state. Maybe some form of complicated quantum chemistry or a whole new concept of the physical field is needed. Apparently, the information is stored in an unknown and very peculiar, dynamic way that allows it to be marshalled from the organism to run and guide the living processes at all levels, from molecule to organ and organism. This information can even guide the organization of whole societies of organisms, just look at the ants. The central point here is that the biological information can also guide human beings, although it probably happens in a far more dynamic way, that is, through human consciousness.

Researchers who reduce all living organisms to chemistry only focus on certain chemical aspects of these organisms. However practical it is to know these chemical aspects, it seems rather trivial if compared with the living organism’s highly advanced processing of the biological information. Our understanding of life is based on the concept of biological information.

This concept may help us clarify complex phenomena like the living, highly developed organism’s ability to be conscious. Consciousness is an example of emergence. Completely new properties emerge in a whole when its elements interact in complex ways (7). A very simple example of emergence in a physical system is the transition from individual gas molecules to the properties that characterize air, such as pressure and temperature. From every-day life we know about cars in the streets, but traffic jams are patterns that emerge from the interactions of many individual cars. Living organisms are very much characterized by emergence. Life is built up through a large number of levels, with the still higher levels possessing ever more complex traits, including the qualities known so well in the human world: love, hate, consciousness, the subconscious, reason and intuition.

## **DNA and illness**

Thus, it seems naive to believe that DNA and biochemistry explain the riddle of life and all the peculiar qualities that are tied up with living organisms. Yet this belief is very widely held. Billions of dollars have been expended by an international research project to decipher the entire three billion 'letters' that constitute the molecular recipes in the human DNA. We already know that certain diseases are caused by 'defects' in some of these recipes – bad genes –, which means that important molecules in the body are either missing or not working properly. Take an illness like oligophrenia phenylpyrouvica in which a certain enzyme is missing that normally biodegrades the amino acid phenylalanine in food. The result is a build-up of a dangerous substance, PKU (phenylketonuria), in the blood that can damage the brain. Thus, this genetic defect can render people carrying the gene intellectually disabled unless they avoid the amino acid for the rest of their lives. If you screen every newborn baby's urine for PKU the disease can be prevented.

Unfortunately, however, a simple correlation that can explain a disease and lead to its prevention is the exception rather than the rule. Most diseases have proved to be much more complicated. Instead of rejecting the idea that genes are the cause of most diseases scientists try to save their basic understanding with the hypothesis that a combination of bad genes is the cause of illness. With a massive mapping of the DNA that systematically reveals all the defects in the molecular recipes, scientists and a great number of medical doctors hope we will eventually understand all the major human diseases such as schizophrenia, Alzheimer's senile dementia, breast cancer, arteriosclerosis and obesity. We suspect that medical research is on a wild goose chase and that billions of research dollars could have been put to better use. For instance, it is often pointed out that molecular cancer research has yielded few results in the battle against cancer over the past 30-40 years. The problem stems from trying to reduce life to a question of chemistry and nothing else.

## **What is life?**

To understand what life is let us start with studying tiny, simple creatures. Take a small jellyfish, a freshwater polyp called Hydra. It consists of three layers of cells and is probably akin to the first creatures on earth (8,9). Hydra can swim; catch brine flies with its tentacles, turn small somersaults and many other things. It can also learn. But it does not have a brain, just a simple network of nerve cells that connects an outer layer of cells, which acts as both skin and muscle. Inside Hydra has a layer of cells that cover a primitive stomach, which secretes digestive fluids and absorbs nutrients. This animal is extremely simple, but it can do a lot. Hydra reproduces by budding, just like many plants extend cuttings. If you cut Hydra into small pieces each of these will turn into a new, small polyp, a miniature copy of the first one. When a lump of cells forms a Hydra all the cells talk to each other about what a Hydra looks like, they study the recipe for a Hydra that lies hidden in the cells, and then they agree on who is to do what, where and when. As soon as the cells have established the correct order the new Hydra will function and it can swim around and catch flies. All the knowledge the creature needs is contained in the biological information, ready to use. Hydra is a multi-cellular creature evolved from single-celled organisms, which learned to communicate with

each other so well that they were able to establish well-functioning colonies. Hydra is made up of cells, each of which is a small animal. Various organisms exist between single-cell and multi-cellular organisms, for instance, a slime fungus that can also be found as parasitic amoebae or multi-cellular “snails”. The multi-cellular form occurs when the amoebae need to get away in a hurry, because there is no food left where they live. They are lost on their own, but together they can move far and fast. If the “snail” does not find anything to eat it will form a new structure and become a small fungus with foot, stalk and sporangium. Some of the cells become small, hard, light spurs that can be spread for miles by the wind and thus survive to found a new colony of cells. Most of the cells in the colony are sacrificed in order that a few may survive.

These examples illustrate the way we understand life: life is profoundly intelligent, extremely dynamic and totally geared towards serving the needs of the whole. Compared to far more complicated living creatures like man, these small primitive cell colonies are nothing. Man consists of approx. 10,000 billion cells, but today these cells can still function as small independent beings. Several experiments will show that the cells in the body really are small animals. Take a very tiny bit of the index finger and put it in warm sugar water. After a few days, you will see in the microscope that many small creatures are crawling around at the bottom of the glass. This is not because the sugar water had dirt in it. Many of the finger’s cells (such as fibroblasts) have actually left the community in the finger and are roaming free at the bottom of the glass where they apparently seem to thrive, eating, budding and crawling around. It appears to me that the reason they are able to survive on their own is because they remember life as independent single-celled amoebae at the bottom of the primeval sea billions of years ago. The body can heal its wounds much the same way the Hydra recreated its order. A cut finger often heals perfectly, because the cells can study the recipe that was used to shape the human being to begin with. The healing may occur in the same way that the original form developed, but still it will often be a perfect healing. However, large organisms such as humans often encounter problems due to size.

The forces that organize living matter find it difficult to recreate structures so enormous (as seen from a cell’s perspective) as an arm, for example. If we lose an arm or a leg they will not grow out again whereas small, more primitive animals with legs like newts or cockroaches grow new legs without problems. The recipe for a human being maintains the body’s shape all through life. The cells in the body keep dying and being replaced. Many cells only live for a few weeks. But still we exist for years, because we are not the cells, but the order created by the colony as a whole. Through life we can grow and hold more cells or we can shrink and consist of fewer cells – either way it is irrelevant to personal identity. We are who we are with more or fewer cells as long as order is maintained and the recipe for being human is unfolded.

## **The flow of information in living matter**

Characteristic of living matter is the incredible ability to store and reclaim information and communicate this information to other living beings. If we look at the formation during pregnancy of the human foetus it is clear that today, scientifically speaking, we hardly understand anything of this miracle. If we study a random cell in the organism we will find

that it contains enormously complicated structures and shapes that are still quite inexplicable to science. You can imagine the cells as a liquid crystal (1) in which the cell's molecules constantly connect in firm mutual relationships only to dissolve again and become fluid and free whenever the cell needs it. For example, a cell is able to crawl with the help of a skeleton of fibres that can be created whenever the cell needs the solidity provided by the fibres. The moment it has finished crawling or is crawling in another direction these fibres will dissolve again. The fibres are made of millions of molecules that connect in an arranged pattern, and they dissolve when these molecules again let go of each other. How the cell precisely regulates such processes is today a complete mystery. All we can do is describe the cell as filled with energy and information as well as an unbeatable ability to organize itself way down to the molecular level, where apparently the cell is in control of almost every single molecule.

The problem today in understanding living matter is not at the molecular level, but at the macro level where all molecular activities in the individual cell are coordinated, and especially at a higher level where the activities of all the organism's cells are coordinated. Although we understand very much of the body's chemistry we have only just started to get the gist of the tremendous organization of living matter. We are just beginning to acknowledge the enormous flow of information that is needed to make everything function in a healthy organism, where every cell does exactly what it has to do to make the organs function. The organism contains the whole history of its evolution. When a fertilized egg, the first cell, becomes a human being the evolution of species to the human being over the past billion years is repeated in rough form over a few months. From its single-celled existence the fertilized egg starts a colony of cells that soon features the polyp's three layers. At progressively later developmental stages the foetus resembles in turn a fish, an amphibian, a mammal, a monkey – and finally a human being emerges. Our understanding today of how the information is stored and how it flows through living matter is very limited.

## **The levels of life**

It is characteristic of life that it is organized at several levels. The cells are made up of a number of very tiny organs, which supposedly were independent organisms to begin with and later were fused into the first large cell. The cells join up and form the organs that make up the organism, which again, together with other organisms, form communities. Humans have bones, muscles, connective tissue (motor functions) and internal organs: a heart that keeps the blood circulating, lungs that exchange carbon monoxide for oxygen and kidneys that filtrate the blood. They also have a stomach and a digestive system that absorb food, glands that regulate the body's metabolism and sexual organs that handle reproduction. Furthermore, we have a nervous system with senses that connects the brain to the world, and a peripheral nervous system that connects the brain to the body. Every level possesses emergent properties that do not exist at previous lower levels. The cells have qualities that do not exist in the molecules and the organs can do things, which the cells cannot do on their own. Together the organs make up the organism with powers that enable the organism to enter into relations with the external world.

In the same way the outside world is organized through a number of levels. A person has relationships, family and friends, relations at work, in the local community, society at large and finally the global ecosystem. As we see it, the forces that connect cells and organs to an organism in principle the same as those that connect the organisms in a larger community. Although life at the micro-level usually consists of cells there are exceptions. Our blood platelets that help blood coagulate are alive, but they are not cells because they originate from the ligation of bits from one enormous cell that produces the blood platelets. A muscle fibre holds numerous cell nuclei and is therefore not a cell, but a complete and real fusion of many cells. You could say that living matter is better described by the flows of information that connect all levels of life than by the cell itself – that life's magic is all about the relationships and exchanges of information that connect living matter with the entities at all levels of reality.

## **From information to love**

One of way of describing the human organism is that it is a highly organized blob of mucous made up of billions and billions of small creatures that talk to each other. These cells communicate so efficiently that they are able to dissolve the distance between each other and fuse into the entity we know as a person (me), an organism with consciousness. Parallel to this process at the micro-level we know about communication at the macro-level between people, which reduces distance. The picture is complicated by the fact that people can communicate in several ways, through words and reason (which often increases the distance between people!) and through feelings. When we speak with each other we attune our view of the world and our sense of reality, because this is essential for co-operation and the practical organization of the world. But when we just talk to each other – when we exist in the same space – our organisms exchange enormous amounts of information that is never expressed in words, but which makes us really close and able to know each other properly.

To us, love is a direct expression of the process by which living matter reduces distance through communication. You may feel so close to a loved one that you experience a kind of unity, where you understand each other completely. However rarely this occurs we have all caught a glimpse of it. Such love is a potential in all of us, and we all long for it and hope to experience it in life. From a scientific perspective living matter's ability to communicate is a very peculiar phenomenon. All the cells in the colony are in direct communication with each other and this communication organizes a community, which corresponds to the information stored through the history of evolution as the recipe for the organism. Through this biological information every organism appears to be in contact with all the other organisms both near and far. When you experience that you are one with your partner, it is because of life's enormous ability to exchange information. We think that when we communicate intensely or, actually, when we are just together in the same room and communicate, our bodies and our subconscious will know all about each other. Unfortunately, our reason is far too coarse and slow to keep up. The exchanged information is far too voluminous and complex. Nonetheless this means that our life just below the surface of consciousness is filled with intimacy and information flows.



Such a view of life renders much mysticism redundant. Phenomena like synchronicity (you think of a person you have not talked to for years and the phone rings – and who is it?) [10], mind-reading (you know what the person is thinking before he says it), extra-sensory perception (ESP) and clairvoyance are things that a lot of people experience and wonder about. They are probably an expression of life's ability to communicate without words. Life really is mysterious, but there is no reason to make it more mysterious than it already is. All life communicates and, actually, this is what living matter does best of all. And only an infinitesimal small part of communication happens through words and reason.

## **From biology to soul, heart and intuition**

We have used words like heart, soul, the core of existence, the depth of life and whatever else that fitted the context. This abstract centre has endowed human beings with qualities like love, intuition, wisdom, will to live and vital energy. We have described the ability to live from this centre of your life's circle with expressions like being centred, in balance, knowing yourself, resting in yourself, knowing the meaning of life, and having established a bridge between the innermost soul and the world. However meaningful these terms have seemed, the use of such words is not sharp or precise enough to scientifically explain the correlation between quality of life and illness. Therefore, it is time to clarify the nature of this centre in a more exact way. We do not see the soul as a little spirit that is temporarily housed in the body (like the genie in the bottle), but as something that our reason finds extremely abstract and hard to grasp. When we apply the biological view of human beings, which is our favourite view, they appear as a simple, beautiful and ultimately understandable being. To a great extent it is possible to translate the psychological and spiritual phenomena into a biological frame of understanding without violating these phenomena.

The centre of the soul, heart or existence corresponds to the dialogue that proceeds at all times between all the cells in the organism. Intuition corresponds to the flows of information in living matter that can be sensed wordlessly so that they may guide our acts in life. Love is an expression of a fundamentally social quality in living matter, which is caused by a natural tendency to exchange information. Love between the sexes happens when this social quality is combined with a long evolutionary tradition for procreation of the species. The will to live can be seen as all the cells' joint wish to live. Vital energy is the driving force in the cellular colony that tries to manifest the recipe for man in the world. To love oneself expresses the fact that there is no distance between our minds and our health, i.e. that our view of life does not deny or conflict with the life that exists deep down in us. To find the meaning of life means to be perfectly present in the world with sound and close relations to reality at all levels. Therefore, to find the meaning of life is like building a bridge between the innermost existence and the surrounding world. When we really discover ourselves we discover coherence. Because coherence, communication and transfer of information are what life is best at. All living matter communicates and creates an extremely comprehensive community, much like a whole organism, on earth. Therefore, you can be joined to the world in a subtle way so that you love the earth with all your heart and become one with the world around you. If it really is true that all living matter continuously exchanges information, then, in principle, all knowledge about the world is at our disposal here and now, if we are only sensitive

enough. In other words, one may speculate that our intuition in fact mines this unlimited source of knowledge about the world.

## **Quality of life and the biological order**

Now let us return to the question about what it means to experience quality of life. How are we able to discover how we feel deep within our souls? How is it possible for us to gauge our innermost selves? To find out how happy we are, how our inner balance is doing and how much meaning there really is in our life? You can do a superficial stocktaking just by reckoning: If life is what you want it to be you are happy and content. But how do you really take stock of these subtle, comprehensive conditions like happiness and personal meaning that involve every fibre of your existence, every tiny cell in your body?

Our answer is that when we sense our innermost selves, what we gauge is the state of our organism, which is the same as the state of the dialogue between all the cells. You could say we try to estimate how well our recipe for being a person has been realized. If the organism (and the levels of life outside and inside) corresponds with life's profound recipe for a human being, life seems to overflow with meaning and everything makes sense or there is an overall consistency. If the recipe for a human being is poorly carried out we are disconnected, weak and vulnerable inside, and life is neither happy nor meaningful. One's quality of life is low in the deep, existential dimensions. Our souls are inside this order, this subtle dialogue between all living matter that exists inside us, all our cells. When we feel inside ourselves we take stock of the state of our soul, the order of our organism and the harmony of our inner biological communication system. A sound state of affairs is experienced as meaning, coherence, happiness and joy while conflicts and disharmony in the subtle order of the organism feels like just the opposite. It is important to note that we can easily fool ourselves into believing that we are fine without even when we are not. We can lie to ourselves to make us content with even a miserable life. What we are talking about here is the feeling deep inside of you, not the one on the surface.

## **Quality of life and illness**

It is now clear that illness can be seen as a breakdown in the subtle order of the organism. Illness happens when the cells do not know exactly what to do and the reason that they do not know is that there is disharmony in the dialogue between the cells. In this connection it is obvious to think about how we picture reality, life and ourselves. If this picture is in contrast with the recipe for a human being, which is contained deep within our biology, there is an inner conflict that we have already encountered as our poor relationship to ourselves. You do not love yourself and life. Many people find it surprising that there appears to be a connection between consciousness and the organism's biological order. Several scientific experiments (11-13), however, have shown that there is such a connection. If, for instance, you can make hypnotized people change their opinion about, say a spot on the skin, you will often see that the skin does change (12). If the person believes he gets burned, a blister will appear even though the temperature was unchanged. The opposite can also be true, you can suppress a

blister in spite of strong heat if you make it very clear to the person that nothing is wrong. If a person believes that he has been injected with tuberculin, which creates a strong immunological reaction, this reaction will happen even though only salt water has been injected (12).

It is obvious that people who walk on glowing embers use this phenomenon in order not to get burned despite strong, local heat. We have seen this in various places in the world. There is a puzzling proximity between consciousness and the biological order that surprises those who see the human being as pure chemistry. Because how is it possible for the consciousness, located as it is in the brain, to prevent blisters on the toes? However, if we see the organism as a whole where everything is connected through the cells' communication with each other and if we imagine consciousness as something that results from this dialogue between the cells, everything becomes a little less puzzling.

This proximity between consciousness and the biological order can be found in many different experiments. Take the famous study where a group of cancer patients met in small groups to talk about their lives and problems. These patients survived twice as long as those in a control group that did not meet. Members were assigned to each group randomly, and they were all equally sick when they started (14). It also turns out that people who suffer from thrombosis can postpone the time of the next thrombosis if they engage in attempts at personal growth (15). Many of the illnesses spread across the modern western world are of a type where the flesh just about falls from the bones without any apparent external or internal (genetic) reason. You just need to think of arthritis, multiple sclerosis, breast cancer, and colitis to get the picture. In most of the chronic diseases there is no known aetiology – no known reason – like a known provocative factor in the environment or a genetic weakness known to cause the disease.

One may speculate that the main cause of these illnesses is a lifestyle that basically disrupts our own organism and ends up causing our ruin and death, and all because we have squandered the subtle order of our lives. Perhaps people that become ill actually are the ones who through life did not take care of their experience of happiness and a meaningful life? And those who become well again could be the ones who have managed to reclaim the meaning of life? [16] This explanation suggests that you may understand illness by imagining the cells' communication and the biological information. Maybe we need not to think about physics or chemistry at all in order to understand what happens, when we become ill and what is needed to become well again. Maybe we just need to look at the correlation between quality of life and the biological order? If this is correct there is every reason to revise your life if you should become seriously ill. Perhaps an illness is your real chance to figure yourself out, discover life's coherence and revise ill-suited views and preconceptions [17-19]. As long as the recipe for the human being is intact and active in our innermost selves it is possible, in principle, to become well again.

## **Our love for life**

Life is full of battles and competition and worthy opponents. Many have made this the most important aspect of life and interpreted life as a continuous battle for survival. However, to us, our love of life is the primary quality. Competing with other living creatures in the battle

for survival and realization of life is secondary. From life's point of view, animals and plants are connected to each other and the surrounding world in a direct and uncomplicated way. But for every person it is a mission in life to discover exactly this uncomplicated and direct way of being part of the world. Personally, we find that this proximity is like a deep love for life and the world around us. To us, the force of this connectedness in life is the raw material of which human love is made. The love of life is one of the most important sources for solving our problems. If our best friend should die I shall find a new one when I am through grieving over his loss. If my wife should leave me or I leave her I shall still have my love of life. But without the love of life itself, the gigantic whole of which we are a part, there will be nothing much to live for. With that love as the backbone of our existence we can still be toppled, but never really knocked down and never really beaten by anything, but death itself. Our individual worlds may tumble down and there will still be hope if the backbone in life is love of life itself. When you discover life within yourself – in your innermost self – you do not find your ego or an isolated island. On the contrary, you find a unity, coherence and life's own, eternally growing forces (20). The greatest life we can live is a life in the service of these forces far greater than us.

## **Conclusion**

The human organism is a highly organized blob of mucous made up of ten thousand billions of small creatures, the cells, that communicate so efficiently that they are able to dissolve the distance between each other and fuse into the entity we know as a person (me), an organism with consciousness.

Parallel to this process at the micro-level we know about communication at the macro-level between people, which reduces distance. The picture is complicated by the fact that people can communicate in several ways, through words and reason (which often increases the distance between people!) and through feelings. When we speak with each other we attune our view of the world and our sense of reality, because this is essential for co-operation and the practical organization of the world. But when we just talk to each other – when we exist in the same space – our organisms exchange enormous amounts of information that is never expressed in words, but which makes us really close and able to know each other properly.

To us, love is a direct expression of the process by which living matter reduces distance through communication. You may feel so close to a loved one that you experience a kind of unity, where you understand each other completely. However rarely this occurs we have all caught a glimpse of it. Such love is a potential in all of us, and we all long for it and hope to experience it in life.

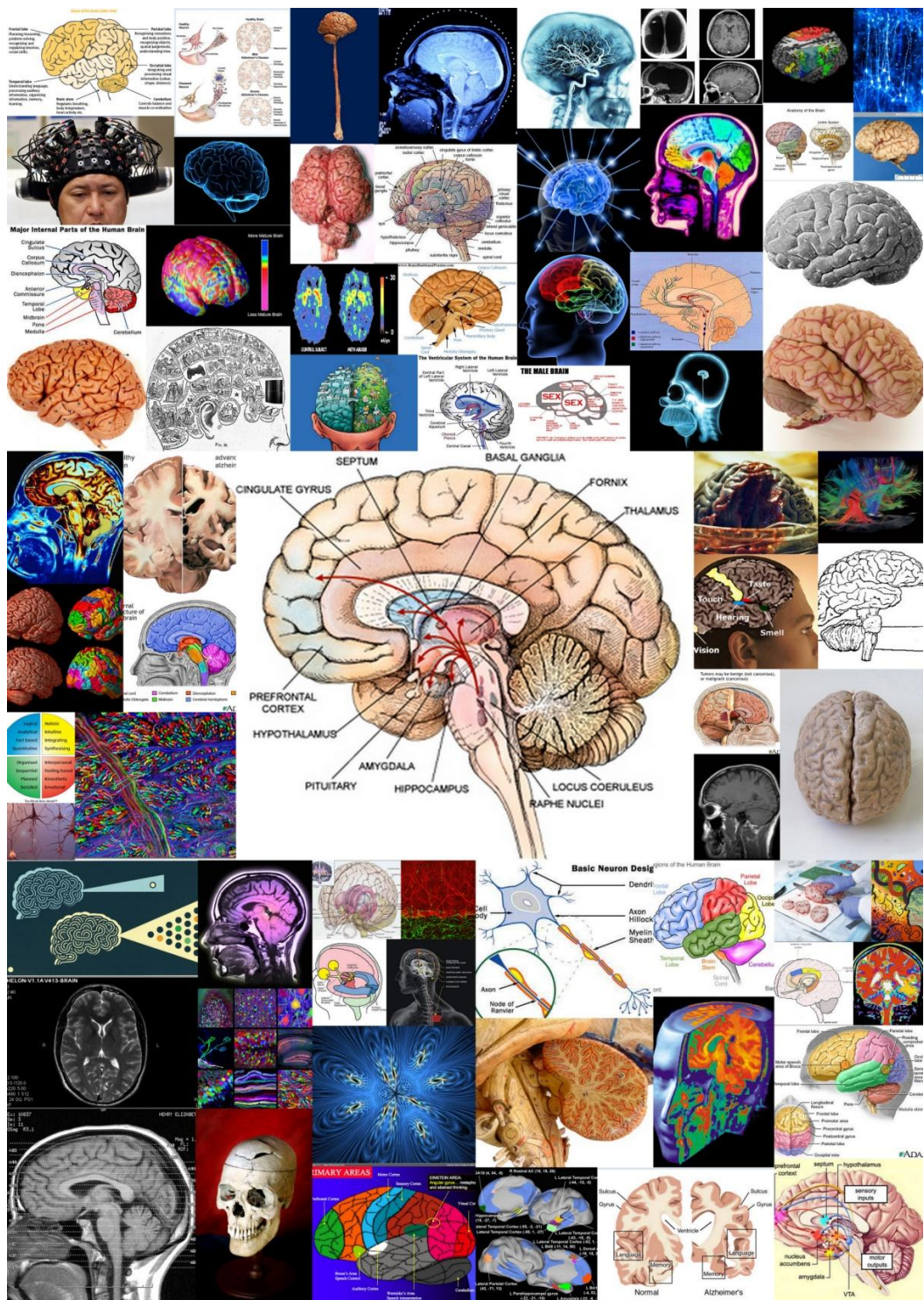
From a scientific perspective living matter's ability to communicate is a very peculiar phenomenon. All the cells in the colony are in direct communication with each other and this communication organizes a community, which corresponds to the information stored through the history of evolution as the recipe for the organism. Through this biological information every organism appears to be in contact with all the other organisms both near and far.

We need a radical new biological and medical science to explain biological information to such an extent that QOL, love and consciousness, qualia and joy will be understood. Such a

science will give us the bridge between consciousness and biological order at the cellular level, we need to explain the mysterious strong connection between QOL and health and disease [21-23]. We suspect such a new, more holistic medical science to explain the hundred or so scientific studies indicating that love and intimacy often is the best medicine [24].

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## **The brain and consciousness**

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In this chapter we look at the brain's structure and function from a philosophical perspective. Although the brain at the micro-level with its trillions of ultra-thin nerve fibres is one of the most complicated structures in the known universe, you can still grasp its composition, if you envision the level of the cell. How this structure functions is not quite clear. You can understand its function at fibre-level, because it is fairly simple and you can understand it at the cell-level, but it is already vague. Roughly speaking, you can imagine a single nerve cell as a tiny, independent computer whose behaviour is dependent on continuous calculations of all input. At the organ level the function can be understood as an extremely complex pattern machine. Finally, the brain's function can be understood at the cognitive level as what provides consciousness through its ability to keep order in our complicated reality. The superior function of the brain is to connect us, our higher self, to the surrounding world. The brain has been developed so that it can create all kinds of possible complex patterns. The connectivity seems to imply that the patterns of the human brain are 1,000-dimensional. It is our vision that these complicated patterns arise from basic patterns in the quantum matter of which everything is created.

In our opinion, our consciousness' special utilization of a patterned aspect of nature is what lies behind inscrutable statements like 'Man is created in God's image'. We suggest that these patterns in matter are the basic, creative force that influences all living organisms. Unfortunately, science has only just begun to understand these patterns. The Bible's description of the origin of man is two people eating from the tree of knowledge and as punishment they are expelled from the Garden of Eden. What does that mean? It means that we as conscious creatures no longer were an unproblematic, harmonious part of the world around us.

The great question is why this consciousness about the world, provided by the brain, is not a gift that makes life better instead of getting us expelled from the Garden of Eden. We think that our real problem is the fact that so far we are still not in control of our consciousness. Instead of it serving us we have become its slaves. If we come to understand brain and consciousness in order to solve this basic problem of our existence, we shall again be able to become a coherent part of the world, both as individuals and as a species. We share the vision that such an understanding of the problems of consciousness will make medical science holistic and will bring quality of life, health and ability of functioning to its patients.

## **Introduction**

The problem addressed in this chapter is one of the most complex in biology and medicine and one that has been the subject for intense scientific exploration during the last two decades with many amazing new discoveries. There is a literature so vast that it can hardly be studied in detail by any researcher, and nobody seems to be able to read all the articles published in fine journals like Behavioural and Brain Sciences. A number of nice introductions like the book by Kandel and Schwartz “Principles of neural science” (1) have been published during this period covering a number of aspects from philosophical to anatomical and physiological (1-13). So what can we contribute to this huge body of knowledge on the brain and consciousness? Let us start with the very simple consideration that science is an interpretation of reality. When we describe the brain we must make some initial choices about how to conceive mind, consciousness, understanding and the project of science itself. So in this chapter we step back to look at the fundamentals. What do we know, from a philosophical and abstract perspective? What are the axioms we choose to believe in, so we can get on with the scientific exploration? In our opinion this process of stepping back and looking at the greater picture is much too seldom done in our science, where we are so busy producing scientific papers full of models, theories and data from measurements. It is so important in medical scientific research and of value to our patients that we know direction, reason and the problems connected to consciousness, that we find it valuable to stop and think, abstractly and vaguely, about the connection between consciousness and brain (14). We hope that the reader shares this onion.

## **The beginning of the era of large humanoid brains**

About 10,000 years ago something very strange happened here on Earth. Some rather primitive ape-men developed the ability to describe the world in a very detailed way using an abstract language. They developed mental consciousness. According to archaeological discoveries the leap to modern man has been under way for about 100,000 years, starting with the mastery of fire and the use of very primitive tools. But not until a common description of the world appeared was it possible to work out social rules in tribal communities, develop a number of specialized techniques and develop the very complicated townships, which appeared for the first time around then. How may we understand the evolution of mankind and the emergence of consciousness? A good place to start is the study of the human brain, which is quite unique. How was the brain developed and what were the forces that spurred this development? It is our personal vision that complicated basic patterns in the quantum matter (8, 15) of which everything is created has served as a template, because the brain has been developed so that it can create all possible complex patterns, as we shall see. In our opinion, our special utilization of a patterned aspect of nature (16, 17) is what lies behind inscrutable statements like ‘Man is created in God’s image’. As we see it, these patterns in matter are the basic, creative force that influences living organisms. Unfortunately, science has only just begun to understand these patterns (18-20). We shall look at the brain’s structure



and function. Although the brain at micro-level with its trillions of ultra-thin nerve fibres is one of the most complicated structures in the known universe, you can still grasp its composition if you go up to the level of the cell (21-25). How this structure functions is not quite clear. You can understand its function at fibre-level, because it is fairly simple (1) and you can understand it at cell-level, but it is already vague (26-39). Roughly speaking, you can envision a single nerve cell as a tiny, independent computer whose behaviour is dependent on continuous calculations of all input. At organ level the function can be understood as an extremely complex pattern machine. Finally, the brain's function can be understood at the cognitive level as what provides consciousness through its ability to keep order in our complicated reality (7, 31-34). The superior function of the brain is to connect us to the surrounding world, at least for the brains of a size we can manage to study (35). Apparently, the brain systematizes all our experiences and verbal inputs into that map of reality. This map is not just a static depiction; it contains time so that our plans and strategies for realizing our innermost dreams are also part of this map (14). The Bible's description of the origin of man is two people eating from the Tree of Knowledge and as punishment they are expelled from the Garden of Eden. What does that mean? It means that we as conscious creatures no longer were an unproblematic, harmonious part of the world around us. We were no longer as one with the animals and plants of the Garden of Eden. The great question is why this consciousness about the world provided by the brain is not a gift that makes life better instead of getting us expelled from Eden (36-38). We think that our real problem is the fact that so far we are still not in control of our consciousness (39). Instead of it serving us we have become its slaves. If we solve this basic problem of our existence (40) we shall again be able to become a coherent part of the world, both as individuals (41, 42) and as a species.

## **The brain is mysterious**

The brain is one of the greatest puzzles in science. We have only just begun to understand how the brain is able to interpret data from the eyes and the ears, how the motor patterns that co-ordinate the body's scores of muscles are arranged during walking, how we can recognize a particular face among billions, and speak ten different languages with thousands and thousands of words, as some people are able to (1). And we have not even begun to understand what it means to understand. How is man able to design things like the theory of relativity, quantum mechanics and mathematics? Today there are many models that are vaguely starting to explain some of the things that take place in the brain's layer of nerve cells, e.g. 'neural networks', and promising models of the creation of very complex patterns from the repetition of simple processes (19). But really, it is not very impressive when you think of the creativity and efficiency of our brains. Without insight into matter itself and biology we shall never be able to understand the basic principles behind the brain and consciousness. Let us introduce the problem of the brain with a couple of examples of the mysterious connection between brain and consciousness. It once happened that a university student with practically no brain was used in a brain-scan test (43). When he was still a foetus the main part of the cerebral substance had been replaced by water. Usually, the condition hydrocephalus with water in the head leads to severe mental retardation, but this person had managed to reach university level without obvious mental deficiencies. His brain consisted of

an edge of tissue only millimetres or a few centimetres thick, lining the cranium. The traditional explanation claims that normally we only use 10% of the brain and therefore the student possessed exactly the amount that was needed. But if we observe the functions of a normal brain we will see that every brain cell is working more or less constantly. If we could manage with 10% we probably would not have developed our large brain. And still, there is something wrong, because apparently there are some who can manage with such a small brain. An experiment with cats showed similar results (43). During a test a researcher surgically removed most of a cat's brain apart from the areas that covered vital reflexes. He had the cat walk around on the tables during a large conference with neurologists and people in brain research and challenged the assembly to correctly diagnose the cat. Nobody was able to guess that the cat had no brain, because it behaved almost normally. It comes as something of a surprise that our knowledge of life is born by life itself, but if we remember everything that Hydra was able to do without a brain it does not appear so shocking after all (4). This is just meant as a warning against too quick and simple conclusions.

## **The structure of the brain**

In our attempts to understand the brain and consciousness let us enter the brain and see what takes place in there, starting with the brain structure. Our main interest is the cerebrum cortex, which was especially developed in our transition from ape to man. The human brain consists of a bisected cerebrum weighing about 1 kilogram and situated inside the head. The cerebral cortex consists of approx. 25,000,000,000 brain cells that constantly receive messages from thousands of the other cells, and they in turn communicate with thousands of other cells in an extremely complicated and ramified pattern.

There is an incredible proliferation of cerebral connections within the brain. Neural connections run from numerous cells to the other half of the brain or to distant parts within their own hemisphere. Therefore, it hardly seems likely that the brain is functionally bisected into two essentially different halves, which is the opinion of several neuropsychologists. Despite the anatomical bisection it is actually a closely-knit whole with only minor areas possessing well-defined and isolated functions. All these brain cells are interconnected through an almost incredible mass of neural fibres, nearly 1,000,000 kilometres, which would circumvent the Earth 25 times. The brain can contain all these impulses because they are only one thousandth of a millimetre thick.

## **View of the physiology of the brain**

Neural impulses run from one nerve cell to another. Apart from a few details the opinion today is that we fully understand the distribution of the neural signal from one nerve cell to the next. The next level of understanding is the cell. The cell deals with incoming signals by adding them up one by one (the actual summary function is dependent on the individual cell and can be very complicated). Thus the cell can be seen as a computer that calculates the input received and forwards new signals, when the result is correct. There is little doubt that the cell has such a summary function, but we are convinced that this function is continuously

modified by the biological system through biological information. At levels above the cell level it becomes almost impossible to follow what happens in the brain, because the brain produces functional patterns of nearly infinite complexity, which are also modelled by input from life's information in a way that is not understood at all (44). The effect, however, is that information is transferred from the depth of the organism to the brain and this is a decisive input to our dreams and intuitive awareness of the world. We imagine that brain patterns can be directly regulated by the organism's information system, as in dreaming. This is parallel to the way the self-organization of the cell's molecules is governed by the cell's biological information system (38).

Much research has been carried out in the individual sub-areas of the cerebrum cortex, especially the optical cortex, which is the area that interprets vision. The hope is to pick up, how the brain is able to see and thus to produce artificial, electronic eyes for use in military surveillance, for example. Science has advanced somewhat towards analyzing how optical impressions are gradually led to higher and higher levels of complexity. Unfortunately, scientists lose the threads just where it starts to get interesting, when the optical impressions received from the retina are about to make sense (1). A large number of areas with fixed functions are known but most of the cerebrum cortex is integrative, that is, occupied with interpreting information received by the brain. The frontal lobe deals with the highest integrative levels, the top of the pyramid of consciousness, and keeps track of space, time and abstract ideas (1).

## **The brain is not a computer**

At some time in the future a very fast computer (perhaps 1,000 times faster than the ones we know today) may be able to copy the ability of the human brain to organize the world. But the experience of meaning and consciousness only come from life itself. Therefore, a computer can never become conscious or understanding in an intelligent way the way a human being is. Many scientists and other people try to reduce the brain and consciousness to something inorganic. Especially amongst physicists the so called 'neural networks' is a hot research subject. However, these fairly simple physical models only bear passing resemblance to the human brain. The dynamic we know as 'thought' is not analogous to the lifeless physical models that are on the market today, however sophisticated they may be.

In his book "The user illusion" (45), the author Tor Nørretranders has described the brain as a complicated calculator that more or less creates consciousness as a by-product of the process that reduces the complex to the simple (seemingly a misinterpretation of the Libet's famous experiments (46)). In our opinion this is a materialistic reduction of all those fantastic things that take place in the human brain. Such a description disregards the fact that the brain is a living organ in a living organism, and it does not do justice to consciousness at all. We hold the view that the foundation of consciousness and awareness stems from life itself, from the communication between all the cells of the organism, and not just from the brain. Therefore, the brain does not actually create consciousness; it just provides it with the particular quality or mental order we call reason.

The brain bridges the gap between the depth of life and the world around us nerve cells communicate with each other and the other cells in the body in two ways. Firstly, like any

other cell, through an exchange of biological information of an unknown nature (14,37), which at conception provides the brain with its shape and structure (5). Secondly, through chemical and electrical communication where electrical neural impulses can be transported along neural fibres and jump from cell to cell via chemical synapses. Hormone-like substances secreted by the brain itself that are called neuro-peptides also chemically influence nerve cells.

In order to understand the function of the brain both forms of communication, the one that disseminates biological information and the one that communicates chemical-electrical signals, are needed. This is because the brain bridges the gap between life inside the organism and the outside world (14). The first form of communication, which may be called the basic biological communication that makes the brain an integrated organ in the organism, creates the bridge towards the inside. The bridge towards the outside, to the outside world, is built with the help of the other form of communication, the electrical and chemical, that is well suited for sensing via the sensory organs. One might say that the brain receives the signals about our inner dreams and wishes (the biological potentials) through the former kind of communication, while the information about the outside world is received through the latter. The brain's real business appears to be the production of electrical patterns that are so like the biological patterns (whose nature today is unknown but probably not electrical – more like quantum mechanical) that the description of reality can bridge the gap between the inside and the outside. In this way meaning is created of all the input we receive from the outside through our sensory organs, a meaning, which, popularly speaking, occurs when sense perceptions from the outside agree with the organism's inner biological order. What the brain is doing is organizing reality. It handles all sense perceptions and impressions that over time pass our way and re-organizes these sense perceptions into plans and strategies for the future in accordance with our inner dreams and wishes.

## **The order of our reason and intuition**

The result of the brain's activity is the order of reason. The whole world has been neatly arranged and described to the smallest detail in time and space. Still, this order is somehow artificial, a reduction of an infinitely complicated reality into something that is easy for us to comprehend and relate to. As organisms we are able directly to experience reality – in principle. We use our wholeness instead of our brain and senses. Such a direct experience ought to provide us with a much more dynamic and correct picture of reality. However, the picture is so chaotic and disorderly that it does not make much sense to our reason, which is practically drowning in the flood of information. It is this direct access to reality that we usually call intuition, a sure knowledge situated at a level that is lower than that of the model of the world, which is created by language and reason.

We possess two sources of knowledge. One is through the senses, where the impressions become a certain, well-organized picture of reality with the help of the brain's organizing process. All the things that we learn can be stored in a neat and well-organized way in this picture, which produces our map of reality. Usually, we call this organizing faculty reason. Our other source of knowledge is intuition. Here awareness takes hold of the reality of life, both on the inside and outside, in a more direct but far less organized way. In this way

intuition is directly connected to the information system living matter uses. Through this information system our intuition can draw upon all the information contained in the recipe for a human being, as well as all the knowledge life acquires through its intense dialogue with other living beings at all the levels that make up the world. People can function at his optimum only when both intuition and reason are cultivated and in balance, that is, when reason gives intuition ample space and when intuition does not cover subjects that are better handled by reason.

## **The mystery of awareness**

The nature of human awareness is mysterious. Let us distinguish between consciousness and awareness. To us, consciousness is a cultivated form of awareness. Consciousness is connected to the brain in the shape of reason, while awareness is connected to life itself. The awareness of the individual cells coalesces and make up the raw material for the organism's overall awareness. There are people who can relate how they witnessed operations performed on them although they were fully anesthetized. What makes it difficult to disregard such stories is the fact that what the patients purported to have experienced, while their brain was fully anesthetized, such as dialogues and other events actually did take place. Something or other in their being was aware even though the brain was anesthetized. Apparently in these cases man is aware without being conscious and without the senses being active. We may think of awareness as a faculty that can grab hold of multitudinous things. When the cells' united awareness gets hold of the brain it lets us experience the outside world through our senses and through the organized interpretation we call our map of reality, that is, our reason's consciousness of the world. This is different from the direct, spontaneous and unreflective experience of the world that the brain receives when awareness grabs hold of reality directly and without consulting the brain and the senses. Awareness is the ability produced by being fully and completely present in your life.

## **Night dreams – a window of the soul**

When we sleep half the time is spent dreaming. Actually, we also sometimes dream when we are awake, but daydreams, imaginings and other creative thought processes are of a more fragile quality, because our brain is already using most of its energy on maintaining the awareness of the world that is descriptive of the ordinary waking state. But at night, when our senses are disconnected from the world the brain is set free and is able to carry out the creative process we call dreaming. Probably this process is not qualitatively different from daydreaming or having visions about the good life, but night dreams are still of a different nature than daydreams. In our dreams we get much closer to our body, our life and our organism. When we are disconnected from the outside world we become temporarily free and are able to shape our pictures in the brain according to our profound desires and potentials.

The dreaming state can be registered with electrodes attached to the brain. We see that the brain works in different, characteristic rhythms (high-frequency alpha and beta waves and low-frequency delta and theta waves). During the night we have periods with very active

dreams (with extremely high-frequency brain waves) and periods without dreams (with extremely low-frequency brain waves). We think that what happens here is that awareness swings from being mostly in the brain to being mostly in the body when you go from dreaming to not dreaming. An interpretation of this can be that the natural course of sleep is about fusing brain and body and bring the map in harmony with the inner life just like the daily, outer activity is about bringing the map in harmony with the outside world. In this way we try every night to heal ourselves and create the sound bridge between the depth of life and the outside world (14). Dreams are in the Freudian and Jungian tradition (47) seen to be about our conflicts and existential problems. A lively debate occurs inside us when what we have learned about the world is inconsistent with life itself. Subconsciously we try to become whole, healthy, happy and well-balanced people. Therefore, dreams hold an enormous potential for healing and curing. When we dream and really relax it seems that all parts of our organism are tied together a little better, as if disorders and breaches in our existence are healed. It is important to notice that this conception of dreams as a bridge to our soul or genuine self (higher self, wholeness) is not shared with all researchers in the cognitive traditions.

## **The world is modeled on the patterns of the brain**

To understand what happens in the brain it should also be mentioned that a quarter of the energy of the human organism is spent on keeping the brain going 24 hours a day. Nerve tissue has a formidably high metabolism. Every nerve cell is constantly sending signals to others, the brain as whole never rests. Now, what is the brain doing with all these nerve fibres and all that energy? Apparently it produces very advanced patterns that are the templates we use for shaping our whole description of the world. To get an idea of just how complicated these patterns are, you can think of the patterns in water, where impulses are only moved from one molecule to the next in two or three dimensions. The surface of water with its two dimensions produces rings and the like. With three dimensions you can see various types of whirls and spindrifts. The ramifications in the brain make the brain's patterns 1,000-dimensional. The patterns are further complicated by the fact that each area of the brain (each nerve cell) communicates not only with its neighbour, but also with distant areas all over the brain that again react back to the first place via a number of intermediate steps. However, it does not become really complex until the brain starts working and keeps feeding every nerve cell with its own and other brain cells' output. Such iterative processes where the same simple process is repeated time and again in almost the same way have led to the most complex patterns (just think of the many levels of spirals and patterns of the Mandelbrot fractal, or whirls in the water or clouds in the sky (18,19). So what happens when the processes in question are patterns in the brain's incredibly complicated network? Then it no longer seems strange that our brain can model and create all the various shapes, phenomena, processes and basic qualities of the outside world that we use for constructing our interpretation of reality. However, it is still shocking that our head is able to contain such an incredibly extensive and dynamic model of the whole world. One of the real mysteries is memory, the concept that all these impressions, experiences and phenomena can be stored in the brain and recalled in an

orderly way almost immediately. On the other hand, perhaps it is no stranger than the recipe for the human being that is stored in the biological material. The principle of storage is probably exactly the same. Life's ability to handle information is almost unfathomable.

## **The brain creates order through a hierarchy of concepts**

The brain organizes reality for the person and it creates order from a chaotic reality. The brain can organize every received element of reality into groups of elements that have common properties. In this way all the elements of reality are organized into hierarchically, so that elements combine at still higher levels to finally produce our abstract concepts of the world. You could say that reality is arranged into a 'pyramid of consciousness' with everything concrete forming the broad foundation and the few, extensive concepts at the top of the pyramid. Everything we know is organized according to properties. Some examples are kitchen utensils, others vehicles. The kitchen utensils can be subdivided into pots and pans, while the means of transportation can be subdivided into cars, bicycles, etc. In the same way all the processes that exist in reality are categorized as being creative, destructive, for maintenance or for transformation. All phenomena can be grouped according to certain specific qualities like shape and colour, or according to abstract qualities such as value, meaning, structure, etc. The whole of reality is organized into main areas through concepts such as 'matter' (the physical, chemical or inorganic, dead), 'life' (the organic) and 'consciousness' (the psychological, ethical, philosophical and religious), 'society' (economy, law and politics) as well as a number of other concepts. This order is the leading principle in what we call reason, but the actual structure behind this order, the system in which reason acts, is still not understood, neither philosophically nor scientifically. This profusion of concrete phenomena and processes that characterize our world is gathered in an ordered description of the world through abstract concepts and principles. When you add it all up it becomes the map of reality. This map is constructed through an ingenious combination of the brain's ability to create order in the world with the help of self-organizing patterns and life's ability to add meaning to such patterns.

## **Conclusion on the brain and reality**

Thus our minds contains a description of the world that is very complicated and which is made up of endless numbers of these extremely complicated patterns that are added together in order to produce faces, flowers and trees and even products such as metal surfaces. Everything that we have experienced in life, all the pencils we have studied and the glasses of water we have lifted has been boiled down into a very complicated and dynamic description of the reality contained in our brains. We just have to see the reflection of the sun in a glass to acknowledge that we are facing a water tumbler. How can this be? It is because we have seen so many glasses that now we master visual perception almost completely. What makes our description of the world really effective is that we are able to sprinkle our personal history, all

our previous experiences and interpretations, over every new environment or locality that we enter. Thus every sensation is tinged with those like it that we have seen before, and any almost any scene immediately becomes a whole and meaningful picture with people, furniture, trees, or whatever. This is very practical and you do not really need to spend much energy on what you are actually seeing, because you are able to get a sense of it very well purely by reflex. You only need a few sensory clues and everything you have learned and experienced about the world becomes present again. Now we are able to understand what is the evolutionary purpose of the brain: To create order out of the chaos of reality. With a sound model of the world we become incredibly efficient at perceiving, ordering and acting in the world. Thus, through this ability man has become the master of matter and has been able to invent zippers and space shuttles. The problem is that concurrent with mastering matter we have lost our grip of our soul (48-51). We are lost our way in the mental maps of the world (44,52). If we come to understand brain and consciousness and solve this basic problem of our existence we shall again be able to become a coherent part of the world, both as individuals and as a species. We share the vision that such an understanding of the problems of consciousness will make medical science holistic and will bring quality of life, health and ability of functioning to its patients.

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## **Seizing the meaning of life**

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This chapter presents a positive philosophy of life developed to support and inspire patients to take more responsibility for their own lives and to draw more efficiently on their known or hidden resources. The idea is that everybody can become wiser, use themselves better, and thus improve quality of life, subjective health and ability of functioning. To be responsible means to see yourself as the cause of your own existence and state of being. To be the one, who forms your own life to your liking, so that others do not shape it in the way they prefer to see you. Seen this way, taking responsibility in practice is one of the most difficult things to do. One of the greatest and most difficult things to do in this context is to be able to love. To be the one who loves, instead of being the one who demands love, care, awareness, respect and acceptance from somebody else.

Since almost all of us have had parents, who maybe loved us too little and mostly conditionally, we all harbour a deep yearning for being loved as we are, unconditionally. A lot of our energy is spent trying to find recognition and acceptance, more or less as we did as children from our parents, who created the framework and defined the rules of the game. But today reality is different. We have grown up and now life is about shaping our own existence. so we must be the ones who love. This is what responsibility is all about. Taking responsibility is quite literally moving the barriers in our lives inside ourselves. Taking responsibility for life means that you are willing to see that the real barriers are not all these external ones, but something that can be found within yourself. Of course there is an outside world, which we cannot easily shape according to your dreams. But a responsible point of view is that although it is difficult the problem is not impossible; it is your real challenge and task. If there is something you really want, you can achieve it, but whether it happens depends on your wholehearted, goal-oriented and continuous attempts. This chapter describes the philosophy about seizing the meaning of life and becoming well again, even when there is little time left.

### **Introduction**

To be healed means to become whole again. The only thing that really can make us whole is to let go of everything in us that exists as separate and unconnected parts. The fragmented

way we describe reality in our minds fragments our existence and makes us lose our innate coherence (1). The egotistic nature of our philosophy of life makes us lose our innocence, our spiritual purity and the loving, sound and honest quality of all our inward and outward relations (2). The marvellous thing is that we can get our life back (3). No matter how much dirt we have collected, no matter how much trouble we are in, no matter how much negative we have done, we can get our life back. But that is only if we are willing to clear up the mess. The cure to become well again, to get back to life and become whole again is the same whether we are ill physically or psychologically, lonely or suffering from existential problems that make us contemplate suicide or make us unfit for work. This is what the medical arts and all real healing are about. If you become ill – and now we talk about diseases like cancer or a stroke, arthritis, alcoholism, depression or even light degrees of dementia – it seems that you can reclaim your life if you are willing to fight really hard to keep it. But you must start the fight here and now. If you want healing you want it today and you want to fight, but it can be that you do not know how to do it. We believe that usually the individual on his own is able to do much more for himself than any physician, nurse, alternative therapist, social worker or any other expert can do. Only people who fight the fight of their lives and invest their total resources in themselves stand a chance of getting their lives straightened out again.

## **How do you fight for your life?**

Here is the \$100,000 question: How do you fight for your life? How do you revitalize your whole existence? How do you regain youth, life-energy and joyfulness? The reason that so few people these days have any success with this project is that it is paradoxical: The fight is the fight for not fighting. The fight is a fight to let go. The fight is a fight to bring all the futile efforts and worries to an end and be relaxed, present and natural, easygoing, focused on the good things and balanced. What make us ill are all the life-denying decisions we take when we are overwhelmed by pains and troubles (4). The reason that we take these decisions is that by doing so, we can escape pain. The pains of the situation are suppressed, when we chose to describe reality in a way that minimizes our own responsibility. This is very simple, but generally poorly understood. So, what is required for healing is letting go of all the limiting beliefs, all the life-denying decisions we have taken though our lifetime. The minute we do that, we start to heal. The reason that we have to fight doing this is that our philosophy of life lies embedded in pain and only through confronting and reliving that pain can we get so close to the decisions that we can actually articulate them precisely enough to let go of them.

The sick or troubled person who leaves the responsibility for the essential decisions in life to others can be certain that the decisions made are not optimal. This will lead the person to go downhill for as long as this lack of responsibility continues. To demand to be in authority of your own life, to be the one who decides within your own personal circle is to become totally independent. You have to grab hold of your own brave lion's heart and say "yes" and "no" in life. Do you live with your heart or have you already pawned your soul? To regain a personal and independent firsthand knowledge of life and the world is what is needed in your fight back to life. Only a person, who really believes in himself, has the opportunity to discover what is really right or wrong for him. If you do not have the courage to listen to your inner self you will inadvertently live a life in which you will have to rely on others'

interpretation of things, also when life is difficult. Think of life as a great and complicated building. Every right decision throughout life adds a stone to our life's castle. Every small wrong choice removes a stone from the castle. If the balance tips the wrong way we will gradually, over the years, lose the order in our lives, tear our building down and gradually but systematically become more disconnected and superficial.

If we are observant we will see how our organism gradually falls apart and degenerates towards death during the last decades of our lives, our old age. Old age and sickness is the result of hundreds of life-denying decisions that you now have to identify and let go of to be healed. This is not, as you might expect, an intellectual effort. This work is done through our feelings. That is the big trick: To feel, to understand and to let go. Concurrent with ruining or trivializing our social relations we become poorer in our self-expression, less sufficient and have fewer resources. Concurrent with our resigning ourselves as far as our dreams are concerned, our self-confidence suffers a serious break. Concurrent with our losing our relationships with the surrounding world we lose the feeling of value and self-worth while our inner selves gradually lose the experience of coherence and the meaning of life. The poor condition so many old people experience is neither natural nor unavoidable. If you ask yourself whether you are on the way up or down you will see what we mean. It is vitally important to your future life that you are on your way up throughout life. From the start many people abandon such ideas, but it seems to me that somewhere they have given up already. To us it is essential to believe that life keeps getting better, more faultless, and richer on energy and more balanced. To us it is this outlook that characterizes those who do their best to live wholly throughout life. If you recognize the downward pattern in your life the great trick is to change this pattern so that life systematically becomes better again, so that you become well again if you happened to be ill. The day you stop collecting negative beliefs and start to let go of stock of negative beliefs, the magic happens. You see: it is not that difficult really. But you must find the key. We are meant to be cheerful and light-hearted, and if we are not, today we can begin to change to become so. In theory, the recipe is very simple. Acknowledge your misconceptions of life, yourself and the world and adjust your map by letting them go. Open yourself humbly to the fact that you have not understood the most profound and important things in life and seek high and low for the meaning of life. With the right spirit this project always succeeds as long as there is enough time. Oh, we better add that there is never enough time. But usually, the awareness of a definite destruction and death that invariably comes closer is very motivating. Since we all have to die in a little while and still carry on living as if we have oceans of time, awareness of death is something we are rarely open to.

## **Being ill and wanting to become well again**

Most people react to serious diseases by becoming scared, maybe apprehensive and often terribly unsure. What is happening to me? Am I dying? Will I ever get well again? Will my life be the same? The majority of people visit the physician, when they feel really sick. It is important to know what you are up against, what the physician can say about what is wrong with you. Is important not to be too shy, when you talk with the physician, otherwise you will not get an answer to all your questions. Remember to ask for referrals to the specialist whom you feel you need to consult in order to get a proper diagnosis. It is a great art to use the

physician as a consultant providing you with the information you need to take the right decisions. The reason you cannot just receive a diagnosis and a treatment is that it is your life, so you must stay responsible, knowing what is going on and taking your own beliefs and understanding of the healing process as your guidelines. Of course, there is usually a lot of sense in what the physician is saying. Modern physicians are experts in diagnostics. But healing, on the other hand, is not just about sense. It is more about how we come to experience our life, body, and soul. Major changes in perception and experience often lead to major changes in the rate of healing. It is our claim that the cause of most diseases today is unknown to medical science. Therefore, the physician probably does not know the reason for the illness you are consulting him about. A physician can treat you in accordance with tradition and good practice, but he is not the one who heals you. Today a physician usually mostly treats symptoms. He can describe what usually happens with a given treatment and in this way he can make a prognosis. But the prognosis is only valid if you are an ordinary patient, a being who accepts that the physician is responsible for the treatment. You cannot do that if you work with yourself.

In his book “Love, Medicine and Miracles”, the American surgeon Bernie S Siegel called this latter type of patient “exceptional” and he discovered that they fare much better than the average patient (5). When you start taking responsibility for becoming well again by systematically and industriously finding and letting go of life-limiting beliefs, you create a new balance within your life. From this day on you belong to a group that is not covered by ordinary statistics. It is our hope that over the next 10-20 years, surveys like The Danish Quality of Life Survey will provide us with useful new statistics and prognoses for those patients, who struggle with their views of themselves and the world and in this way obtain a better quality of life. When you are ill you are often scared and unsure and in that state it is terribly difficult to say no to something your physician propose, even if you do not really believe in it. He can talk about an operation or chemotherapy, some medicine with heavy side effects or perhaps a hormone supplement that you would rather do without. We can only recommend that you do what you deep down know is right after you have collected all the relevant information. Sometimes the physicians will think you are crazy and maybe he is right, but it is your life and you are the one who is responsible and therefore must take all the decisions yourself. Do not let go of the controls! Let go of the mistrust and of the negative decisions.

## **Take responsibility**

To take responsibility and shape your own course through the illness is often your only chance for survival, because the modern physicians do not cure most of the serious diseases. You often carry them with you through life. So do not let your life be a continuous battle against symptoms that medicine cannot really suppress. Be brave-hearted and save yourself by assuming responsibility for your life. Feel the pain, understand your past and improve your philosophy of life on a daily basis, every single day letting go of still more negative attitudes to life. This will make your quality of life and health go straight up like a hot-air balloon. Life is rough and much courage and wisdom are needed, when you are suffering from a serious illness, like keeping your balance on a thin tree trunk spanning a chasm. There is no way back



so you better not fall down. To relinquish responsibility makes you inattentive and controlled by somebody, who does not have your opportunity to see what is happening. Be awake and be present if you love life. It is easy to have a strange relationship to that part of the body that is hardest hit by the disease. It is not me at all, I am not like that! It is not my body, my stomach, my leg or my breast that looks like that or feels like that. Distancing yourself from the problem is an understandable reaction. The distance and resignation immediately remove some of the suffering. But looking at your body and illness in this way, you help to lock the situation in place and perhaps push developments in the wrong direction.

To be able to really want to become well again you have to confront the suffering of being ill. You need to carry this suffering into your very soul. If you distance yourself from the suffering, you often also distance yourself from getting cured. We do not mean to say that you have to devote yourself to the suffering, but you need to turn towards it and not away from it, so to speak. Feeling the pain associated with the sick part of the body is often the key to healing, because that pain represents the relevant, life-limiting decisions you took in the past. Confronting the pain makes these decisions surface in consciousness where they can be analyzed, articulated correctly and finally released – dropped for good, leaving you with a better attitude towards life. To be healthy and well means that the body, the whole organism, is full of life. A healthy body is a direct manifestation of our innate wisdom and vibrates with all our vital energy. Basically, the body is a manifestation of life's innermost recipe for a human being. We are meant to love our own flesh, to be totally present in it and accept it and live it. To be present is an absolute necessity for being totally healthy and well. When you are ill the disease often takes up a great amount of space in your life. The disease can monopolize all available resources and all our mental energy. When we are ill we easily become sad and depressed. We feel sorry for ourselves and we easily end up in a vicious circle where life can go dramatically downhill before we know it. However difficult, the only way to get well is to be occupied by something else. This does not mean that you must lie to yourself about your illness or run away from it, not at all. It means that at some deep level within your life the disease may be connected to some basic suffering or imbalance that needs to be faced. The existential problems that are the real cause of the disease appear as your existential pains and your worried mind. In order to become well you need to turn your attention away from all concrete aspects of disease and turn towards its roots, the underlying reasons: the pains and the life-denying decisions you took to make them go away. In our opinion this process of healing and learning will always lead you to the centre, to the core of existence, and to the suffering you feel here, when life is not what it should be. A deep existential distress is inevitably found and felt. A terrible old pain, which made you abandon the very meaning of your life, often many years ago. To us the project of becoming well again is identical with the project of discovering the profound meaning in and joy of life. As soon as you let go of the negative decisions the joy and vital energy will come back.

## **Joy of life**

As explained in the previous articles it is our opinion that we become ill if we do not retain this joy in our consciousness and carry it with us throughout life. Forced by necessity, therefore, our chance of becoming well again is dependent on our rediscovering this profound

joy of life. It is hidden behind negative decisions that are hidden behind existential pain that is hidden behind our basic denial of our life as painful and superficial. How is this done? Basically and in principle it is very easy: feel, understand, let go of your limiting beliefs. Unfortunately, one cannot provide a specific recipe that every ill person can follow. It is easy to give advice, but when it comes down to it, it is rarely worth much as everybody must find out what to do for him- or herself. Health magazines are overflowing with advice mostly about health improving behaviour. They seem often fair and relevant, but can be so difficult to follow that you just have to smile.

Here is a list of examples: "Every morning and night for 10 minutes think of two nice events in your life. Make sure that you laugh for a total of 30 minutes before lunch. Try to have a confidential conversation every day with at least one person who means something to you. Tidy up your personal relationships and your past. Tell yourself 400 times a day that you love life, accept it as a challenge, and dig out your love for life. Eat exactly what you want when you have discovered what you need. Drop sex and be together in love, there are more important things to use your energy on. Find out why you became ill. Keep asking yourself until you have an answer that you can use to help yourself to become well again. Use death as a guide; each night in the dark before you go to sleep try to feel like a corpse and see that you change the cold, black feeling to a feeling of life and warmth so that you feel totally alive before you fall asleep.

Start dreaming that you will get well again and then dream about what is needed to achieve this goal. Trust the profound wisdom of life and do what you feel you need to do even though it does not make sense to you." To start with, the person who possesses the self-discipline and energy to follow all this advice is not likely to become ill in the first place. Secondly, the key to improving your quality of life and thereby your health is more likely to be emotional than behavioural. Your basic problems in life are about emotional pains and understanding, not primarily about behaviour. Good behaviour will eventually follow fine understanding, but just doing without being will not take you there. Although in the middle of all the confusion, concrete advice like this may appear to be the right place to start, it is often quite misleading and it will quickly do more harm than good. You can easily waste what little energy you have.

It is up to the individual to discover what needs to be done in order to get back to life, and to feel deep inside that what is being done is the correct thing. You must have the feeling that it is kill or cure and that you can do nothing else. Allow us to make a couple of general suggestions. Please remember that they reflect our personal view of life and disease and may be wrong for you.

The difficulty in becoming well again seems basically to be about creating your own life. Some day you are well again and acknowledge that you have recovered. In reality, this acknowledgment covers a profound, existential decision that you are well again. But the problem is that you cannot make such a decision just like that, it needs self-confidence and lots of personal energy, which you actually do not have just now. If you believed that you had this possibility you would no doubt just use it! It is not really about deciding to be well, but to let go of all the negative decisions that made you ill. Let us start with the perspective that what you lack is some energy. As we suggest that you do not focus on the disease, but on the basic existential problems, we shall talk no more about disease, but turn towards the all important: reclaiming or rediscovering the meaning of life.

## **Becoming more energetic**

One fruitful method of thinking about personal development is by using the concept of personal energy (please note that we are dealing here with “energy” as experienced, not physical or chemical energy). With its energy the living organism can carry out a piece of work, like influencing the world or change the state of the organism, quite analogous with the energy in a battery, which can drive an engine or an electric bulb. The biological system possesses something we have every right to call the energy level: our personal energy, high or low.

Now, what is the personal energy? From where does it come? And how can we lose it? It seems to us that vital energy stems from knowing your own personal meaning in life, and that we lose it by denying it as a means to escape emotional pain. It is the meaning of life that makes people make a real effort and fight persistently and continuously to realize their dreams. Knowing the meaning of your life is just something that opens the gates. The energy stems from life itself. And you can lose it if you live contrary to the lawfulness that applies to human beings. Sometimes we feel that we bubble with energy and strength. At other times we feel down, weak and depressed. By thinking of your condition as an expression of a low personal level of energy, it becomes possible to analyze the situation in detail: what decides whether my level of energy is high or low? How do we waste our energy? Think about the people you have met during the day. How many did you argue with about some insignificant detail? What happened? A brief contest of wills? The confrontation was not free, was it? You wasted your vital energy on the confrontation and to no avail. And what about the argument with your partner at the breakfast table? What about your self-pity, when you did not win the small photography competition? Why did you not say no to the little extra job your boss asked you to do, and which you really did not want to do? All these episodes throughout the day where you were not completely honest but compromised with yourself or even let yourself down? What about the time when you needed a break, but did not take it because you wanted to please a colleague? What about your worries about tomorrow because you probably will not finish the project as promised? And so it goes on. Viewed like this it is obvious that most of us live a life out of balance, and we cannot seem to use the energy only when it is wise and right.

A very interesting aspect of the personal energy level is humour. Some people are always having fun and they cannot help it. We are not talking about foolish and vulgar jokes overheard in locker rooms, but about real, spontaneous humour brought forth in the situation, because people just cannot help themselves. People who are down are also without humour. Just think of sick people. It is only rarely they make spontaneous jokes. People who have retained their sense of humour and can laugh at themselves and their often somewhat comical situation encased in plaster or bandages or whatever, are often the ones who become well again. “Anatomy of an illness as perceived by the patient” is the title of a popular book by Norman Cousins [6], who describes in great detail how he survived a malign autoimmune disease that attacked the body’s connective tissue, but survived despite the death sentence of his physicians. His strategy is to be recommended. There is hardly any doubt that if you can regain your high level of vital energy, as it is expressed in humour, you are often able to become well again. To live here and now, to be healthy and well presupposes a high personal level of energy. The correlation between a personal high energy level and illness can be

explained in a simple way, if we see illness as an expression of a collapse in the biological order of the organism. We become ill, when our personal level of energy is too low, because the experienced level of energy is closely connected to the inner order of man's organism. When we experience that the energy level as a whole is low, intercommunication between the cells is poor. Then the organism's energy level is too low and the cells are no longer able to receive the information needed to do the right thing, where they are supposed to do it and thus maintain a healthy organism. Therefore, when the energy level rises your health becomes better, and vice versa.

The good life and a high quality of life require energy and we just cannot afford to waste it on foolishness. It is not too much to maintain that the ability to think in a complex way and really penetrate into your existence and understand it is directly connected with the energy level. When we are down we are functional fools without the ability to understand, what is going on around us and unable to make the choices needed to create the good life for others and ourselves. Therefore, to keep account of our energy is an absolute necessity for each and every one of us. To take stock throughout the day of our use of energy and to find out whether we are wasting it and where we obtain something of real value.

## **Illness, symbols and mysticism**

You can also understand and tackle your illness in a symbolic way. What you fight, then, is material that has been poorly integrated into the subconscious, and which manifests itself in various symbolic ways. A symbol is a kind of picture that is loaded with meaning. The symbols can be said to represent the fundamental concepts to be found in human consciousness, where the description of the world meets life itself. Symbolic expressions of imbalance can be identified through dreams, Tarot cards, I Ching symbols, astrological or alchemical symbols and interpretations, mystical rituals or any other way you prefer to enter the symbolic universe. Unfortunately, the great problem with a symbolic approach is that everything quickly becomes mysterious and strange. Although life really is a profound mystery, in our opinion a mystifying mood is not very conducive, because a mystery actually means that our minds do not understand life and reality. If we see this clearly and step back from understanding the world in a rational way and just look at it with our heart as suggested by Antoine Marie Roger Saint-Exupéry (1900-1943) in "The little prince"(7) (where the fox teaches the crashed pilot in the desert) then life becomes simple and easy to understand. In a way the mysticism arises, because we insist on bringing our mind along into the irrational dimension or Jesus, who talked about finding the truth by becoming like a child again. Children do not have much flair for mysticism, which is reserved for the adult. But this is all too often nourished by self-pity: "Poor me, I have never understood life" or an almost opposite feeling, that is, self-importance: "Oh, I am really chosen to save the world thanks to my mystical experiences." Try to confront a small child with a dead bird or a dead person and rejoice in how simple and direct the child sees the situation and reacts to it. And then compare the child with the adult holding the child's hand. Notice how strangely complicated and almost alien death and the whole of life have become to us. Well, if you have a penchant for mysticism you must differentiate between life-giving and life-taking symbols and place yourself on the side of the life-giving symbols. In practice this is a great achievement that

demands a lot of energy, and it may even require you to consciously enter your dreams to untangle the threads as Carlos Castaneda, inspired by the Native Americans, suggests in the book “The art of dreaming” (8).

“The Tibetan book of the dead” (9) may also be of help and Timothy Leary has written a simple introduction to the latter book (10), while some people benefit from the classical Chinese science book “I Ching” (11), but it is not so easy to understand. The I Ching, or Book of changes, is the most widely read of the five Chinese classics. The book was traditionally written by the legendary Chinese Emperor Fu Hsi (2953-2838 BCE). In our opinion, the world of symbolism requires a very high level of energy and it is fraught with danger of becoming lost. So perhaps the world of symbols is not so attractive after all. Mysticism often invites you to escape from reality instead of taking the action needed to get you out of the morass. The mysterious mood is driven out by a clarified mind, although it must be admitted that nothing in life is quite as clear and simple as you may think life and the world is in a moment of clarity. Far too many people have read about mysteries and they are helplessly stuck and never get to experience life’s mysteries in their own lives.

## **To take responsibility and move barriers**

It is easy to agree that we have to take responsibility. But what does it really mean? To be responsible means to see yourself as the cause of your own existence and state of being. To be the one who forms your own life to your liking, so that others do not shape it in the way they prefer to see you. Seen this way, taking responsibility in practice is one of the most difficult things to do. Just think of how often you argue with your partner or your best friend. What is needed to stop arguing or just make the arguments less frequent and less violent? It is not difficult to acknowledge that if one of you stopped arguing, the other person would not have a chance. One cannot argue alone. It is your responsibility. But why should I start by being magnanimous and forgive my partner his or her flaws? Why should I start being the one to make allowances and keep the status quo? The answer is that in reality the greatest and most difficult thing to do is to be able to love. To be the one, who loves instead of being the one who demands love from somebody else.

Since almost all of us have had parents, who loved us too little and mostly conditionally, we all harbour a deep yearning for being loved as we are, unconditionally. A lot of our energy is spent trying to find recognition and acceptance, more or less as we did as children from our parents and they created the framework and defined the rules of the game. But today reality is different. We have grown up and now life is about us shaping our existence; we are the ones who love. This is what responsibility is all about. Taking responsibility is quite literally moving the barriers in our lives inside ourselves. When we do not take responsibility for life we experience that all our problems, everything that prevents our dreams coming true, are caused by outside obstacles: Our inadequate wages or salaries. The terrible flaws in our friends, partner or boss. Unemployment. Expensive colleges. Friends who let us down or accidents like car crashes and sudden illness. Taking responsibility for life means that you are willing to see that the real barriers are not all these external ones, but something that can be found within yourself. Of course there is an outside world, which we cannot easily shape according to your dreams. But a responsible point of view is that although it is difficult the

problem is not impossible; it is your real challenge and task. If there is something you really want you can achieve it, but whether it happens depends on your wholehearted, goal-oriented and continuous attempts.

## **Becoming self-confident and wise**

When you believe in yourself you are able to listen with your inward ear. You can listen for what you really need, deep down. Actually, it is something of a mystery that this process makes us wiser, because how is wisdom stored in our soul, so that those who pay attention to their intuition or inner voice, or whatever you chose to call it, become wiser than the ones who do not? And how do you achieve self-confidence in the first place? You could say that self-confidence is something we acquire through our victories. But as self-confidence also is what makes us act wisely, which leads to success, we have not learnt much from this. On the other hand it is obvious that those who succeed in the long run are the ones who keep fighting for what they love. They do it in such a way that defeats are mined for learning and insights, which improves their chances when the next struggle comes along. It is clear that people with the ability to humbly keep fighting and learning from their defeats and victories are the ones who succeed in the long run. But from where does this fundamental toughness come? It comes from sensing that life has a profound meaning and living accordingly. If you intensely experience the meaning of life and know what you like deep down, where you want to go, and which dream you want to fulfil, you will keep fighting despite failures. Never giving up and always being open to learning will increase your chances of getting there. You may call this being a fighter, a warrior or just being strong-minded. Those who keep fighting are the ones who have acknowledged that they themselves are the enemy.

Therefore, the only way out is to take up the challenge and fight life's hardest battle, that is, the battle against yourself or rather all the flawed and peculiar things we believe about life and ourselves. Paradoxically, to win over yourself is to let go of your misconceptions, but this letting go on the contents of the ego seems to be the hardest thing one can ever do. Why are the ones who believe in themselves wiser than the ones who do not? The classical and good explanation is that life on its own holds enormous wisdom, which our limited reason, our mind, does not really know or acknowledge. Therefore, when we listen to our innermost voice we have millions of years' experience to draw from, experience that has been gathered by living matter, stored and carried forward through time, ready to be taken out and used when needed. How can we know that what we sense and feel is also the real thing? Certain knowledge about life is a result of sophisticated reason attuned to well-developed intuition. Our reason needs to feature a good image of life, the world and ourselves as a living soul. An image of ourselves as victorious, successful and lucky in carrying through what we set out to do and purified of our defeats in life. Intuition must be purified of all the feelings contained in previous experiences so that the experience of reality is totally up-to-date and true. If you turn your consciousness towards life itself in an active process where you listen and make an effort to understand what the peculiar wordless voice whispered by life itself tells you, then you can draw from the enormous knowledge and wisdom about life. All of life's great and important occurrences are already well described in general and superior ways and can be drawn down to earth and used through our dreams.

The great dream about love, for instance or the dream about a great friendship, meaningful employment or really good relationships with everything here on Earth. When in puberty we meet a suitable person of the opposite sex, these intense dreams about sex and love start pouring in. They come from nowhere and suddenly they fill everything. Actually, the source is very insistent because it is this intuitive knowledge that is the basis of our whole existence, all the things in life that really mean something to us. Still, we cannot escape the struggle involved in finding out what we actually need to do in every situation throughout life. What to say to our first partner can be a real problem and how to behave at our first place of work can be a real challenge. We are at a loss and must solve all the problems on our own. However, our inner nature possesses overall and abstract guidelines that can lead us safely through life.

## **To use death as a mirror**

Death is the real enemy. Death puts life in perspective as we finally see it as the very fragile, easily lost and infinitely valuable thing that it is. When you do not sense that death is after you, you relax and think yourself out of danger. But you have no guarantee that you are alive in five minutes. It is already later than you think. In a little while we are gone. In a moment we have all turned to dust. To live with the awareness of death – death is around somewhere, waiting for our final slip in order to sweep us away – is a sinister but also wonderful situation. When we are aware of death and know that we have too little time left and that time is the only thing we do not have, then we really do our best. When we acknowledge the unique opportunity we have to become aware, straighten our lives to get a better life while there is still a chance, then we can live the way that makes each day better than the previous and the next year better than this. We can live in such a way that we are on our way up.

Ask yourself: “Am I on my way up or on my way down?” Do you have to admit that you are on your way down, even though of course it is a slow descent? The only thing that can make most of us change our course, so that we live in a manner that leads us upwards is the distinct awareness of death. When we see death threatening us all the time and coming at us in many various forms like loneliness, illness or hopelessness and when we realize that we constantly feed death with great chunks of our own flesh, because we do not make the right choices and thus unconsciously take one step further towards the grave, then we are motivated to correct these systematic faults. Only death has the power to really make us want to change our course in life.

All lesser problems and crises throughout life may be unpleasant, but not really unpleasant enough to make us want to succeed in changing ourselves. The reason for this extreme conservatism is that we already have dedicated most of our decisions to survive, i.e. to avoid dying. Therefore, the death that threatens us now is computed in our minds as more important than the death threatening us in the past. But awareness of death does not come to us easily when we are only slowly decaying. We can see people die in front of us without understanding that we, too, consist of fragile flesh and that we have to depart soon. No force in life can change this: In a little while we are gone. We have to live here and now. This moment is all we have got.

## **When you have only 700 days left**

When “terminal” cancer patients (the quotation marks are because maybe the patients are not as terminal as we usually think) visit their physician some time after they have received the diagnosis and the verdict, that according to the statistics they only have about two years left to live, they often say strange things like: “I am grateful that I got cancer.” The physician thinks that this is strange and asks why. “I have never felt so well,” the patient says. Most physicians tend to think that is peculiar, because here we have Mrs Larsen, who lost 35 kilogram, lost all her hair because of chemotherapy and her cancer has metastasized throughout the body. Also she looks like something the cat dragged in and then she insists that...”. “But it is true, doctor,” she insists. “My life has never had so much meaning, my life is more intense than it has ever been now that I know that I have only 700 days left. Now I have let go on all my worries and idiosyncrasies. I have turned simple. I see the sun rise, I feel the wind on my skin, I talk honestly with my friends and I have stopped arguing with my husband. And best of all I have started to say no in order to only do the things I really like”.

However absurd it may seem, people with their back against the wall and knowing their days are numbered often live much more intensely than the rest of us, who imagine that we will live forever. Face to face with death we suddenly appear to remember that this is what life is all about, to feel good within ourselves and with each other and to do something we really like. “What a fool I have been” people often say and think. Time possesses the strange capacity to expand enormously, when we live intensely. A moment can feel like eternity or a year can appear to pass within a minute (have you ever experienced a New Year’s Eve, where you feel that the past year has been uneventful, so totally empty of anything essential ?). If you know that you only have a short while left before death, then even such a moment may be enough to change the course that fate had in store for you. We may call this very strange power that steps in when you are facing death “the will to live.” We really do possess enormous potentials for growth and change, but only rarely do these potentials come into use. Our reason and our total naiveté towards the tough and wonderful conditions that apply to us prevent us from changing. You can reclaim the meaning of life. You can break through to the experience of being totally and fully alive, to your life having meaning and your existence making a real difference to the world you live in and yourself. Patients who become well again, drug addicts who become clean, prostitutes who succeed in love, all the miracles people talk about, but do not believe in. All this happens during this process. But, of course, up to this day it has been rare. If our culture held more insight into these things they would probably be much more common, the way they appear to have been in other cultures at other times. A holistic physician often has the great fortune to live in a world, where these miracles are almost normal. In our “quality of life as medicine” projects they occur surprisingly often (12, 13).

## **To pull yourself up**

A force stronger than reason is needed, when the course of your life is to be altered. Let us call it the will to a better life. If this will is present people will possess real humility, making them open and willing to learn and change. The strange thing about this will is that it is an



irrational, nonverbal force that pulls up your existence. When the will influences your view of the world it becomes altered in a strange way. This happens because the will to live supplies a fixed point, namely what you have to believe in when you really love life, beyond all reason, beyond everything you have learnt and experienced in life. This fixed point can serve as a new foundation for your personal philosophy of life. From this moment on you will feel that deep down life is good and valuable, the world is full of opportunities, people are trustworthy, you are able to solve the problems in life on your own and through this battle you can make everything cohere.

The experience of pulling yourself up by the roots of your hair literally means that you raise or lift your own existence. You correct your faults and close up all the holes that drain your vital energy. You remove all the good reasons for not having any self-respect and start a new life on a totally new foundation. You take responsibility for your own life. The essential part of the will is that it is able to cut through all the confusion and doubt that normally characterize human life. In reality, there is no rational way of determining the truth value of statements or philosophies of life. You cannot guess the truth about life and the world. Reason cannot distinguish very well between personal philosophies of life, because they all basically rest on principles that are irrational, ethical or even emotional. However, the will to live a good life cuts cleanly through doubt and mental fog and points out clearly and directly what is right and wrong in relation to our love of life.

Some decisions and choices are in harmony with life, others bring ruin and destruction. Some decisions lead towards the top, others towards the bottom. Some views of the world can sustain life, others weigh it down. Only the will to live a good life can make a person rise above the immaterial, the meaningless, doubt and nonsense. You rarely discover that the will is the real resource for improving life, until you are facing death. When that happens, the will to live is often the only reason why you survive. The experience of pulling yourself up by the roots of your hair is quite amusing. But really, if we are to live fully and completely for just a moment this is what is needed, the ability to lift ourselves and take wings, despite the thousands of weights that is dragging us down. Taking responsibility for our own lives is really a process during which we elevate our own existence, in spite of all barriers and difficulties. The will to live a good life is the only thing that can create this effect.

## **To find the quality of life**

We are free to choose our values, the things we think are important and good. Some people's lives are centred on collecting stamps, while others collect good friends. Some chose expensive clothes or fast cars as values, while others grow ecological vegetables and wear only clothes made of recycled material. Some people collect dirty videos, while others are into bible studies. In our minds we are free to choose our own personal values, just as we have an enormous freedom to describe the world whatever way we want. One thing is values; another thing is how we feel or what state we are in. Something makes one person happy; something else makes another person happy. But what about the happiness we feel: is it the same kind of happiness or are there different kinds of happiness? And what about satisfaction with life? Do we all possess the same sense of satisfaction or do we experience satisfaction in different ways? What about the meaning of life itself? When we feel deep within ourselves, in

our very souls and hearts (if we are able to find it), do we then feel the same meaningfulness in life, when it is meaningful and the same senselessness, when it is not? Do two people experience the same kind of love, the same feeling of hate or sexual desire? It is obvious that each experience carries its own qualities and intensity. But is the actual quality of the experience connected to the individual, to our egos and learned descriptions of the world? Or is the actual quality of happiness, satisfaction or the meaning of life something that is given by human nature?

As it appears from this chapter, we believe very strongly in nature and that life within us never has let go of its habitat in nature, because we possess our common description of the world not just as a possibility, but as a necessity. This is a given, because we are constructed the way we are and have to live together. The decisive factor for being able to change yourself is that you are able to regain your belief, that fundamentally life is good. When we here use the word 'belief' it is because from a rational point of view, such an attitude will always be a question of belief. Subjectively, of course, it can also be experienced as certain knowledge. And it is this inner certain conviction that makes the difference. You can believe nature as being the essential thing. Not, as is often suggested, in a primitive way, with coarse instincts and pre-programmed behaviour parallel to animal behaviour, but more refined. The idea is that deep down in our biological matter we possess a nature as humans. This nature is in the shape of an abstract recipe for being a human, and life is about expressing this recipe to the full, unfolding and manifesting its potential for a good life. In this light, our nature holds the potential for all the dimensions of our lives. It is in our nature to feel good or bad, to be satisfied or dissatisfied, to have sexual feelings, to be happy and feel there is a meaning in life or to work for our innermost visions and longings. Our nature is such, that we have a heart that we need to discern and obey so that we may lead the good life.

## **To seize the meaning of life**

When we finally acknowledge that the world extends beyond our reason or that there are forces at large that matter more than our impulses then we can proceed. When we realize that there are values on Earth that far surpass the value of our small life, then we will be humble enough to accept the gift (and task) that is life. Then we can put our faith in authority and our loyal, but out-of-date and limited description of the world behind us. To rediscover the meaning of life means finding yourself and the values that you can always, and without faltering, use as foundation for your own life. To regain the meaning of life means that you acknowledge that you are a human being, subject to the conditions and laws applicable to humans. We are not talking about the highway code, but more profound laws that apply to all living beings. To take responsibility, to see yourself as active and not as a victim, to work at correcting your personal faults and repair the bumps in your inner map of the world.

To regain the meaning of life does not mean to be forever happy. It means that you find your fundamental challenge as a human being and take up the challenge. You become a person with a mission. There are things to be corrected both on the inside and the outside, things within yourself and things in the world around you. If you are really clever you will see that in reality there is often little difference between the two. The flaws in the world are evident to you, because you also sense and work on similar weaknesses and flaws within

yourself. The great struggle for a better world, that all people become involved in, when they acknowledge that the meaning of life is about coherence. They cannot escape this world, however much they want to, because of all its superficiality, materialism, abuse of power and false values, then they realize that this struggle is very much about improving that part of the world that is you. To clean the place you occupy, to cultivate your own spirit. Everything starts with yourself. Because all the barriers you see are actually within you, in your own personal view of the world. Becoming free means first and foremost becoming free of the constraints imposed by your own rational description of reality. It does not actually mean that you must get rid of this description or the framework it puts around your self-expression, but you can loosen the constraints so much that they no longer limit life, but support life. You need to get rid of the negativity in the description and the old pains that hold your limiting decisions in their place.

## **What is the purpose of your life?**

Imagine that you really wish to know the meaning of your life. You rent a small cabin in the mountains, where nobody can disturb you for the next three or four weeks. You buy provisions for the whole stay. You go alone and you spend your time on only one thing, namely answering the question: 'What is the meaning of my life'? Of course you have to find a wording that is all your own, which exactly fits you and your life. But it must be deep enough to penetrate all the way into your soul. What is the purpose of life for you? Why are you on the surface of the Earth for a short while? In what way do you make a difference in the world? What are your dreams in life, love, real friendship, a good job or harmony with nature? When you compare the life you lead with your dreams, how do you measure up? Is your personal relationship the love of your life or is it boring routine in bed and arguments at breakfast and before the evening news? Do you actually have one single friend with whom you can and do talk about everything and who does not begrudge you real progress? A friend who can meet you right where you are and just wish you all the best and therefore ask you all the questions you should already have asked yourself, but did not dare to out of fear of meeting yourself?

Questions like what is it you want, what are your opportunities and what is needed for you to obtain what you want with the opportunities you have? What about your work? Do you really exert yourself and improve anything? Do you gain the expertise necessary to express yourself creatively and spontaneously? Do you solve your tasks to your own personal satisfaction? Do you have enough influence on your own work? Do you actually accept what your company produces or should you be doing something quite different in order to be of use in the world? What about your time off? Do your holidays fulfil your dreams or do you just end up in some bar in Mallorca wasting your time on casual pursuits, before returning home to your boring routine? Do you burn for your life, your work and your love? Do you or your life contain any nerve at all? In the final analysis, how do you feel, if you are really and totally honest? Are you OK? Do you get out of life, what it can give you? Do you exploit all your opportunities? Have you accepted the challenge that is yours and is your life in balance? Are you at peace with yourself, because you have acknowledged your own personal mission in life? We suspect that after a couple of days you are having no more fun at the cabin. After

all, to study the meaning of life is rather unpleasant. The really sad truth is that we have no wish to know the truth about ourselves or the deeper meaning of life, because it is painful to learn something decidedly new and we only do this if it is absolutely necessary. Actually, what began as a straightaway philosophical experiment now appears to be a dramatic process, where you have to confront and process the pains of a lifetime! All the bad things you have done since early childhood will come to you and ask you for a clean-up! This is not our favourite perspective, but the only perspective that will make us change into better, more innocent and more loving persons.

## **The pain of knowing the meaning of your life**

Our problem is that deep down we do not really want to know the meaning of our lives, because if we do we have to acknowledge that the life we actually live is a pale shadow of the opportunities we hold, no matter how good life is, when compared to that of other people. We are not at all interested in realizing that we almost live in an existential gutter, when we compare our life with what we were actually created for. Our life is not first-class and maybe it is not even second-class, which we thought, but actually third-class, because our life is more or less without love to life, to other people or even to ourselves. We are also not the decent folks we thought we were, but rather harbour fairly violent and destructive tendencies. Not a fun perspective at all. Let us assure you that one of us was surprised when, one sunny day some years ago, he finally came to the realization that his basic intentions toward other people were basically mean, while he himself thought he was such a well-meaning fellow. A close examination showed otherwise. There is a reason why we do not want to know ourselves: It hurts. This realization that our life does not have the meaning it could have or that our life is far poorer than it needs to be does not give us a nice feeling. That we are actually at fault for wasting our life and perhaps about to lose something precious, our actual existence, this realization is actually very unpleasant.

The unpleasantness lies in the realization of the magnitude of the problem, because it obliges us to do something about it for our own sake. We must take responsibility and see ourselves as the cause of our own personal mess. We must learn to associate with others and change our attitudes towards all kinds of things. We need to let go of all out-dated points of view for which we have fought and battled forever, ever since we learned them from our parents. It is important that you can face yourself in the mirror every morning. One reason this may be difficult is the painful feeling that you are not faithful to yourself. When you know deep down what life is about and what your real purpose and meaning of life are, it hurts inside if you just continue living as always and not true to your own intuitions. When you are conscious of your big dream, but shy away from working to make it come true, you suppress yourself. This works fine only as long as you are not too aware of it, but with the growing awareness the suppression of your own life becomes still harder to bear.

The more you understand the game of life, the more you are obliged to engage in it. Knowing what you like makes it much more difficult not to be good to yourself. When you face yourself in the mirror, you will know how much work you have to do to bring your life in better accord with the innermost wishes of your soul. Everybody, who engages totally in the challenge of improving his or her relationship with the self, will find that this game can be

won. It takes a real effort, though. For most of us it is hard work every day for many years. Frankly, because our state of being is so lousy, when we start out. We are rather far from being happy, cheerful and easygoing. One of us with the experience of this process felt a strong and almost unbearable sensation of unworthiness. When you develop an excellent inner standard of existence, you are likely to feel less proud of yourself. When you realize the brilliant standard that all mankind inhabits deep down in his soul (4) – all that we are meant to be, our real potential – then our present existence often seems pretty pale, insignificant, sometimes close to a total failure. As long as you compare yourself with your next-door neighbour you can always claim success. But when you start comparing your present state of being with that of a person at his full peek – like Moses, Buddha, Jesus, Leonardo da Vinci or and maybe spiritual masters like the Baal Shem Tov, Dalai Lama or Sai Baba – it is difficult not to feel gray.

Now, humility and humour will always be helpful. It is quite funny to be an action hero, when you compare yourself to your friends and be an existential midget, when you compare yourself to your own potentials. You might find that what nature or God intended you to be are amazingly different from whatever you thought at first. The gift of knowing the meaning of life is energy. When we see our true potential it is tempting to reach for the power and glory, the creativity and the divinity that lie within. When we do this we will immediately get all kinds of problems with the outer world and we will get an immense amount of energy. An unsurpassed energy kick. People who know their hidden potentials and dig into them without hesitation or second thoughts will always blossom. They will soon be transformed into original beings, colourful, intelligent, troublesome, creative, lovely and often annoying like hell. These people will normally get everything they want. If they are sick they will get healed, if they are artists they will get fame, if they are scientists they will get a unique understanding of their field of research. Eventually, as their personal growth continues they might be recognized as the geniuses of this world. The secret of these success stories is lots and lots of energy drawn from the source of existence combined with other amazing qualities like intuitive competence and emotional intelligence. These qualities pour from one single source: life. More precisely, the abundant source of energy and motivation is “the joy of life”. Joyfulness seems to be the most basic and most mysterious quality of all living beings. The nature of joy is by the way still completely unexplained by science.

## **The no man’s land between your old and your new life**

Knowing what life is about does not necessarily mean that life becomes any easier. It is often quite the opposite: life turns even more difficult, when you wake up. But a conscious life has a peculiar quality. A person who experiences the deepest meaning in his or her life discovers that life now has touch of bliss and fragrance (14). No matter how chaotic, no matter how painful, deep down the new life is sweet. This fine sweetness makes it possible for a human being to endure almost incredible pain and sorrow. When you strive to realize yourself and your utopian dreams many people will react as if you have the plaque. You will often turn into an incomprehensible and disturbing element of other people’s worlds. To be sure, after

some years of hard work you will come back as a beautiful, peaceful and happy person, but often the first thing that happens is that you turn annoying, selfish, difficult or even angry.

The fine, inner sweetness gives these people an unstoppable quality. They turn into fighters. They have seen the light and they follow it. New jobs, divorces, new friends, new habits and values, new sexual and professional interests... we are talking about major transformations here. People are not the same and will never be the same again. They are forever lost for you, if you do not follow them by developing yourself. If you get a metastasized cancer and you heal yourself by letting go of the negative beliefs and self-suppressing decisions of a lifetime, you will be changed. You now have dramatically improved your quality of life and inner coherence. But you might also be in the situation, where you find yourself as reborn to the degree that not even your old clothing fits you anymore. The price to be paid for personal growth is, unfortunately, chaos. As most people are very conservative they will try to oppose your growth the best they can. So, people who supported you, when you were down suddenly do their best to suppress you. It is sometimes difficult to believe that your relatives can jump on your back trying to hold you back. It is sometimes grotesque that you will have to escape from your whole family. Between your new blossoming life and the old normal, boring life of habits and routines is a no man's land of very difficult nature. You discover that nothing is as your thought is was – it might be that your beloved does not really love you or that what you thought was the essence of your life is simply a substitution for a sound and healthy interest. Often people going through this transformation will at some point in time feel that they are going crazy. But relax: you are not going crazy. You have been crazy for half a lifetime living with values that did not make you happy. And now you are waking up. You are in the middle of a speedy, but unpleasant recovery. Loneliness of the most painful kind is normal at this stage. You are alone with your thoughts, and you are confused, unhappy, not seen, not loved and not understood. You cannot continue to live your old life, but you have not yet found your new ways. The fine order of your life has been broken and now chaos prevails both on the surface and in the debts of our soul.

We are healing, but first we must acknowledge that we really are sick. The pain of a whole lifetime is often overwhelming us and survival becomes dependent on our ability to be good to ourselves. Nobody but yourself is there now to show you love and concern. The miracle is that it is enough: when we love ourselves we do not really depend on other people's concern for us. But before we can enjoy the luxury of relying fully on ourselves, living in perfect inner balance, we must heal a lot of old painful wounds. This is why loneliness bites us at this stage. Most people live lives that are not truly a life. They sense this intuitively, but they do not want to look at it at all. There are plenty of symptoms telling you that everything is not as it is supposed to be. The terrible headache or low back pain that returns still more often, problems sleeping at night, the growing sexual problems that are taking the fun out of this part of life, problems with your skin, the slips of memory, maybe the arthritis making every step you take even more painful. Enough is enough. Some day you realize that this is not how you want to live. Enough of lies and politeness and pretension. Air! You need fresh air, renewal, new inspiration. The way you live brings you slow death and this is not how life was meant to be. It takes a lot of courage to break the well-known order of daily life. Sometimes we are lucky enough to be forced to make the move and wake up: the physician gives you the malignant diagnosis, the boss says he is sorry he has to let you go, because of your still poorer performance. This is the end. You have reached the end of the

road. You only have one chance now: renewal from within. Your whole life needs repair. It is time to clean up the mess. Now a hard time usually follows. It is difficult not to feel that a lot of time is wasted living your old life. Realizing the distance to the existence you have been living, you are often overwhelmed with sorrow and bitter regrets. But eventually you will find mercy and realize that life is never wasted, you have learned your lesson, you suffered for as long as you had to. As time goes by you will appreciate a still deeper pattern of order and inherent logic in the universe.

## Discussion

Several questions can be raised about the important, practical side of this philosophy (5,6,12-14). Some of the problems are like paradoxes and the solutions are somewhat surprising. Let us investigate some of the hard problems, often dealt with in existential holistic therapy (14).

- How can we cultivate joy, if a person has no energy to live? This seems impossible, but here is an example showing how it can be done: One of the authors (SV) was called to see a female patient, 48 years old, with metastasized cancer from the cervix. Before she became ill she had been a strong, attractive, beautiful, healthy and successful woman. After 41 sessions of radiation her pelvis was scarred from the radiation burns, to such a degree that she was now completely exhausted and almost dying. She was severely immune-suppressed and had, in spite of antibiotic treatment, infections in the mouth and infections in her bladder. She had lost weight – from 70 to below 50 kg – had a low haemoglobin with severe pains from her pelvis, back and neck, whenever she was moving. She had absolutely no appetite and wanted to die after the physicians had told her that the cancer was still there in her cervix and maybe also in her liver. She could not turn her head to talk to me. She could hardly get out of her bed by herself. So – what to do? I asked myself the question: do you love her? And I did. So I told her. Then I thought she looked terrible and I also told her that. She smiled and then I realized that she wanted to die. I asked her if that was true. It was. So I saw her and I understood her. Then I touch her on her burned stomach and explained to her that if she wanted to life, she had to come back with her awareness into her pelvis and confront the pain. She did that, while I kept my hand on her. She cried and I cared for her. She was sad, because she had lost her hair. So I accepted her exactly as she was. She felt ashamed. I acknowledged that and allowed her to have her feeling. So I contained her. After an hour she was glad. She was almost happy. A few days later she came home from the hospital and was able to take her first walk. Maybe she will die. But I made her happy. So do not think about it. QOL philosophy is not really for your head. It is for living, loving and doing good. There are always hidden resources. You go find them!
- What values should be endorsed according to the QOL philosophy? This looks like a wise question as values are guiding so much of our behaviour. But QOL philosophy is not as much a product of brain – thinking of values – as a product of hearth and intuition – feeling the value. Let us look a little closer on this difference. Life is not really about values. Life is more abstract, like it is the only valuable thing. So life is

the one value that should be celebrated and taken into focus. If you split life up in a number of sub-values, you might miss the whole point. Life is in flow always, so go with the flow. Be intelligent, be smart, be wise, be strong, but before anything: be loving. Life is something special and different to anybody. For some life is joy, for others life is understanding, for others again life is care and tenderness. The important thing is to let life find its own expression in every person you meet. If you can see the unique colour of life in the person in front of you, you guide this person towards his or her true nature. Being oneself is also knowing your purpose of life, and this purpose carries all the meaning and motivation that makes us able to take responsibility for our own suffering. So practicing QOL philosophy is not about thinking, it is not about values, it is about being human, and allowing yourself to meet your patient as one whole human being meet and connect to another whole being.

- The authors appear to contrast a “materialistic” culture with a “spiritual” culture. Can these two cultures be combined? This also looks like a paradox, but is not. Philosophically our worldview is neither materialistic nor spiritualistic, but in between. In our opinion life exists in a continuum, which looks like matter from one end and like spirit from the other end, but is neither. Life is characterized by structure, joy and consciousness. These three qualities seems to be aspects of the biological information (14), which seems to be associated with anything living, in such a complex way that completely new laws of nature must be discovered, before we can give a reasonably adequate account of the living state. Most likely some form of complicated quantum chemistry and a whole new concept of physical energy are needed. This information can even guide the organization of whole societies of organisms, just look at the ants. The central point here is that the biological information can also guide human beings, although it probably happens in a far more dynamic way, that is, through human consciousness. This looks a lot like a spiritual approach, but it is so important not to forget the body and the life in the body. Researchers and physicians on the other hand tend to reduce all living organisms to chemistry and only focus on certain chemical aspects of these organisms. However practical it is to know these chemical aspects, it seems rather trivial, if compared with the living organism’s highly advanced processing of the biological information. Life is built up through a large number of levels, with the still higher levels possessing ever more complex and abstract traits, including the qualities known so well in the human world: love, hate, consciousness, the subconscious, reason and intuition. But consciousness is not more important than the material world. We believe that matter and consciousness are of exactly the same importance for life.

## **Conclusion**

We have a nature as human beings. It is this nature that makes it possible for us to be happy, cheerful, wise and lovely. When we turn natural and innocent, the extraordinary freedom that characterizes life at its fullest will return to us. All the life we hold as living organisms will now blossom and grow. Our love and passion will come back, a burning interest for our work



will unexpectedly catch us, deep friendships will form and this divine creativity and humour will mark our new personality. All of us have the possibility to make a difference. The quality of our own life can be drastically improved and so can our use to people around us (15). We can be of real value to ourselves and to the world around us. Instead of being one more of these human beings tearing down the global ecosystem you will understand the web of life in all its forms and shadows and do what is needed to make mankind and our beautiful culture survive. As we see it, mankind is a highly endangered species, and only by transforming our old materialistic culture into a new spiritual culture with honesty, truthfulness and contributing people can humanity survive.

The right place for all of us to begin is by saving ourselves. All it takes is that we decide to seize the meaning of life. But this must be one whole-hearted move: you must give it everything you have got if you want to succeed. You can change a poor life to an excellent life (1-4, 7, 8, 16), but you must risk your life to win. One day you will find the courage. Maybe the day is today. The wise Jewish Rabbis have a few good sayings: “Live today as if tomorrow is your last day” or “in order to perfect yourself, one must renew oneself day by day”. Let us conclude by telling the story of Sol Gordon, professor emeritus of Child and Family Studies at Syracuse University: “Growing up as an idealistic youth, I was determined to save the world and even the more I tried, the world became worse and worse. Then I decided I had taken on too much. I thought I would just try to save the United States. The more I tried -- conditions in the US got worse and worse. So again I thought I had taken on too much. So I decided I would just try to save my neighbourhood. My neighbours told me to mind my own business. But just as I was about to give up in despair, I read in the Talmud (Jewish teachings) that if you can save one life, it is as though you have saved the world. That is now my mission -- one person at a time (17).

## **Selected readings for the patients**

Our patients have benefited from reading the following small books and others, which in our opinion express a clear and positive QOL philosophy, not very different from the QOL philosophy presented here.

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## **The concepts of quality of life research**

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We can arrange the about 100 central concepts related to research in the global quality of life into ten abstract key concepts: Existence, creation of the world, state of being, daily living, talents, relations, sex, health, personal development, and therapy with sub-themes as discussed in this chapter. The chapter shows that the concepts in each group can be seen as related to each other in a quite intuitive and logical way, to give a coherent quality-of-life-philosophy that allows the physician to encourage, inspire and support his patient. In every consultation one new concept and idea of existence can be taught to the patient, helping him or her to realise the meaning of life, the source of joy, and the reason for the actual suffering. In this way we can help the patient to mobilise hidden and known resources and to improve quality of life, subjective health and ability of functioning.

The 100 concepts were “harvested” at a Nordic seminar on quality of life research, a few years ago in Sweden. Life does not only cohere on the inside, but also on the outside. The same power that ties together all the cells in our body seems to tie us together in relationships and new wholeness.

This power evolves into new kinds of relations that unite on more and more complex levels, with the global eco-system as the highest known level. Our intentions come from this coherent matrix of life. In the beginning of our life the web of life itself gave birth to our fundamental purpose of life. The abstract purpose determines the frame of interpretation of reality: how we throughout life will perceive ourselves, our inner life, and the world around us. The frame of interpretation is pitched in language and concepts; in fact it creates our perceptions. Based on these perceptions and our purposes of life, arise our behaviour. Our consciousness evolves through the witnessing of our behaviour and though the response caused by it.

Through the slowly acquired mastering of our surrounding world, we obtain our power, which gives us success in life, when we use it responsibly and unite it in harmony with our deepest purpose of life. When many people experience not having success, it is because they are not conscious about their original purpose or the deepest meaning of their lives. They do not know themselves.

They do not experience the world in that way and do not realize that they themselves are the cause. Therefore responsibility and self-knowledge -which adds up to wisdom - is the way to a good and successful life.

## **Introduction**

Our intention with the development of an explicit quality of life (QOL) philosophy was to obtain the ability to give education and training in philosophy of life to our patients. From pilot studies (1,2) and clinical practice it seemed to have a highly beneficial effect on the patient's quality of life, health and the ability to function. In order to achieve this goal, it was of the utmost importance to formulate a philosophy of life that is as practical, objective and supportive of life as possible, and at the same time as free of cultural, religious and political elements as possible. The more simple, constructive, positive and intuitive the theory is, the easier it will be understood. The easier it is to relate to and take possession of by the patient. The clearer and simple the philosophy, the less manipulating. There are about a hundred fundamental philosophical concepts in the quality of life research, half of them are technical terms related to the tools and technical side of the science, and the other half are related to the meaning and essence of the concepts related to quality of life, being and existence. The purpose of this chapter is to give an overview of the last half of the concepts, which is related to the content and meaning of the many quality-of-life concepts and therefore of central relevance to the patient.

## **A hierarchy of concepts**

The difficult task is to reduce an enormous philosophical field to something simple and practical. Our approach is to list as many of the concepts as possible, and group them together in a usable hierarchy of concepts, serving our intent of helping the patients improve their own life. This list of core concepts was derived at a Scandinavian course on Quality of Life Research at the Nordic School of Public Health in Gottenburg, Sweden. About twenty participants were asked in plenum to list all the concepts they found relevant to the QOL concept. According to our QOL philosophy described earlier (3-7), we selected the abstract concepts used to organize the list of almost 100 concepts. We ended up with a surprisingly simple, understandable and useful list of the key concepts of quality of life to be included in and explained by a QOL philosophy. The presentation of the most central QOL concepts and the clarification of how these concepts relate to each other is the intent of the present article.

Let us openly admit that our approach is highly subjective, in spite of the many wise people, who have contributed to the basic list of concepts, and in spite of all our efforts to set up serious and sober criteria. This article presents the authors own subjective and philosophical approach, which do not give a conclusive answer to what quality of life is, or how quality of life should be described or perceived. On the other hand we consider this exercise important, because we need to have a clear message to the patients, if we wish to teach them and support their philosophical development in another way than just listening to them (which actually is a very efficient approach also). When we in this manner make clear the cornerstones of our philosophy to the scientific society, we also make it possible for everybody to relate to our work with our patients. Also the patients themselves will get the best possible foundation in order to relate to the philosophy of life we present. The exposition of the philosophy we bring to the patients is therefore also an ethical action. It is important to

underline that the article is not meant as a conclusive answer, but more as an encouragement to a dialogue, discussion and ongoing development in the field of philosophy of life.

**The fundamental concepts related to the quality of life concept**

During a course in quality of life research at the Nordic School of Public Health all the participants were given the task to list all the important concepts (in English) related to the concept of quality of life and the concentrated list (that also contains our key-concepts) can be seen in table 1.

**Table 1. The fundamental concepts related to quality of life -and the abstract key**

Love	Self-expression	Passion	Self-actualization
Joy	Understanding	Dependency	The shadow (anti-self)
Being	Feeling	Creativity	Near-death
Doing	Knowing	Motivation	Resources
Life-death	Healing (feel, understand, let go)	Dreams	Honesty
Power	Coping	Freedom	Policy
Action	Personal development	Silence	Sex
Responsibility	(cope, develop, heal)	Contemplation	Perspective
Success	Body	Belonging	Philosophy of life
Purpose	Good and evil	Compassion	Out-of-the-body
Intuition	Wholeness	Caring	Health, ability to function
Coherence, intention, purpose and meaning, interpretation and wording, perception, action, consciousness	Unity	Respect	Psychosomatics
Well being	Spirit/nonlocality	Awareness	Life pain
Satisfaction	Fragmentation	Acceptance	Competence
Happiness	Subconsciousness	Acknowledgment	Fight-flee
Needs and fulfillment	Repression	Holding	Life event
Talent (gift)	Empathy	Dialog	Therapy
Existence	Faith	Wonder	Regression
Existential therapy	Truth	Awe	Confrontation
	Life, purpose	Enlightenment	Innocence
	Fun	Wisdom	Choice
	Hope	Laughter and sorrow	
	Relation	Kindness	
	Nature	Pleasure	
		Self/soul and ego	

When working with the patient in the clinical practice some main topics are more relevant than others, hence the choice of key concepts. Table 2 consists of concepts listed under the main topics that we understand as the most important for the holistic medical practice: Existence, creation of the world, state of being, relations, daily living, daily living, talents, sex, health, personal development and therapy. When the patient has fully understood these topics and learned to master the concepts as an integrated part of his or hers active vocabulary, the patient has often come a long way, and QOL as measured by a global QOL questionnaire like QOL5 (8) or SEQOL (9) seems often to be radically improved (1,2). These topics will therefore be analysed below, illustrated through the matching concepts. It is important to understand that in this article the concepts points at each other. All in all the QOL concepts and their mutual relations set a certain, positive perspective on life and reality.

**Table 2. Quality of life related concepts, organized after the abstract key concepts**

<b>Existence</b>	Perception	Wisdom	<b>Personal</b>
Life	Action	Creativity	<b>Development</b>
Death	Consciousness	<b>Relations</b>	Cope, develop, heal
Mind	Power	Compassion	The shadow (anti-self)
Feelings	Responsibility	Empathy	Resources
Body	Success	Faith	Contemplation
Love	<b>States of Being</b>	Dialog	Perspective
Joy	Well being	Policy	Philosophy of life
Motivation	Satisfaction	Dependency	Self-expression
Being	Happiness	Freedom	Enlightenment
Doing	Needs and fulfilment	Kindness	<b>Therapy</b>
Self/soul and ego	Self-actualization	Honesty	Life event
Good and evil	<b>Daily Living</b>	Belonging	Confrontation
Wholeness	Fun	Sex	Life pain
Unity	Hope	Passion	Fight-flee
Spirit/nonlocality	Dreams	Pleasure	Near-death
Truth	Laughter and sorrow	Innocence	Out-of-the-body
Nature	Silence	<b>Health</b>	Existential therapy
Sex	Wonder	Ability to function	Holding
Growth	Awe	Psychosomatics	Care
Choice	<b>Talents</b>	Healing (feel, understand, let go)	Respect
<b>Creation of the World</b>	Talent (gift)	Coping	Awareness
Coherence	Intuition	Fragmentation	Acceptance
Intention	Understanding	Subconsciousness	Acknowledgment
Purpose and meaning	Feeling	Repression	Regression
Interpretation and wording	Knowing		Healing
	Competence		

Needless to say, the quality of life concept can be interpreted in many different ways, depending on the agenda, fundamental purpose of the patient, physician or researcher.

A philosophical or a sociological approach tends to emphasize other concepts and themes as central and relevant, than our medical approach. Since quality of life can also be understood as a speechless flow of life, our verbal approach is of course limited by it being a mental and intellectual approach. A playfully, intuitive and speechless approach is probable better for the patient in the end, but seldom possible in the beginning. An approach through the mind is therefore often the key for the patient in order to improve their quality of life and subjective health. Let us now go through the abstract key concepts one by one to see the different perspectives they offer to the patient.

## Existence

The first and most fundamental fact concerning the human being is that man is alive, we exist. We are conceived, born and we will eventually die. We are biological beings, with body, feelings and mind. We consist of a billion cells, which are all living animals and surprisingly we do still appear like a unity. We are conscious and with our consciousness we are able to form our own lives in a surprisingly free way. Our causal consciousness means that first of all we are a spiritual unity. Our primary motivation comes from love, joy of life and life-energy.



We have an inborn intuitive competence. We have the possibility to be ourselves, be something else, an ego (10) far from our real, true and natural condition. The more we are ourselves, the more loving, joyful, energetic and competent we become. Our nature is to be and do things. It is joyful and easy to be, if you accept and acknowledge, that it is difficult and painful to do. The art of life is to balance the joy with the pain. When we cannot bear the pain in life, we can instead repress our good, constructive intentions and substitute them with evil and destructive intentions (11). We are bound to do this as small children [12]. This is why we as adults consist of equally good and bad. Only an ethical consciousness can set us free and make us good (13). The existential choice becomes our key to happiness.

## Creation of the world

The second fundamental fact is that we as human beings create our own world. How we do this is of the greatest importance for our patients, who often find themselves in a world they completely or partly dislike. In our understanding, the most basic fact of our personal world is that everything is connected. Antonovsky introduced the difficult concept “sense of coherence” for the subjective interpretation of this (14). The objective, biological reality demonstrates that cells shape us.

They can be seen as small animals, which cohere so well that they melt together to make the unity of the human being: the wholeness or the soul. Life does not only cohere on the inside, but also on the outside.

The same power that ties together all the cells in our body, seems to tie us together in relationships and new wholeness. This power evolves into new kinds of relations that unite on more and more complex levels, with the global eco-system as the highest known level. Our intentions come from this coherent matrix of life. In the beginning of our life the web of life itself gave birth to our fundamental purpose of life.

The abstract purpose determines the frame of interpretation of reality: how we throughout life will perceive ourselves, our inner life, and the world around us. The frame of interpretation is pitched in language and concepts, in fact it creates our perceptions. Based on these perceptions and our purposes of life, arise our behaviour. Our consciousness evolves through the witnessing of our behaviour and though the response caused by it. Through the slowly acquired mastering of our surrounding world, we obtain our power, which gives us success in life when we use it responsibly and unite it in harmony with our deepest purpose of life. When many people experience not having success, it is because they are not conscious about their original purpose or the deepest meaning of their lives. They do not know themselves. They do not experience the world in that way and do not realize that they themselves are the cause. Therefore responsibility and self-knowledge – which adds up to wisdom - is the way to a good and successful life.

## States of being

Well-being, satisfaction, happiness, fulfilment of needs and self-actualisation are terms describing our present state of being. As life has a surface and an existential depth, it is possible to describe all the different stages of being in dimensions according to existential

depth and the degree of subjectivity and objectivity, as described in the integrative quality of life theory (15).

## Daily living

Concepts like fun, hope, dreams, laughter, sorrow, silence, wonder and awe are all of extreme importance for the good life. Yet it has been very difficult to map these concepts into a sound philosophy of life as they take their offspring from the non-verbal side of man. Let us stress that phantasy, adventure, excitement, curiosity and playfulness are factors in living good life of extreme importance.

## Talents

The talent can be seen as a gift from existence or the fundamental fact that everybody is talented. This talent is developed from the specific purpose of life of this person (16) and everybody seems to have a huge talent with the possibility to discover relations to the purpose of life. According to our understanding of life, everybody has every possible talent, but you can only access your talents through your purpose of life. You become talented if you are able to know yourself and intent on what you want to do, but wholeheartedly.

Unfortunately we are not free, because we have already made our fundamental decision in regard to what our intentions are in this life (11). So our purpose of life is our primary talent and the key to all our talents.

Some talents are bound to our body, feelings and mind: understanding, feeling, knowing, intuition, wisdom, creativity and sexuality. These general talents must be transformed into specific work-related competence, developed through action and exercise. The more a person can rely on his specific talent deriving directly from his purpose of life, the more competent and happy will he eventually be.

## Relations

The fourth fundamental fact is that our life is no better than our relations. The relations are more important for the quality of life the closer a person gets to you (17,18). Trust is very important here, as trust makes it possible for us to open up and receive from others. Empathy makes it possible for us to meet and understand the other (thou).

Dialogue makes it possible to grow together and honesty makes the dialogue fertile. When we are children or, later in life when we are out of reach with our own existence, we are highly dependent of our relations. As responsible adults freedom is the basis for the creation of our lives, as we choose our relations. Social qualities can be developed. More kindness makes us better friends and more compassion makes us better fellow human beings. To belong, to be of value, and to make a difference for other people is the real meaning of life for every human being.

## Sex

Apparently there seems to be three dimensions in living the good life: 1) love from me to you, 2) power and consciousness in body, feelings and mind, 3) joy and pleasure from the body and our life. All this seems to be of decisive importance for our general health, quality of life and self-expression (16). Many people suffer from low self-esteem, and only the human being who accepts itself totally, including the body, all of its organs, and its sexuality, will be able to lead the good life. It looks like the life energy fundamentally is polar, and that the sexual polarity in reality is the most fundamental aspect of our biological being, in accordance with our creation through sperm and eggs.

## Health

Many of the concepts which are presented as quality of life concepts are in reality concepts that mark health and the ability of functioning. There are a huge merging between experienced bad thriving and experienced bad health. It is often very difficult for patients to differ between physical and psychological pain, and many depressive patients with chronic diseases will also get rid of their pain, when the depression disappears.

Helping the patient to cope is a well-known strategic in medicine, but the mere adaptation will often not improve the quality of life in the long run, as personal development and healing is needed. And to feel the need to develop, you need a certain level of chaos, emotional pain and discomfort.

Healing, understood in a holistic context, is to feel, to understand and to let go. The importance for existential healing of letting go (of the negative decisions from painful life events) cannot be stressed enough. Many events and the negative beliefs they caused are buried and repressed in the unconsciousness. In general, the patients developing a new, more responsible consciousness is highly beneficial for the quality of life, health and the ability of functioning.

## Personal development

All around the western world it has become very popular to talk about personal development. Unfortunately the concept now covers everything from aura reading and the swinging of a pendulum to the deep and serious work concerning the introspection of the soul and the existence. What characterizes the deep and sincere work is that man has to confront himself with his shadow side (the anti-self) (13) and get rid of all negative decisions and all accumulated life pain that s/he has collected through the personal history. People who work successfully with themselves experience the hidden and unexploited resources they have. The freeing of the huge personal resources is therefore a mark for the wanted patient progress in the holistic therapy. The work with many different life perspectives and the increased latitude is another kind of mark. The goal is a positive philosophy of life and enlightenment or reaching the ultimate, natural, fully conscious and most joyful state of being. The physician can help his patient to adapt and to cope.

He can also help his patient to develop his personality and gradually come to master the difficult task of using himself optimally in this world. With sufficient trust and holding, the patient can heal. He can spontaneously regress to the painful, early gestalts and integrate his personal past. The sign of the patient healing on the most profound level of the soul is self-knowledge and the gift of knowing and feeling the meaning in life.

## Therapy

The fifth fundamental fact is that life is filled with difficult events and occasions that we have to integrate in order to heal our existence. These events invite us to modify ourselves in order to adapt, to get what we need and to survive. Negative decisions is in reality decisions that we make, overwhelmed by the pain of life, to disclaim the responsibility and escape from trouble.

This means that our confrontation with reality descends and instead we become more introverted, neurotic, old, tired, morbid, and sometimes even physically or mentally ill. Chronic stress is the result of many unfinished events, where we did not succeed to win the fight or did not succeed in escaping from the fight. These conflicts still live their own life inside of us, as we are unconscious about them. Life events can be so intense almost like the near dead experiences, where you experience leaving your own body. These intense life events are surprisingly common as most of us experience them through a lifetime and are often very traumatic if the wound is not healed. Even a modest abandonment or maltreatment experienced in our childhood can scar the soul in serious ways. Most people need to do some healing of their soul. The solution to the general loss of the ability to live seems to be existential healing. Holistic therapy (19) seems to induce a special condition, that we call “being in holistic process”. This condition looks and feels a lot like the original crisis in being just as emotionally intense and filled with “energy” (the same level of arousal), but its movement is exactly the opposite. In the crisis you stretch and modify yourself to be less alive, but to survive, while in the process of existential healing you let go of all the negative decisions that made you adapt and you become your real self again.

This is the mysterious healing that has been the goal of the native shaman (the medicine man). It is little understood scientifically speaking. It looks like it happens spontaneous, when both the physician and the patient share the intention of the patient healing from the bottom of the soul. When the patient trusts the physician and accepts the holding as a combination of care, respect, awareness, acceptance and acknowledgement, the healing happens and the patient’s life is once again blessed.

## Discussion

What we did in this chapter, one could argue, was not scientific at all, for the following four good reasons:

- We took a Nordic sample of about 20 scientists doing QOL research or studying the QOL concepts. We must presume that non-experts would come up with a different set of concepts that experts.

- We took a sample from the Nordic countries, known to have a very special culture, highly observant of the QOL. This obviously gives a bias. The sample of concepts would presumably have been very different in a group of countries from Asia or South America, although QOL research from Asia seems to use very similar concepts (20-22): satisfaction, well-being, self-esteem, purpose in life, hopelessness, depression, self-acceptance, relationship, hope.
- We took these concepts and made a very unscientific process of abstraction guided by a holistic medical perspective. The abstract categories created by this process are highly unlikely to be identical to a similar process guided by another intent or just done by another group of researchers.
- We are not at all representative of the scientific community. It might be that we put too much importance on sex originally coming from one of the most liberal of the liberal Scandinavian countries, Denmark.

On the other hand, the about 100 concepts chosen looks very representative, when we compare it both to the enormous philosophical literature – the titles of the about 10,000 books related to the QOL subject and to the titles of the about 10,000 related scientific papers done in the area of QOL, happiness, well-being and existence. We believe that the Nordic countries are actually good for such a study, as the awareness of QOL in our culture through 20 years or so makes us competent to choose. That we are from a sexually liberal culture might give the study a bias towards sex; on the other hand will liberation presumably reveal an interest and need more that it will create it. We believe that all human beings deep down have the same nature and that that the concept of global QOL is related to nature much more than to nurture and culture.

Therefore we believe that we, even in spite of obvious, personal idiosyncrasies, represent the human race well enough to make a fair abstraction from the words to the categories. Finally we have been working for many years teaching patients and others QOL philosophy, so we know what patients needs and likes; therefore at least some wisdom and experience must be contributed by us making the analysis instead of researchers less experienced in the field.

It is difficult to argue for the validity of a philosophy. It is not really a scientific issue, more as we have pointed out before, the basis for science. We felt obliged to reveal our sources, convictions and to make our QOL philosophy as explicit as possible. We have done this to our own satisfaction. As we are not impeccable and the global QOL research is a new branch of the medical science, we ask the reader to please forgive us for all the errors and mistakes we undoubtedly have made in the process.

## **Conclusion**

Research is still scarce when it comes to the relationship between personal philosophy of life and QOL, health and ability of functioning. From a qualitative perspective it seems fair to suggest that when the patient assumes more responsibility of his own life, personal resources can be used better and quality of life can be improved. It also seems fair to suggest that such an improvement will influence many other factors of the patient's life like subjective health,

both physical and psychological, and the general ability of functioning. A constructive and optimistic QOL philosophy can mobilize hidden resources of the patient. Helping the patient to develop a better personal philosophy of life – this is what we call “Quality of life as medicine” – seems to be one of the best things that the physician can actually do for his patient. Sometimes, when the patient is hopelessly ill, or not ill at all, but poorly functioning, this is the only way to go about it. The physician can, when focusing on the QOL key-concepts and the simple but encouraging perspectives listed above, play an important role in the patient’s life, being the one person that inspires the patient to develop a philosophy of life of love and joy, and of exploration of the thousand unseen possibilities every human life contains.

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## **Theories of human existence**

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Theories of existence are not new inventions, but already Carl Gustav Jung (1875-1961) with his work on the structure of the ego and the true self discussed these issues. In this chapter we plan to present some simple models of the purpose of life, the ego, the conditions for the unfolding of the unique talent of every human being, the problems of human development especially in childhood, but also of the nature of the evil side of man (the shadow, the anti-self), that collides with our deepest intention as human beings trying to be and do good.

### **Introduction**

It is not so often, that new scientific medical theories about the human existence appear, but a series of small theoretical papers elaborating on the meaning of life (1) will be presented in the following chapters. The theories support another new theory, that we have called the holistic process theory of healing (2,3). Before you can understand the holistic process of healing or make it work in the clinic, you need to understand human existence thoroughly. You also need to understand it well enough to be able to explain it to your patients together with the central concepts related to quality of life (QOL). We have developed the new theories of existence to obtain this clinical proficiency, so we have been forced to make them very clear and simple.

The first theories of existence of this kind were put forward by Carl Gustav Jung (4), the famous student of Sigmund Freud (1856-1939). His well-known model of the structure of the ego and the true self are shown in figure 1 (4).

We have now managed to make surprisingly simple models of the purpose of life (1), the ego, the conditions for the unfolding of the unique talent of every human being, the problems of human development especially in childhood, but also of the nature of the evil side of man (the shadow, the anti-self), that collides with our deepest intention as human beings trying to be and do good.

The theories of existence put forward are the results of a decade of research and philosophy in the connection between quality of life, disease and health (5-11) and clinical work with several hundreds of patients in holistic therapy using the models (12,13).

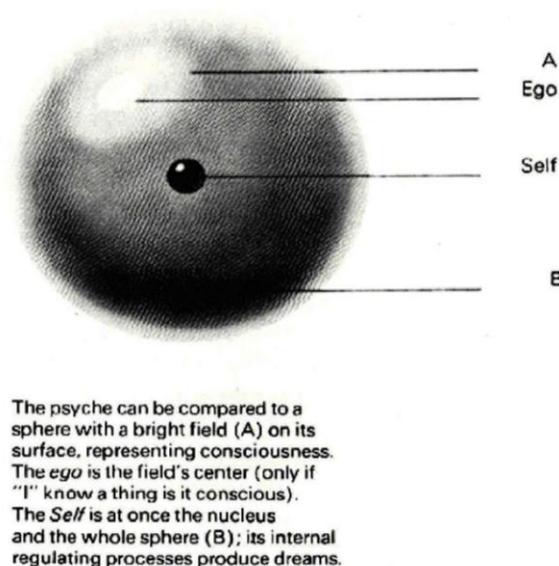


Figure 1. The famous, classical picture by Jung (4) of the vast human existence with the true self in the middle, and the tiny ego on the surface (A), surrounded by a minute, white spot of consciousness, and besides that darkness and unconsciousness (B). The core of existence (the self) is similar to the purpose of life in the life mission theory (1).

The intent that brought us to the theories was the intent of giving support, holding and holistic medical treatments to our patients. Recently the fruit of this positive development in Denmark, Norway and Israel was expressed in the holistic process theory of healing (2). This theory is now making the basis for the development of a clinical and holistic medicine (14-17). The main arguments why these theories are important, is that they seem to complement the reductionistic medical model of mainstream medicine in a beautiful and non-contradictory way. You are an organism containing both advanced genetically determined, biochemical pathways, and you are a living wholeness, conscious and alive, with love, feeling and sexuality not reducible to mere chemistry.

Given the wide range of existential theories, some justifications for choosing these five theories should be given, but this is difficult. Any theory that is not in conflict with known facts and which really helps the patients, seems to be valid, and many such theories might be valid at the same time, as they express different perspectives on life and existence. So the argument here is not that we now are to present the final theories on human existence, but that we find these theories in accordance with the know facts of life, and also highly practical in our clinical work.

They seem to support a pretty theory of the holistic process of healing, which we have found of tremendous value to our chronic patients. This does not make the theories true, but in our opinion gives this fact a certain beauty to the theories that is appealing.

The abstract nature of the theories is also appealing, because as soon as you understand the theories, many phenomena, which looked complex and complicated before, now look simple and easy to understand. This is the case not only to us as therapist or consultant, but also to our patients and clients. This is the main reason why we find the theories of existence useful and trustworthy.

## **Understanding human existence**

With this series of existential theories we are going to present in the following chapters, we hope to show that the human existence can be understood in depths. We also hope that this understanding of the human being, even in the most dark and hidden corners will in the end be joyful.

The human being according to the life mission theory (1) and the derived theories is “good” and we believe that we all have the possibility for making true and ethical choices in life in order to get to know ourselves better, to integrate our hidden resources and talents (and also our black shadow) so that we can create the good life. The good life, where we become valuable for each other and to ourselves. The theories are based on the life mission theory (1), which claims that the human being from the beginning of his existence had a constructive purpose of life, which at the same time also is our greatest talent. When we learn to use this talent, we become not only happy, but also healthy and well functioning in our relations to ourselves and the surrounding world. When a human being denies and suppresses himself, he or she becomes ill, unhappy and malfunctioning. We believe that you need to find your true self and live in balance according with your life purpose, which will be the very best medicine (18,19) for you, even at the end of your life (20).

## **To realize your life purpose**

However it is not that easy to realize your life purpose, because in our personal history every human being has at one point in time or another suffered defeat or failed in realizing the life purpose. According to the theory presented in this journal, an overwhelming pain early in life has caused a denial of the purpose. This denial is a highly self-destructive intention, which precisely balances against the constructive and more fundamental life purpose. We sometimes find ourselves in an existential dilemma, where we cannot let go of the painful and often troublesome life-purpose, because if we do that we will die, as the purpose of life is the only reason we have to live. The intended self-destruction is therefore the only way that the human being (in this case the child during childhood) can get out of the dilemma in order to survive and adapt. In defining a new life purpose, the earlier life purposes will be repressed, both the positive and the negative ones. The human being ends up being an adult unconscious about his or her strengths and weaknesses, about his or her “white and black” sides. This is exactly the scenario put forward by Jung (see figure 1).

## **Holistic process**

In order to start all over again the human being has to heal. The holistic process theory (2) explains how healing happens. When the human being gets and accepts the acknowledgement or respect and care, which was originally lacked, these frozen memories from the past comes out to surface the consciousness and can now be integrated. From now on the human being

can return to his or her natural condition. The holistic process of healing can be very effective in a group process.

Principally this therapy can be used on every human being, no matter which illness or sickness the human being suffers from. This means we can offer an effective therapy, also in the occasions where the aetiology of the suffering is not understood. This means that the initial exploration by the medical diagnosticians, which is often a period of waiting for the patient, can happen at the same time of the treatment and therefore a lot of expensive examinations, testing and long hospitalisation avoided.

We have published two articles, which documents success in pilot studies with existential group therapy done with patients suffering from chronic pains and alcoholism (15,16). Not only did the patient get healthier, but their quality of life improved. It looks like the holistic medicine can mobilize resources within the person.

## **Our hope**

We hope the holistic medicine build on the new and deeper understanding of man will develop into an attractive complementary and alternative medicine (CAM) as a companion to the established biomedicine. In the Research Clinic for Holistic Medicine in Copenhagen, we are now developing new cures based on the holistic process theory for patients that cannot be helped sufficiently with the drugs of the biomedicine. We want to help our patients to develop a high quality of life, a better health and an improved ability of functioning, through the mobilization of the hidden resources within the patient, even during the last time of our lives or in difficult times or through illness (20).

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## **A theory for a consciousness based medicine**

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In the previous chapter we have discussed the nature of life, human beings and the world. The structure has been pretty loose, and you might have felt our arguments little convincing. In this chapter we sharpen up, and give you the essence of what we believe about human life. The problem with an abstract theory is that it is hard to grasp, so it might even be less meaningful than the previous chapters. The truth is that only when you experience these things for yourself will they give meaning.

Genetic factors, external stress and the human factor are influential to the health and well-being of every person. Several studies have shown that the human being have many internal powers that can promote health and increase quality of life. A theory on the human meaning of life is put forward and how it relates to health, disease and quality of life in the context of holistic medicine.

### **Introduction**

The basic factors that influence health and disease can be divided into three categories: genetic factors, external stressors and traumas, as well as positive factors such as social network and medical treatment and finally the purely "human" factor concerned with lifestyles, free will, philosophy of life and the quality of their lives. Studies of the role of this "human" factor (1,2) indicated that many patients have major and unexplained powers to promote their own health. This short communication sketches a possible explanation that draws on classical psychodynamic and psychosomatic theory.

### **The theory**

The phases listed below chart the life and disease history of an individual (II-VII). At the outset, let us assume that a human being begins his or her existence with a plan or an

ambition for a good and healthy life. We may put this assumption of a primordial plan in quite abstract terms (I):

*I. Life Mission.* Let us assume that at the moment of conception all the joy, energy and wisdom that our lives are capable of supporting are expressed in a "decision" as to the purpose of our lives. This first "decision" is quite abstract and all-encompassing and holds the intentions of the entire life for that individual. It may be called the personal mission or the life mission. This mission is the meaning of life for that individual. It is always constructive and sides with life itself.

*II. Life pain.* The greatest and most fundamental pain in our lives derives from the frustrations encountered, when we try to achieve our personal mission, be they frustrated attempts to satisfy basic needs or the failure to obtain desired psychological states.

*III. Denial.* When the pain becomes intolerable we can deny our life mission by making a counter-decision, which is then lodged in the body and the mind, partially or entirely cancelling the life mission.

*IV. Repair.* One or several new life intentions, more specific than the original life mission, may now be chosen relative to what is possible henceforth. They replace the original life mission and enable the person to move forward again. They can, in turn, be modified, when they encounter new pains experienced as unbearable. Example: Mission #1: "I am good." Denial #1: "I am not good enough." Mission #2: "I will become good," which implies I am not.

*V. Repression and loss of responsibility.* The new life intention, which corresponds to a new perspective on life at a lower level of responsibility, is based on an effective repression of both the old life mission and the counterdecision that antagonises and denies it. Such a repression causes the person to split in a conscious and one or more unconscious/subconscious parts. The end result is that we deny and repress parts of ourselves. Our new life intention must always be consistent with what is left undenied.

*VI. Loss of physical health.* Human consciousness is coupled to the wholeness of the organism through the information systems that bind all the cells of the body into a unity. Disturbances in consciousness may thus disturb the organism's information systems, resulting in the cells being less perfectly informed as to what they are to do where. Disruptions in the necessary flow of information to the cells of the organism and tissues hamper the ability of the cells to function properly. Loss of cellular functionality may eventually result in disease and suffering.

*VII. Loss of quality of life and mental health.* In psychological and spiritual terms, people who deny their personal mission gradually lose their fundamental sense that life has meaning, direction and coherence. They may find that their joy of life, energy to do important things and intuitive wisdom are slowly petering out. The quality of their lives is diminished and their mental health impaired.

*IX. Loss of functionality.* When we decide against our life mission we invalidate our very existence. This shows up as reduced self-worth and self-confidence. Thus, the counter-decisions compromise not only our health and quality of life, but also our basic powers to function physically, psychologically, socially, at work or sexually for example.



## **Applying the theory**

Spiegel et al (1) asked women with metastatic breast cancer to talk to each other in group sessions about their illness. As described in the article, the women made an effort to improve the quality of their lives. Survival improved radically, relative to a control group. This may be accounted for as follows. When people confront and deal with still more of their destructive cognitions or attitudes to life, then the counter-decisions recorded in their bodies and minds results in the repressed pain to resurface in consciousness to be dealt with and the fragmentation of the person slowly ceases. We heal and we become whole. Since the fragmentation is one of the causes of the disease resulting in decreased quality of life and ability to function, the internal repair will enable the person to become more healthy, happy and functional. The inner qualities of joy, energy and wisdom re-express themselves. Other things being equal, there will be prophylactic effects on new outbreaks of disease, accidents and loss of functionality.

Ornish et al (2) induced patients with coronary arteries severely constricted from atherosclerosis to adopt lifestyle changes and deal with the quality of their lives. This had beneficial effects on the arterial constrictions, as compared with a control group. The life mission theory may explain this by reference to the systematic efforts exerted by the patients to modify their behaviours and the attitudes that go along with them. This means that people work to relinquish the destructive attitudes to life that deny the life mission. As this denial recedes, the person more or less returns to his or her natural state of health, quality of life and ability to function. The theory predicts that when a person, as an example is helped along by a family physician conducting a conversation (clinical interview or consultation) about the quality of life of that person, can re-establish her life mission. The person can then recognize it as the proper purpose in her life and rearrange her life accordingly and achieve her truest sense of humanity, a human being in full agreement with herself and life. This person can draw on her resources and potentials to the fullest degree. In her natural state, a human being is maximally valuable to herself and the world around her.

A consciousness-oriented (holistic) medicine based on this theory will help people become valuable not only to themselves, but also to each other.

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## **Life purpose and the ego**

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Pursuing your life mission is often very difficult, and many frustrations are experienced along the way. Major failures to bring out our potential can cause us considerable emotional pain. When this pain is unbearable, we are induced to shift from one intention and talent to another that better allows us to adapt and survive. Thus, we become set on a course that brings out a secondary or tertiary talent instead of the primary talent. This talent displacement may be expressed as a loss of our true nature or true self. The new purpose in life now functions as the core of a new personality: the ego. The ego has a structure in a way similar to that of the true self. It is anchored in a talent and it draws on sub-talents. But the person, who is centred in his or her ego, is not as powerful or talented as the person s/he originally was, living the primary purpose of life. This is because the original personality (the true self or “higher self”) is still there, active and alive, behind the ego.

Symptoms, disorders and diseases may be explained by the loss of energy, joy in life and intuitive competence, because of the inner conflicts, which may be alleviated or cured in the salutogenetic process of Antonovsky that helps patients find their sense of coherence or their primary purpose in life. Many cases of reduced ability to function, physically as well as psychologically, socially or sexually can also be explained and alleviated in this way. When a person discovers his true talent and begins to use it with dedication, privately as well as professionally, his life will flourish and he may overcome even serious disease and great adversity in life. The salutogenetic process can also be called personal development or “life quality as medicine”.

It is important to notice that the plan for personal development laid out by this theory is a plan not for the elimination of the ego, but for its cultivation. An existentially sound person of course still has a mental ego, but it is centred on the optimal verbal expression of the life mission. Such an ego is not in conflict with one’s true self, but supports the life and wholeness of the person, although in an invisible and seamless way. The more developed the person, the more talents are taken into use. So, although the core of existence remains the same throughout life, the healthy person continues to grow. As the number of talents we can call upon is unlimited, the journey ends only at death. Understanding the concept of the ego, it is very easy for the physician to motivate the patient to go through a lot of difficulties to grow and develop, and when the patient fully understands the concept of the ego and the true

self (higher self), the patient gets a strong feeling of direction in personal development, and a motivation to fight the internal obstacles for quality of life, health and ability of functioning.

## **Introduction**

The life mission theory claims that the core of human existence is to have a purpose in life, a “life mission” that can be articulated into words (1). With some practice, a person may be able to capture his or her life mission in one single, short sentence, like “I create” or “I bring joy”. The life mission can be variously seen as your purpose in life, your existential duty, gift to the world, true nature, greatest joy, path in life, key intention, or the realization of your greatest talent. Let us explore the idea that the life mission is associated with a talent for doing what is implied by it. It is obvious that a life mission like “I create” presupposes a talent for creativity. To exploit such a talent, a person must draw on a number of secondary or auxiliary talents, such as talents for understanding, exploring or connecting, which again draws on tertiary talents. To support the talent for understanding, we must call upon talents for analyzing, confronting, sensing or intuition.

It seems very likely that every human being is capable of every possible intention or mission and so also possesses all the talents in the world. But we may suppose that human nature is structured such that only a few talents are in the foreground (maybe only one), while many are in the background, and some are in between. Using this core talent is what gives you the greatest pleasure possible in your life. To bring out your full potential in the Maslowian sense (2) you must develop not only your core talent, but also the secondary, tertiary and other auxiliary talents supporting it. In the best of worlds, we each find our life mission and core talent and manage to call upon its auxiliary talents, so that they remain subservient to our life mission, our key intention or purpose in life. All too often, however, some auxiliary talent takes over and replaces the core talent. This displacement may be assumed to be pathogenic. Antonovsky (3), for example, describes it as a loss of coherence and Frankl as a loss of meaning (4).

## **The rise and the structure of the ego**

Pursuing your life mission is often very difficult, and many frustrations are experienced along the way. Major failures to bring out our potential can cause us considerable emotional pain. When this pain is unbearable, we are induced to shift from one intention and talent to another that better allows us to adapt and survive, given the circumstances in which we find ourselves. Thus, we become set on a course that brings out a secondary or tertiary talent, instead of the primary talent. This talent displacement may be expressed as a loss of your true nature or true self. The new purpose in life now functions as the core of a new personality: the ego. The ego has a structure in a way similar to that of the true self. It is anchored in a talent and it draws on sub-talents (see figure 1). But the person, who is centred in her ego, is not as powerful or talented as the person she originally was, living her primary purpose in life (see figure 1 with the ego’s relationship to the life mission, or purpose in life). The talents supporting one’s true purpose in life relate to one’s true self, depicted here as the big flower,

while the ego is the small flower that centres on a secondary or (as seen here) a tertiary purpose in life and the associated talents. The drawing is made by a tinnitus patient, a female artist who could not work because of her disease. In the therapy she came to a sudden realization of her personal life mission, and shortly after this breakthrough, her tinnitus disappeared.

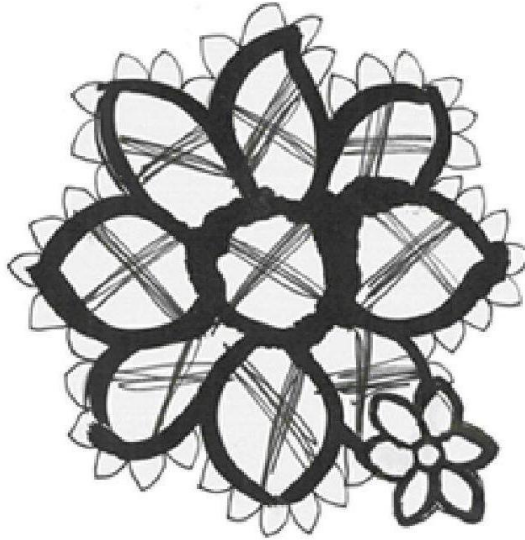


Figure 1. The ego's relationship to the life mission, or purpose in life. The talents Supporting one's true purpose in life relate to one's true self, depicted here as the big flower, while the ego is the small flower that centers on a secondary or (as seen here) a tertiary purpose in life and the associated talents. The drawing is made by a tinnitus patient, a female artist who could not work because of her disease. In therapy, she came to a sudden realization of her personal life mission, and shortly after this breakthrough, her tinnitus disappeared.

The drawing is made by the same female tinnitus patient, and depicts the essence of herself as a flower of talents, with her life mission as the central core and the secondary talents as the petals; attached to these are tertiary talents and so forth. Two years after the therapeutic breakthrough that allowed her to formulate her life mission her tinnitus seemed permanently healed and she is able to work again as an artist, more talented than before. The white flower has no dark petals (suppressed talents), illustrating that her ego has now been tuned to her life mission and her inner conflicts have lost their power to make her sick.

## The process of salutogenesis

Compared with the real self, the ego is weak. It seems that energy, joy in life and intuitive competence pour from the true self, the primary purpose in life. The existential position far from our natural centre of being is commonly known as the neurotic personality.

Lacking much of the energy and the personal drive to overcome life's difficulties, the neurotic person often gives up, which explains depressions, feelings of insufficiency, low self-esteem and the urge to commit suicide. Such phenomena, and many more, can be seen as

symptoms caused by the loss of connection to the real self, the primary purpose in life. Symptoms, disorders and diseases that may be explained by the loss of energy, joy in life and intuitive competence may be alleviated or cured in the salutogenetic process (3) that helps patients find their primary purpose in life, their life mission.

Many cases of reduced ability to function, physically as well as psychologically, socially, and sexually, can also be explained in this way. When a person discovers their true talent and begins to use it with dedication, privately as well as professionally, his or her life will flourish and s/he may overcome even serious disease and great adversity in life (4-6). The salutogenetic process can therefore also be called “life quality as medicine” (7, 8).

It is important to notice that the plan for personal development laid out by this theory is a plan not for the elimination of the ego, but for its cultivation. An existentially sound person of course still has a mental ego, but it is centred on the optimal verbal expression of the life mission.

Such an ego is not in conflict with one’s true self, but supports the life and wholeness of the person, although in an invisible and seamless way. The more developed the person, the more talents are taken into use. So, although the core of existence remains the same throughout life, the healthy person continues to grow. As the number of talents we can call upon is unlimited, the journey ends only at death.

## **A case story**

A female, aged 42 years with tinnitus, migraine, herpes simplex 1 and 2, lower back pain, treatment-resistant genital warts, sun allergy and depression. Despite her age, Mia (see figure 1 and 2) was already in a very poor condition, physically and mentally. But she possessed something special, an alertness and interest in the spiritual world. She wanted to develop as a person and that meant that she was ready to assume responsibility and take the rather bitter, holistic medicine offered her.

We met in a good and sincere way. Processing her painful personal history took her directly to her life purpose. Following this acknowledgement her art began to flourish and grow like never before. Suddenly, she could do things that she had not even come close to doing before and her art expressed her new state of acceptance and understanding of good and evil, beautiful and ugly, muck and mire and sky and light. Having acknowledged her life purpose, Mia largely became able to manage on her own. She could now develop further without our help.

The holistic coaching of guiding her through the pain that made her ill and blocked her enjoyment of life and self-expression is now finished. Her body and soul have largely healed, her tinnitus is almost gone and most of the time she cannot hear it at all. Obviously, this patient may become physically ill again, but her resistance and inner equilibrium appeared to be much greater than before, so next time she is likely to recover much faster.

This woman seemed to have almost all her diseases caused by inner conflicts between her ego and her true self. When the conflicts were solved in the holistic therapy, the most of her seemingly incurable diseases disappeared at the same time.



## Another case study

Male, aged 55 years presented with the question if he had heart problems. This patient is a family man and manager of a private firm. He seemed a happy and extrovert man with a good grip on things. However, his body was heavy and his muscles very hard. Shortly before he started at the holistic clinic, he had been in hospital with a blood clot in his heart and was taking medication for hypertension.

Most of the times he was on the couch he fell into a deep sleep that was frequently interrupted by some very violent jerks throughout the body, which he called his electric shocks. Several times during the period when he came to the clinic he was admitted to the hospital with extreme cardiac pain and angina. Eventually he started medication for these symptoms and on the waiting list for bypass surgery. During some of his private sessions he became aware of some of the things that had greatly influenced his life, including an alcoholic father, who had been violent towards his mother. As a very young man he received electroconvulsive therapy for severe depression. After he had realised this, the jerks that used to wake up both him and his wife ceased or diminished. It also became apparent that he was taking strong antidepressants and had done so for years. He now wanted to reduce his dosage so that he was far below the daily dose, and he was doing well without the excessive medication. Throughout the therapy he had some major problems with his staff and he felt they had taken a dislike to him. It was our impression that others shared his belief. The patient mobilised all his strength to give notice and start again from scratch in another firm, where he is working today.

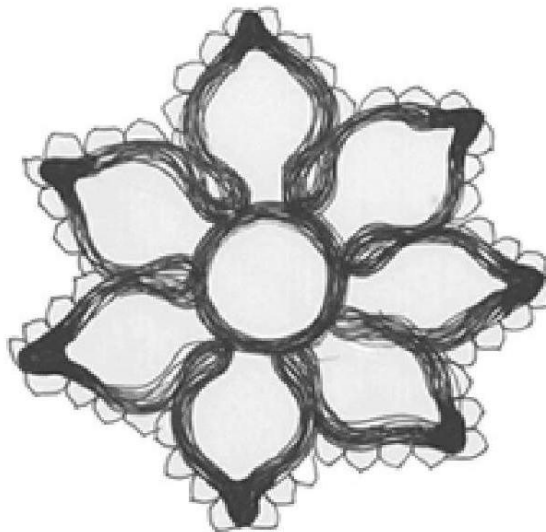


Figure 2. The structure of the life mission. This drawing is made by the same female tinnitus patient, and depicts the essence of her self as a flower of talents, with her life mission as the central core and the secondary talents as the petals; attached to these are tertiary talents and so forth. Two years after the therapeutic breakthrough that allowed her to formulate her life mission, her tinnitus seemed permanently healed and she is able to work again as an artist, more talented than before. The white flower has no dark petals (suppressed talents), illustrating that her ego has now been tuned to her inner conflicts have lost their power to make her sick.

At some point he was again admitted to the hospital with extreme pain and angina that was considered to be life threatening, so he was transferred to a cardiology ward for surgery at the earliest opportunity. However, when the cardiologists examined him thoroughly they could not find any disorder or defect in the heart or surrounding blood vessels, so they discharged him again. During the last private session with the patient he was truly happy about life, and full of vigour to devote to his family and friends. His jerks and cardiac problems had vanished completely, and he was enjoying his new job. What happened here according to the theory of the ego presented in this chapter is that the man finally let go of his cold and frozen-hearted ego, which was suppressing his feelings and emotions, which was very good for his subjective experience of his heart, his quality of life, working life and ability of functioning in general.

The method of Marion Rosen Body Work (9) and other body therapies that make the patient note the feelings located in the body are effective tools in holistic medicine. Sometimes the patient can verbalise his feelings and let go of the limiting beliefs that keep them bound to the narrow world of the ego. For many middle-aged men, their Achilles' heel is allowing themselves to feel. Often, it is extremely unpleasant for a grown-up man in a managerial position to register the old feelings from his childhood of being small, frightened or helpless. It is quite simply an insult to his ego, that he is still harbouring such feelings. To release them seemingly relieved his angina.

## **Discussion**

The concept of the ego is only meaningful if one acknowledges the concept of a more real, more valuable, and more natural self. We know this “other self” indirectly, through the relationship with our self (10-20]. You can only have such a relationship with yourself, if you have your “self” relating to the other. For most of us, the introspective scene is complicated, and not at all as clear as one could wish. So introspection is obviously the hard road to information about the human psyche. Freud and his brilliant student Jung (21) had in many respects been for the west what Buddha was for the east, enlightening us on the structure of the consciousness and subconsciousness of the human being. While Lord Gautama Buddha walked the hard road, starving himself almost to death, in his introspective search for the truth, Jung chose a completely different strategy, observing the other. This seems to be the western scientific approach to understanding, always watching, analyzing, and mapping the field through the other person. Interestingly, the elements of Jung’s map of human existence (21), being a pure product of his qualitative studies of the human nature, is easy to identify for the therapist doing existential holistic therapy (22,23). But as we all know, the perspective yields the vision. So to argue for the structure of the ego presented in this chapter, you have to argue for the perspective. The perspective is the life mission theory (1) and it is very difficult to argue for this theory; it is really a matter of philosophical perspective on life and subsequent interpretation. In the existential holistic therapy, we very often take people into deep regression into the womb and back to the beginning of life (24). We do that because according to the life mission theory we believe that life is whole from the very beginning, carrying our purpose and all the other qualities of consciousness, like joy and understanding. But this is a pure belief and this is us confirming our own belief in the therapeutic process.



This is not at all a solution to the famous hermeneutic problem (25): that we through all our efforts of investigation and reality testing in the end only will confirm what we believed at the beginning – that is, if our worldview is consistent.

A consistent view is not a true view. We are caught, as many philosophers have taught us, in our own description of the world. So knowing this, how can we argue that there is scientific truth in the mapping of the life purpose and the ego we propose in this chapter?

Many people have doubted Jung and many more will doubt him in the future. We see this structure in our patients with no doubt at all, because we share this perspective, but we must also admit that the structure of the ego is a product of a perspective of life that might in the end be very wrong, so why do we suggest this after all, and claim it to be science also? The first argument is, that quite interestingly the philosophy about the ego and the true self has been one of the conceptual keys, along with the concept of the evil, of most major medicine systems in most pre-modern cultures from Tibet, India, and Japan in the east to the African Sangomas, the Australian aborigines in the south, the Shamans of the Eskimos of Greenland, the Same in the north of Scandinavia to the native Americans in the west (26). Realizing that all wisdom of all the pre-modern cultures can be brought together in one philosophical system made Aldous Huxley call his maybe most famous and extraordinary wise book on the human existential problems: *The perennial philosophy* (27). In making such a synthesis of our own, much inspired by Huxley, we must agree to the critique that we tend to pull together psychoanalytic and existential thoughts. While these two perspectives have much in common, they are not the same regarding their view of human nature.

We hope that the reader will forgive this unpleasant result of our eager attempt of simplification. However convincing, the cultural argument is of course not a hard argument in medical science. In pre-modern time most people believed in free spirits, reincarnation and *élan vital* also. They did not know the physiology of the heart or the structure of the brain. Knowing about neurobiology, mental projections and neuropsychology we do not see the spirits, because we do not interpret reality that way, but still we definitely see the ego! So how can we argue for our perspective? Why is the ego in another category than the spirits? It definitely is as abstract and as difficult to see with the naked eye, as is the spirits.

The scientific exploration of the human existence in existential, holistic therapy seems to give us a consistent and well structured worldview, that empowers us as holistic physicians to be powerful and supportive role-players in the patient's "game of life", which we see as the aim of the holistic medicine. The scientific approach in holistic medicine is powerful, because it combines the consistency and structure of medical science with the good intention of supporting the very existence of the patient.

Understanding existence, our own and our patient's, and meeting the patient with a good will – even with love -is in the end what makes us good physicians and excellent consultants. When we understand the human nature, we can help people to heal and support them to grow, because we perceive them as rich, beautiful and gifted souls.

This way we can be of value to our patients and clients - though this understanding of man, his ego, and his true self. This fruit of our combined academic and clinical efforts is what, in our understanding, makes it medical science or as we call it the "new medicine".

## Conclusion

As physicians or business consultants we meet people, who are feeling stuck in their life, which are feeling empty or isolated, who are complaining about a poor quality of life, poor health, lack of joy, sexual interest, happiness or talent. With the understanding of the nature of the human being in general and the person in front of us specifically, we should know precisely what to do, we should know how to help people grow and develop and how to find hidden resources, talents, potentials and possibilities. This can be done by helping them to move their existential position from the position of the ego, to the position of their real self, their life, their soul and their wholeness. Knowing the fundamental structure of consciousness of man, we can often help the suffering person to heal his or her very existence. The dryness, the desolateness, the stiffness, the stupidity, the emptiness, the righteousness, and the social isolation that characterizes people stuck in the position of the ego can be easily understood and made to go away, if the person cooperates. Even some physical or mental diseases can be healed by improving quality of life by such an approach (5-8, 24).

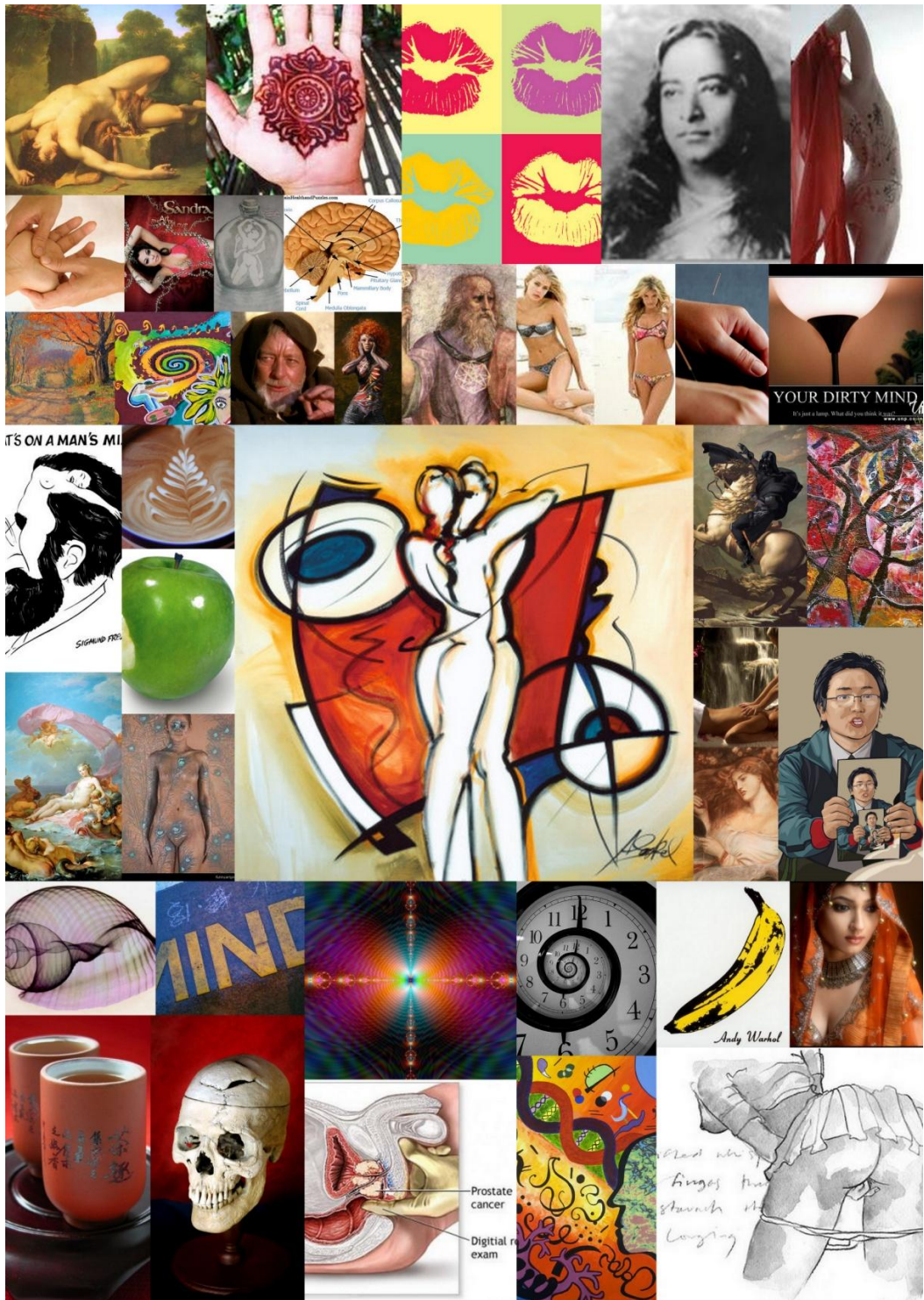
So understanding makes us able to work holistic, while we focus on the whole person and not only the symptoms. Thus we can approach our patient and help him confront his imbalances and inner conflicts, and thus improve his state of being directly through his consciousness. When we succeed in this, we often do not need any drugs at all to help people get rid of pains, alcohol dependency, depression, anxiety, and other symptoms of poor quality of life (7,8). The understanding of the ego and the real self seems to be one of the universal keys to see, meet and help people to grow and heal in order to empower the physician or therapist to intervene successfully through the patient's consciousness. Antonovsky (3) saw this possibility clearly and called it salutogenesis – meaning something like “creation of solution”. We believe that this difficult concept will have a great future in medical science. We use the simpler term “holistic healing” in the same sense (22,23). It has nothing to do with energy-healing in the new age sense. It has everything to do with developing the consciousness, understanding, responsibility, and sense of coherence of our patient. Because the clever physician knows humbly that the healing powers are to be found within the patient, not within the physician, he is only the facilitator.

Understanding the concept of the ego as presented here, it is easy for the physician to motivate the patient to go through a lot of difficulties to grow and develop, and when the patient her- or himself fully understands the concept of the ego and the true self (higher self), the patient gets a strong feeling of direction in the personal development, and a motivation to fight the internal obstacles for quality of life, health and ability of functioning.

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## **What is talent?**

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When we acknowledge our purpose as the essence of our self, when we take all our power into use in an effortless way, and when we fully accept our own nature including sex and sexuality, our purpose of life takes the form of a unique talent. Using this talent gives the experience of happiness. A person in his natural state of being uses his core talent in a conscious, joyful, and effortlessly way, contributing to the world the best he has to offer.

The talent theory claims that a human talent arises in a three-dimensional space distended the axis: purpose, power and gender. Self actualisation is a result of a person fully expressing and realizing his core talent.

Full expression of self happens when a person, in full acceptance of body and life, with whole-hearted intension, uses all his personal powers to realize his core talent and all associated talents, to contribute to his loved ones and to the world.

## **Introduction**

Everybody has, among a wide range of talents, a special gift; something this person can do or be better than anybody else in the world (1). Everybody is special, even divine in his core talent.

This talent arises from the bottom of our human existence, as the essence of our human nature, the essence of our true self. Our core talent draws when necessary on our secondary talents, which again draw on tertiary talents and so forth, making all the talents in the world available for us, when they serve our true purpose of life (2). Behind any talent there is the intent of realizing this talent, but biology and the outer world have barriers that we need to overcome.

This makes sometimes the process of developing your talents painful. The closer a talent is to the existential core, the stronger is the intent, and the stronger is the pain. This existential and emotional pain often brings the person to deny his core talent (1). But the talent is still there, hidden below the surface of your existence. When we deny our core talent early in life, our whole personality is re-centred on a secondary or even tertiary talent, thus giving rise to a false self, the ego (2). From the position of a false self we cannot be as talented as we were meant to be.

## Expression of talent

For us to flourish with our central talent and to obtain the state called self actualization by Abraham Maslow (3), we have a threefold need: 1) Acknowledging our core talent (our purpose of life) and intending it 2) Understanding our potential powers and manifesting them 3) Accepting our human form including our sex and expressing it The first dimension is spiritual, the next dimension is mental, emotional and physical, while the third dimension is bodily and sexual. We manifest our talents in a giving movement from the bottom of our soul through our biological nature onto the subject and object of the outer world. These three dimensions can be drawn (see Figure 1) as three axes, one sagittal axis called purpose or love or me-you, one vertical axis called power or consciousness (light) or heaven-earth, and one horizontal axis called gender or joy or male-female.

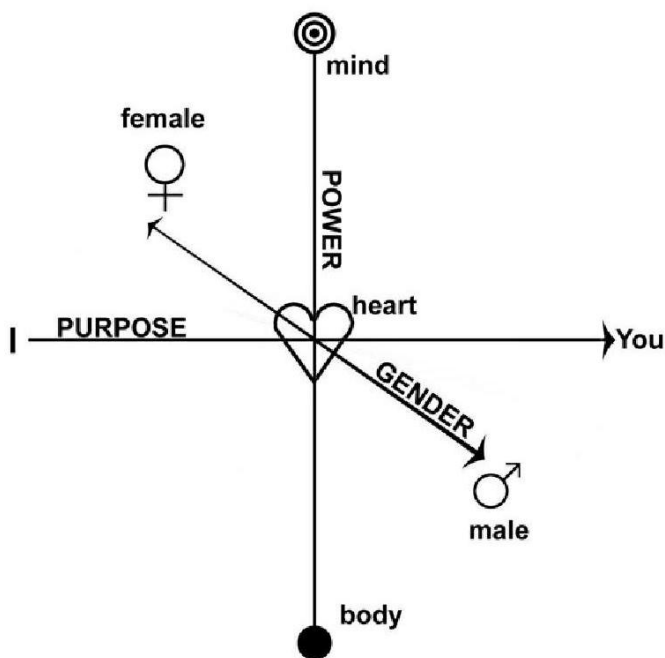


Figure 1. A human being exists in three dimensions, and all of them must be in their natural state, to allow the full expression of talent. The sagittal axis is called purpose or love or me-you, the vertical axis is called power or consciousness (light) or heaven-earth, and the horizontal axis is called gender or joy or male-female.

## The three core dimensions of human existence

The three core dimensions of human existence are considered of equal importance for the expression of our life purpose, life mission, or core talent. Each of the dimensions is connected to special needs. When these needs are not fulfilled, we suffer and if this suffering becomes unbearable we deny the dimension or a part of it. This is why the dimensions of purpose, power and gender become suppressed from our consciousness.

## 1. Purpose

The sagittal axis is called purpose or love or me-you. It carries our life purpose or mission of life (1). Everybody is born with a great gift, something that we are meant to contribute with to this world. When we use this gift, and give our very best to other people and to the world, we become truly happy.

The central talent is the core in our healthy personality or the backbone of our sound existence. It draws all the other talents in the vast human heritage. It arises from our wholeness (soul) and is so abstract and all-embracing that it comes in useful in all possible situations in life.

The explanation for this is that our purpose of life is what structures our understanding, our perception and our interpretation of reality. The purpose of life is what gives our life meaning.

Our purpose and the intent behind it, is directed forward against you and the intent, as expressed by Martin Buber (1878-1965) (4). Only the person who is fully aware of his or her purpose of life can fully express his or her true talent. To be able to see and acknowledge our purpose of life we must be seen and acknowledged by others, first of all by our mother and father, later by other people. The need affiliated with the me-you axis is acknowledgment of me. I can support you on this axis by acknowledging you. I can help myself in this dimension by acknowledging myself.

## 2. Power

To give is an action of power and in our natural state of being we are immensely powerful (3-6). To bring your talent to the world takes a lot of power. There is a reason, why the world is in need of what you have to give, so you cannot expect the world to accept your gift without a struggle. To impact other people or to make a change in the world you must fight, and for this fight you need power. So without power you cannot be truly talented and you cannot make any difference or any important contribution to the world.

To influence another subject, you must use a lot of different talents bound to mind, feelings and body. All part of the body must be in a fine shape, the organs and cells of the body must be in their natural state.

All the qualities connected to mind and brain, to feelings and emotions, and the physical body and its life must be drawn upon. We are talking about qualities like value, joy, respect, love, courage, expression of self, attention, intelligence, patience, awareness and maybe the most fundamental talent called coherence (6). Coherence makes us an integral part of the world, mankind and the global ecosystem.

Only the person who is fully alive on the vertical axis of power and consciousness can fully express his or her talent. The concept of a “spiritual warrior” describes this accurately. To realize and develop our powers we need awareness of our mind, respect for our feelings and care for our body. The needs affiliated with the power-axis are awareness, respect and care. I can support you on this axis if I am aware, respectful and caring (7). I can develop in this dimension by being aware, respectful and caring and by thorough self-examination.

### 3. Gender

Surprisingly a person cannot express his or her true talent without a total accept of his or her own gender (8). The reason for this is twofold: the dimension of gender is also the dimension of joy so it seems that the power of the body cannot manifest itself without an accurate and well-defined male or female appearance. The simple explanation is that our powers are bound to the body and the body comes in two very different forms, a male and a female.

Only when we chose the one of them can we access the true powers of the body. There is another reason and deeper reason why we cannot blossom with our inborn talents if we deny our gender and sexuality: the life energy itself seems to be polarized. The most fundamental energy of life, our basic driving force, has a polar nature. So the appearance of the two sexes is a mirroring a very fundamental feature in life, and only when you open yourself for this dimension can you experience true joy. To accept our own sex we need our body and sex to be accepted by our mother and father. The need affiliated with the gender-axis is acceptance. I can support you on this axis, if I give you my acceptance of your body and gender. I give this acceptance as a touch done with the intention of acceptance. I can help myself in this dimension by accepting myself.

## Discussion

Love, light (consciousness) and joy is what it takes to express yourself fully, and everybody has a huge talent to be expressed and therefore a unique project of self actualisation (3-17). This is the essence of the theory of talent. Love arises from our purpose of life, our life mission (1). Consciousness brings about the powers of mind, feeling and body. Joy, the most tricky and philosophically difficult aspect of life, comes from accepting our self completely, including our body, its organs and its urges, sexuality being the most difficult aspect to accept for many western people. As the theory of talent is designed for therapeutic use (18,19), what most urgently needs attention with our patients is taken into focus. In a culture where sexuality is fully integrated, the focus might be more on the powers or on the purpose of life and the model might need another presentation. In this model accepting our gender and sexuality becomes as important as knowing our purpose of life and having the powers of mind, feelings and body.

The concept of talent is, like the concept of the ego and the concept of the true self, as old as man himself. Many ancient scriptures, the Vedas presumably being the first known source, contain detailed analyses of the existential dimensions of man, their structures, layers and complicated internal relationships. The problem with all these complex and often highly composite models is that they are not very easy to use in the modern, holistic medical clinical, where efficient therapy and fast results is a must (20-23). Our aim has been to develop the most appropriate models for obtaining these clinical results. What we need for clinical use seems to be very simple easily communicable, highly useful models and theories and not the very smart and complicated models. We actually need models so simple that they can be explained to every patient in about five minutes together with the existential core concepts (16). It is our experience that the simple models presented in this series of papers can guide the holistic, existential therapy successfully (20).



The reason to prefer simple models for complicated ones is also philosophical. The famous principle of Occam's razor tells us, that the simplest model or theory that does the job is the most valuable and most true. Another argument for simplicity is the now classical, aesthetic argument of beauty in science. Yet another is the mnemotechnical argument: a simple model is to be remembered and taken into use; a complex model will be forgotten in ten minutes. Of all these arguments, the practical argument seems to be by far the most convincing for a physician or therapist, who is anxious to help his patients. We have tested this with around 200 patients, and have found that it actually makes the concepts and the fundamental existential dimensions much more easy to understand for most patients, than the previous models [8,9,24,25]. We know that the model suggested in this chapter is so simple that it might be taken as an insult to the much more brilliant and complex models of the ego and the self, especially the famous one made by Sigmund Freud and Carl Gustav Jung [8]. As we are pleased with the clinical results from using our new, simpler models [25], we hope that the value of it will be put to a test by our medical colleges, familiar with the brilliant, but more complex, acknowledged models and theories of human existence.

It is important to note that the barriers that limit one's realization of his/her talents always seems to be in one or more of the existential dimensions of the theory of talent: love or knowing one self, power, or mastering mind, feelings and body, and gender, or accepting oneself fully including the body, its organs, and sexuality. When it comes to our patients the most normal is to have problems in all three areas. If you do not relate to your inner life and existence at all, but only see the external world, you will never discover your own talents to begin with. Not knowing your own talents, you will never be able to grow as a person and in your love for life and others.

## **Working with the gender-axis**

The theory of talent is useful in many different situations, where the physician suspects the origins of the symptoms as psychosocial factors. The theory of talent allows for a fast checking on the existential dimensions to see, where the problem presumably is. Using the techniques of holding and processing [18, 19] facilitating the holistic process of healing, the problems are often easily solved as the following case demonstrates.

### **A case story**

Female aged 33 years with vaginismus at her seventh session. The patient relates that immediately, when intercourse begins she experiences pain. When she was 17 years she tried "a thousand times" to have intercourse with her boyfriend, but was unable to do so. The physician who examined her diagnosed vaginismus, which she still suffers from, although today she is able to have intercourse.

**EXERCISE:** Do not accept him until you really have desire. Caress in all other ways first. On the couch, we work on serious chronic tensions in the part of the adductor brevis muscle [one of the femur adductors], which inserts on the pubic bone. Along the way, she relates that when she was 14 years old she would lie in bed masturbating for two and a half hours at a

time and she was sure that she was the only one from school who did it. Her very strong desire was then suppressed so that she did not even feel desire during petting, until her boyfriend forced her to go and see the physician, when she was 17 years. We talk about such strong enjoyment being a great talent, which must be administered consciously. It is a great gift, but induces great resentment if it is not controlled (= condemnation as cheap, a tart etc.). We work on her shame, guilt and self-condemnation, which were very marked, and the muscles are slowly loosened. At the eighth session with the sexological procedure of acceptance through touch. It is going really well for her – everyone notices that she is well. ..Had a period last Saturday - regularly now for the third time in a row 29/5 with normal amount of menstrual bleeding instead of blood “pouring out”. Was dumped just after the last session by her boyfriend, which was not much fun. We let go of the boyfriend “with the roll” [this little letting-go technique comes from biodynamics and is really good: Hold onto a kitchen roll, think about what you want to let go, and then let go of the kitchen roll infinitely slowly]. On the couch we work on acceptance of her sex -her hand right down against the vulva, mine supportively on top. We talk about it perhaps being her purpose in life to bring joy and happiness – and that makes her completely desperate and unhappy. If she could choose a talent, it would be to be leader of large gatherings. “It’s so unfair that I did not become a man,” she says. She relates that her mother and father thought she was a boy and she was to have been called Brian. There is terribly great charge in this, which is released.

Please note the relation between her solving the problem and discovering one of her true talents here: talking to other people. What we see here is a great effect of an extremely simple technique: giving acceptance through touch. The sudden, completely spontaneous recognition that she was to have been a boy, with the serious consequences this has had for her in the form of self-condemnation and suppression of her own sex, is surprisingly common. The techniques derived from the theory of talent are often simple, direct and highly effective. The focus in this case on her acceptance of her physical sex brings her to the insight within a few hours of holistic therapy. Because of the sexual taboo, she has apparently never received this acceptance previously. We often see, as is also the case here, that menstrual periods become far more regular and there is far less bleeding, when the woman has her relationship with her genitals and her sexuality normalised. Menstrual pain also disappears in many cases.

## **Conclusion**

Everybody has a unique talent. To express our full potential we must know this essence of our self intimately. We must be genuine in our acceptance of all aspects of life, including sex. We must use all the powers of our life to bring our talent into the use in our world, in an effortless and joyful way. Effort is not needed, when the power is sufficient and the intent is clear. To be able to thrive and function in life we must know and acknowledge our true self and true human nature. A sound person is good-hearted, energetic and beautiful. A happy life is well intended, conscious and joyful. It flows (26). In our natural state of being we are talented beyond words. A human being who knows and masters his or her core talent is truly a gift to the world. The nurse or physician, who encourage the patients to realize him or herself, in an acknowledging, aware, respectful, caring and accepting way, is not only helping the patient, she or he is helping the world. Simple models and theories of existence like the theory of the

ego and the theory of talent seems to be a great help in the holistic clinic, facilitating the holistic process of healing bringing the patient back to his natural, happy, healthy, and talented state of being.

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## **Child development**

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We can identify five important needs that children have: the needs for acknowledgement, acceptance, awareness or attention, respect, and care. If these needs are not met, the child will modify himself by denying central parts of his nature in order to adjust to his parents and the situation at large.

When a child denies his talents, powers and gender or aspects hereof, he loses quality of life, ability to function, physical or mental health. The loss of ability takes the form of diminished social ability, psychosexual potency, joy, energy and fantasy while playing, as well as diminished ability to concentrate, focus and learn.

Many modifications result in a child with severely damaged self-confidence, self-worth and poor performance. A child more or less deprived of self-worth cannot enjoy, give or receive. A child deprived of emotions turns cold, rational, asocial, socially stiff, uncomfortable and in the extreme case intentionally “evil”.

When a child denies his own sex it becomes invisible, uninteresting, and vague or becomes like the opposite sex in behaviour and appearance. The general holistic solution to the vast diversity of symptoms in children with low quality of life is improving the situation for the child and giving the child the holding and support, he needs. It is very important to realise that a negative belief often has survival value to the child as it helps the child to avoid taking responsibly for problems, which really belong to the parents or other adults. Children have a fine capability of spontaneous healing, and seem to enter this process more easily than adults, given the sufficient holding.

The symptoms of the child with poor thriving are often difficult to understand, as they are caused by a complex combination of self modification in five existential dimensions. This often leads to complex medical diagnosis, giving the idea that the child is sick and without therapeutic reach, while sufficient holding could solve the problem. If holding and support of the child is not enough, the situation of the child must be carefully analysed to find other possible causes of poor quality of life, health and ability of functioning.

Education of the parent in holding is often mandatory. Most children with bad thriving can thus be helped by simple means.

## **Introduction**

We can identify five important needs that children have, like needs for acknowledgement, acceptance, awareness or attention, respect, and care (1). If these needs are not met, children will deny central parts of their nature (2, 3) in order to adjust themselves to their parents and the situation. The way a child can modify him-herself is manifold. When a child denies his/her talents, powers and gender or aspects hereof, he loses quality of life, ability to function, or physical or mental health.

The loss of ability takes the form of diminished social ability, psychosexual potency, joy, energy and fantasy while playing, as well as diminished ability to concentrate, focus and learn. Many modifications result in a child with severely damaged self-confidence, self-worth and poor performance.

A child more or less deprived of self-worth cannot enjoy, give or receive. A child deprived of emotions turns cold, rational, asocial, socially stiff, uncomfortable and in the extreme case intentionally “evil”. When a child denies his own sex it becomes invisible, uninteresting, and vague or becomes like the opposite sex in behaviour and appearance. The general holistic solution to the vast diversity of symptoms in children with low quality of life is improving the situation for the child and giving the child the holding and support, he needs.

The support, often in holistic therapy called “processing”, must be threefold: to help the child confront difficult emotions and thereby contain his own feelings, to help him understand himself and his environment, and to help him let go of negative beliefs, experiences and attitudes (4). It is very important to realise that a negative believe often has survival value to the child as it helps the child to avoid taking responsibly for problems, which really belong to the parents or other adults. Children have a fine capability of spontaneous healing, and seem to enter this process more easily than adults; when a child refuses to let go of a negative believe, it is wise to assume that this believe has survival value, and start analysing his environment to find an external reason for the negative attitude. If a child is “pushed” to change his attitude in the process this can often be experience as scolding by the child and this might lead to more negative self-modifications.

In general, therefore, holding is much more important than processing when it comes to children.

With appropriate holding and processing, giving the child at a later point in time the needed qualities of love, care and awareness, he spontaneously gets into a state of healing (4) and let go of the modifying decisions and return to his original self, reappearing as intelligent, delightful, interested, loving, playful and imaginative.

As the self modification of the child is often a very fair reaction of family situation of the child, it is often necessary to support the parents too, and to educate them in holding to accomplish a lasting improvement of the quality of life, health, and ability to function of the child. If holding and support of the child is not enough, the situation around the clock for the child must be carefully analysed to find other possible causes of poor quality of life, health and ability of functioning.



## **Loss of health, coping and quality of life in childhood**

It has been very difficult to understand disturbances of child development and the wide range of abnormalities and symptoms these children present (5). Many of the problems seem elusive and are difficult to define: lack of normal spontaneous activity, low creativity and fantasy during play, poor social skills, diminished ability to give and take, subnormal curiosity, little joy of life, faint intuitive competence, dumbness or lack of mental sharpness. Most parents accept their children as they are, explaining even a very poor quality of life by reference to the child's genes. Sometimes a child's poor quality of life evidently springs from inadequate holding by its parents. But severe developmental disturbances without any known biological or hereditary aetiology can also be found in children living in seemingly good families, with no obvious signs of violence, neglect or child abuse (6,7). These poorly adjusted children often end up as our patients in adult life, and in therapy they often find or re-discover extremely painful, traumatic events in their childhood (8). Interestingly, their parents seldom realized the subjective dimensions of horror and emotional intensity felt by their child in the traumatic events. Often the emotional pain in these events is so strong that the child finds it necessary to modify his personality to avoid the existential pain. As the patient integrates the traumas during the therapy, it becomes gradually clearer why these painful shifts in personality were necessary for the survival of the child. When the patient finally takes full responsibility for his or her own emotional pain, he or she regains the lost quality of life, health and ability to function, making the holistic therapy a worthwhile effort. The following theory and reflections are based on the case records of about 200 patients, who have been through holistic therapy that has attempted to integrate their traumas from early childhood (9,10). Half the patients came from average middle-class families. The theory of child development explains why a lack of holding causes the child to feel so much pain as to induce personality modifications in the child.

### **The need for holding**

We may assume that a child is born with certain potentials – to perceive coherently, to walk, to learn a language, and so on. The child is also equipped with a purpose in life in order to bring out these potentials. For this the child depends on its parents for about the first 15 years of his life. They must give him/her acknowledgment, attention, respect and emotional contact, bodily care, and acceptance, if the child is to have an uncomplicated and untroubled childhood.

These five fundamental needs sum up to the child's need for holding. The child needs holding, because it does not have the power to realise its purpose of life on its own. At birth, the womb's holding gives way to the parents' care. This is a difficult task, and our work with spontaneously regressive therapy (4) seems to reveal that most children acquire traumas in early childhood, because of inadequate holding (10).

As the child develops its body, feelings, mind and brain, the need for holding becomes gradually less. One day the child can stand on its own, existentially too, if the upbringing has

been successful. In the healthy womb we receive unconditional love and acknowledgement of the person we are, nutrition, protection and constant physical contact (intensive care), a well-defined space to live in (respect), emotional contact, awareness, and maybe most important, acceptance of our body and gender at the deepest and most fundamental biological level. Although as a foetus we carry strange histocompatibility genes we are not rejected, but accepted as ourselves.

The child must have all these existential needs continuously fulfilled in order to develop in a joyful and harmonious way, expressing and mastering its many talents one by one, supported by the powers of the parents. When the child has developed mind, body and feelings of his own, the holding is no longer needed.

## **Self-modification in response to lack of holding**

Unfortunately, no parents can fulfil all the needs of the child all the time. As soon as the child misses proper holding, the full expression of its purpose in life, its life mission, is jeopardized, and the child finds himself in emotional or existential pain (2). If the child judges the pain to be unbearable, he modifies himself by negative decisions that deny primary or secondary talents. Soon the child has lost some of his/her ability to love, some of the mental, emotional or physical strength, and some of the natural joy. The child continues to modify himself in a persistent search for acknowledgement, awareness, respect, care, and acceptance. The child often makes numerous decisions throughout childhood, often surprisingly imaginative. Some of these have negative wordings and some positive wordings, but both the seemingly positive and the negatively decisions are pulling the child away from his true self, the natural state of being. Depending on the content of the modifying decisions, the child can be over-active or passive, over-emotional or over-rational, dumb or bright, cheerful or dull, sexually overactive or neutral, opposite-sex in behaviour and appearance, social or antisocial, loving or hateful, etc. Learning disabilities, behavioural abnormalities, anxiety and aggression are also part of this picture. If the child denies his own I or denies the abstract you (11) – any person who is not the I -the child may turn autistic. If the child denies reality at large it may become psychotic. If the child deems the world to be bad and life in general to be impossible he/she may become depressed. If he denies all the physical power this can even turn into seriously illness and maybe even death. A system for the denials and their consequences can be found in table 1.

## **Reversing the destructive modifications of personality in children**

It is important to help the child understand that lack of holding forces the child to take negative decisions that destroys his or her genuine personality and core talents. The child has one power intact at all times and that is the power of making decisions to avoid pains and be more fit. The process of crises and modification is highly reversible.

**Table 1. The five dimensions of holding are awareness, respect, care, acceptance and acknowledgment, corresponding to the five existential dimensions: mind, feelings, body, gender and soul (wholeness) of the child. The developmental consequences of failed holding are serious compromising of quality of life, health and ability of functioning due to self-modification by the child in order to survive. The symptoms of the child with poor thriving are often difficult to understand, as they are caused by a complex combination of self-modification of the five existential dimensions. This often leads to complex medical diagnoses, giving the idea that the child is sick and without therapeutic reach; sufficient holding often solves the problem**

1. Existential Dimension	2. Holding Needed	3. Fail	4. Consequence	5. Symptom	6. Diagnosis	7. Therapy as Compensation
I. Wholeness (soul); core talent, love, I-you relationship	Unconditional love and acknowledgment of core talent/genuine self	No love, conditional love, no acknowledgment	Denial of self, resignation, suppression of talent, loss of motivation, shift to mental position (ego), going for love	Weak I, unloving personality, poor relations, numbness, no interest in other children or adults	Autistic, neurotic, psychopathic, psychotic	Unconditional love and acknowledgment of core talent/genuine self. The child must be seen as the gifted person he or she really is.  Teaching the parents  Parents into therapy
II. The powers: being, worth, enjoyment, intuition [center of body]  "Havingness" and respect [solar plexus]  Expression of self, attention, intelligence, "doingness", coherence with surrounding world [center of mind]	Attention, respect, care, mental, emotional and physical contact	Neglect, carelessness, dominance, abuse, violence	Mental disease, physical disease, poor social ability	Loss of intelligence, anger, fear, dominance, abusiveness, violence, intended evil		Awareness, respect, care, well-intentioned mental, emotional, and physical contact, acceptance  Teaching parents the five dimensions of holding  Parents into therapy
Ila. Mind	Attention in the right quality – neutral, with love, with admiration, etc.	Failed or offended mentally, scolded	Low self-esteem, compromised concentration and learning, inhibited behavior, loss of initiative, loss of intelligence	Unaware, lack of concentration, uninterested, no initiative, low imagination, doing without thinking, failures from doing	Mental disease, intelligence deficit (ID)	Awareness in the right quality – neutral, with love, with admiration, etc. Acknowledgment and acceptance  Teaching the parents  Parents into therapy
Ilb. Feelings	Respect, meeting at the "psychic" border between the two souls, the two minds, and the two bodies	Failed, dominated, abused, punished, frozen out	Emotional coldness, poor emotional intelligence, poor social functioning, missing ability to keep and hold own space and borders, evil intention	See left	Anxiety, emotional disturbances, problems with contact, intelligence deficit (ID)	Respect, meeting at the "psychic" border between the two souls, the two minds, and the two bodies, care, awareness, acceptance  Teaching the parents  Parents into therapy
Ilc. Body	Bodily care, loving touch, physical contact	Failed, violently abused or punished, no care, neglect	Feeling worthless, no enjoyment, poor intuition, bad physical centering clumsiness, passivity	Behavioral disturbances, anxiety, aggression, clumsiness, passivity, no motivation or joy of movement	Poor quality of life, poor health, poor functioning	Bodily care, loving touch, physical contact acceptance  Teaching the parents  Parents into therapy
III. Gender and sexuality	Acceptance, physical contact with intention of acceptance	Abandonment, scolding, sexual abuse, sexual neglect	Shame, escape from body, loss of interest in the other sex, general weakness, loss of joy, loss of enjoyment, no falling in love, no boy- or girlfriend	Invisibility, difficult to like, difficult to accept, not liking, not accepting, repulsive and ugly, too masculine, too feminine		Acceptance, physical contact with intention of acceptance  Teaching the parents  Parents into therapy

**Table 1. (Continued)**

1. Existential Dimension	2. Holding Needed	3. Fail	4. Consequence	5. Symptom	6. Diagnosis	7. Therapy as Compensation
Serious damage in all three dimensions: talent, power, and sex, very destructive parents					Low quality of life, poor ability to function, poor health, severe disturbances in development ID, DAMP?	Five dimensional holding of the child  Teaching parents the five dimensions of holding  Parents into therapy  Removing child from parents

Any person close to the child can help by giving the holding needed. The child has a natural drift towards healing and is just waiting to receive, what he never had and wanted ever since. So anybody with a heart and the ability to see and acknowledge the child, accept him and give awareness, respect and care can help.

And no matter how serious the developmental disturbance, the child can be helped if you can reach out and give what it needed. In the moment when you reach it, all the emotional pain, like hopelessness, anger, sadness, or fear, will surface. Allowing the child to be sad or angry or shy is essential for helping the pain out.

The negative essence of the gestalts must be confronted as in therapy with adults, but the stronger and more convincing the holding is, the less pain the child will feel. In many situations the child will reject the offer of holding from an adult. What seems to be lack of trust is a very clear intuition that it is not good to let go of the defence systems as long as they are still needed in the family.

A much more fruitful approach is to educate the parents of a child with developmental disturbances to give it the five qualities of holding that it needs. This can be done with the parents and the family together in a therapeutic session, where the physician will train the parents in seeing, touching, and meeting the child. Even some physical illness can heal as soon as the parents learn to care for, respect and see the child. It is often difficult to believe that this little, a few hours of practice in the clinic, does so much for the child. It is important to notice that you can only give the child what you can give yourself. Education and high levels of formal competence will not help a person help his child, if he does not respect himself, understand himself, accept himself or love himself. So, often the parents must go in therapy to be the parents their children need. The child is very often the thermometer of the family. When the child is happy again, the whole family has been healed.

## **A clinical example**

The theoretical arguments underlying the proposed framework are to be found elsewhere (1-4). The reason for our belief comes from very convincing examples in the clinical practice like the following case story. A girl aged 8 years with severe back pain with no organic cause at the first session. The patient had suffered severe pain in her back for two years. X-ray and scanning were completely normal. On examination very tense muscles were found in her

back. A slight pressure on the muscles provoked the well-known pain to reappear. When the patient was “met”, received care and attention (holding), she started to cry. She told spontaneously that she felt like being five years old. Support of the tense muscles in the back intensified the crying, but only in a good way. After a brief explanation the patient seemed to understand the connection between the feelings she held back and the tensions in her back causing the problems. After the session she was free of pain and happy. She was told to exercise with: “Cry baby! And do not let them stop you because you need to cry”. Exercise for the mother: Do not stop her crying. Just hold her and allow her to feel whatever she feels. At the second session the mother told that the child cried at home, even a lot! And that was a relief! Her back had improved considerably with episodes of pain only twice the last month compared to normally twice a week. This is a typical example and it is estimated that one child in five suffers from chronic pain in Denmark. The pain is not due to an organic damage. Holding gives an immediate relief. Teaching holding to the mother reduces almost immediately the back pain by a factor four. The combination of teaching the child and the parent, and demonstrating the process of holding and healing to both of them is very powerful. Later in the course the father is also thought how to give holding. Both parents were unable to give holding, hence the problem of the child.

## Conclusion

The child needs holding more than anything, because his own powers are too weak to realise its purpose without help. When the holding fails, the child adapts by modifying his own existence through taking or making decisions that transforms it into the different person the parents can see, acknowledge, accept, respect and care for. This is a highly intelligent mechanism for adaptation and survival. Unfortunately the price is that the child loses talent, power and psychosexual potency resulting in poor quality of life, poor health and low ability to function.

Fortunately, the damage that the child does to itself is reversible. It is possible, and not so difficult to take the child into the simplest kind of existential therapy and helping it heal spontaneously by giving it adequate holding: awareness of his learning and curious mind, respect for his vulnerable feelings, care for his new and innocent life, acceptance of his precious body, and acknowledgment of his magnificent and gifted soul. A much more effective and lasting strategy than to give the child holding yourself is of course to educate his parents to give the holding needed by the child. The essence of the problem is often that the parents do not take responsibility and as this is often a very sensitive issue, timing is everything when it comes to educating the parents. Sometimes this is not possible, and a negative reaction from the individual feeling of guilt in the obviously insufficient parent must be avoided, as this often makes the situation more difficult for the child. In some of these extreme cases the child has to be removed from his family in order to prevent further damage. When a child with a poor quality of life grows up it will normally turn into an adult with poor quality of life. If this adult gets the holding he or she needed as a child, in the proper therapeutic setting, the old wounds will heal [4]. So it is never too late to break the chain of misfortune running in so many families. Quality of life is our birthright, and if we cannot get a good life as children we can at least get it as adults. But many problems of our children can

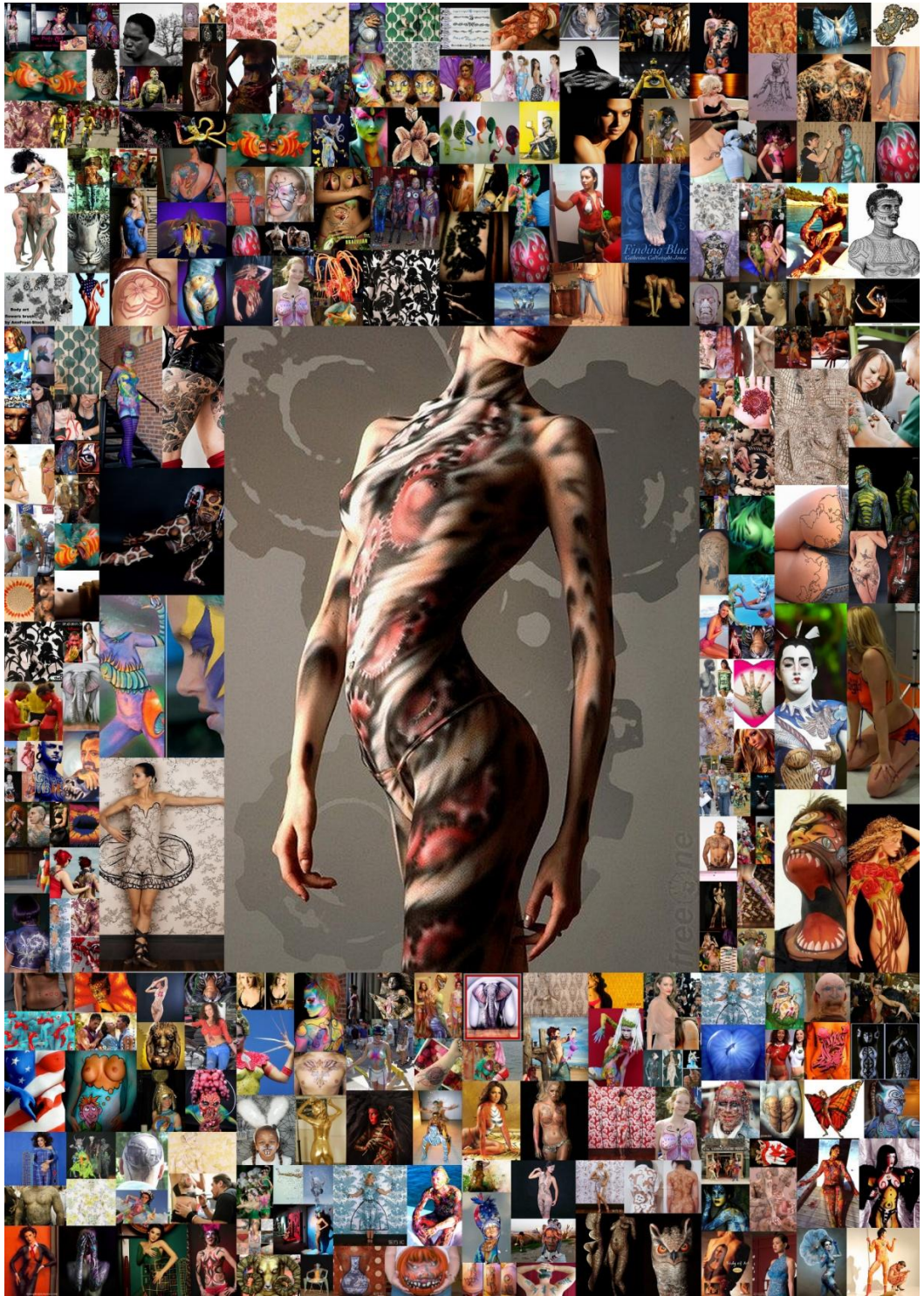
be helped today by small means. Education of the parents in holding seems mandatory when the child is not thriving. Often a few words, in an appropriate moment, can make an important difference.

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## **The evil side of man (the shadow or anti-self)**

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Something that constantly follows the concept of human existence is the concepts of good and evil. When it comes to sexuality, the concept of the animalistic self (Freud's Id) is followed by the concept of a constructive force (the *Eros*) and the corresponding concept of the destructive, evil force, the *Tanathos*. Freud postulated that human beings are dominated by these two basic instincts, *Eros* being the sexual drive or creative life force and *Tanathos* the death force or destructiveness. As we shall see (see section seven), sexuality plays an important role in holistic healing of mental disorders. Understanding the evil and self-destructive side of man is even more important when it comes to healing mental disorders.

As discussed by Katchadourian (see below) psychological analyses of sexual excitement have often revealed all kinds of evil feelings and intents, like hatred and revenge towards the woman (the mother), as the basis of sexual arousal in the most known human form. To understand man and his shadow, including all dominant and submissive, masochistic and sadistic elements of sexuality, it is necessary to understand the human evilness in such depth as not to condemn it, but instead to accept it fully.

The ideal holistic physician, psychiatrist, or sexologists can honestly say: "Nothing human is strange for me". First when we have integrated the evil are we able to penetrate into the remotest corner of the human sexuality with our consciousness and light of understanding we will be able to give our most constructive help to other people with sexual issues.

According to the life mission theory, the essence of man is his purpose of life, which comes into existence at conception. This first purpose is always positive and in support of life. This is not in accordance with the everyday experience that man also engages in evil enterprises born out of destructive intentions. This chapter presents a theory of the evil side of man, called "anti-self" (the shadow), because it mirrors the self and its purpose of life. The core of the anti-self is an evil and destructive intention just opposite the intention behind the life-mission.

The evil side of man arises when, as the life mission theory proclaims, man is denying his good, basic intention to avoid existential pain. The present theory of the anti-self claims that all the negative decision accumulated throughout the personal story, sums up to a negative or dark anti-self, as complex, multifaceted and complete as the self.

All the negative decisions taken through personal history builds this solid, negative, existential structure. The anti-self, or shadow as Carl Gustav Jung used to call it, is a precise reflection of man's basically good and constructive nature. When mapped it seems that for most or even for all the many fine talents of man, there is a corresponding evil intention and talent in the person's anti-self. As man is as evil as he is good, he can only realize his good nature and constructive talents through making ethical choices. Ethics therefore seems to be of major importance to every patient or person engaged in the noble project of personal growth.

Understanding the nature and structure of the evil side of man seems mandatory to every physician or therapist offering existential therapy to his patient.

The theory of anti-self makes it possible to treat patients with destructive behavioural patterns, who deep in their heart want to be good, by helping them let go of their evil intentions. The anti-self seems also to explain the enigma of why the human being often commits suicide. Integrating the shadow leads to often dramatic, subjective experiences, of ubiquitous light in an impersonal form, of enlightenment, or of meeting light and consciousness in a personal, universal form, known as G-d.

## **Introduction**

Man has a free will, acknowledged by philosophers of all times, and by using this will man can either do good or become engaged in evil intentions and by doing so, assumes often grotesque and inhuman forms. Numerous are the examples of such demonic beings, like Lord Dracula, Hannibal the Cannibal or Jack the Ripper. What seems to be even more scary is that we daily are facing seemingly normal men and women being caught as child molesters, criminals of war, rapists, and the like in the media. Everybody seems to have the potential of being evil, and it seems as easy to be evil as it is to be good; hence the existential choice and the free will.

History is packed with examples of people abusing their power to live out their dark side. During the Inquisition it is estimated, that between five and ten million innocent people were burned alive as witches in the name of Jesus by the ministers of Europe (1,2) and six million Jews (one million children) killed by the Germans during the Holocaust. Thus, even religious ministers, who should be the representatives of G-d, the most devoted guards of the good, cannot reproach themselves from the shadow, the dark side of man, or the evil side.

The yoke of heaven, or the abstract guiding principle of mankind, must be for everyone to know what his task is in this world and to understand the principles of the universe, or the ways of G-d, the Divine ideas and the way mankind should choose in order to achieve his purpose in life (3-6). There has been a lot of research in the nature and source of the evil motives of man. Sigmund Freud (1856-1939) explained the evil side of man as a natural force: a basic urge or instinct of moving towards death. Along with the sexual instinct this constitutes the two essential urges in man, the two only real motivators (4). Carl Gustav Jung (1875-1961), the grand student of Freud, studied the shadow intensely and he has described it maybe better than anyone (5). Jung had a complicated relationship to the shadow, since he apparently on the one hand thought that the shadow, the dark side of man, contains a substantial developing potential that is set free, when we attempt to integrate the shadow, but on the other hand believed that the shadow never can be completely eliminated or defeated.

Studies of the dynamics of therapeutic interventions with existential therapy based on the life mission theory (6-9) showed, that the dark side of man has a relatively simple structure. When the structure of the shadow is worked out and eventually mapped during therapy, it can be integrated, if the patient chooses to let go of it (8). The understanding of the general nature and structure of the dark side of man is important in this work with the patient.

If a person succeeds to re-intend his true life-mission, he will often be almost ecstatically happy in his sensation of having found himself and his inner truth. Soon after he will often feel in pain, because he reaches contact with the original situation, where he was unable to make a difference. The strong intensity of the positive emotions that is found around the purpose of life can be explained in terms of all the good that is repressed in man. The often overwhelming intensity of the life-pain explains why the mission of life is often repressed throughout life and why the evil side is often preferred for the good.

## **Self and anti-self, life purpose and anti-purpose**

According to the life mission theory (6), the life purpose is so painful in the beginning of our life that we end up denying and repressing it. We repress it by intending the opposite of the original positive intention behind our purpose of life. This very negative intention is also repressed as we assume another constructive purpose of life. Soon after, this new positive purpose is also denied by a negative intention and so forth. So during our upbringing both the positive and the negative intentions of man are repressed from the surface of consciousness, and forced into the famous, but mysterious un-consciousness.

When carefully sought for, the repressed intentions can be found as “gestalts” carrying both cognitive and emotional data, in split up parts or “pockets” of our biological existence. In body therapy these pockets are known as “blockages”: tissue areas with a strange tense quality to them. The blockages release the gestalts to the consciousness of the person, when competently contacted in the therapy. It seems that these gestalts, even after many years, still are potentially very active, and they surface as soon as the person calls upon the destructive intentions, as it can happen in a headless moment of fury or anger. The dark side then takes over and the person is for a period of time out of conscious control. He or she seems to be very present and awake, but is not really, as the gestalts has taken the person and drawn him back in time. The philosophical question is here if the person could have acted otherwise with a higher ethical standard. This is a very difficult issue giving birth to the discussion of insanity in the moment of crime, which in many countries releases the person for responsibility according to the law.

Most normal persons of our time have most of their good as well as most of their evil intentions suppressed. All the repressed, positive intentions in a person are basically pulling the same way, and are summed up to our unconscious, good side. In the same way all our repressed, negative intentions are summed up to our unconscious, evil side. In the normal person, who does not know himself very well, the good and the evil forces are mostly unconscious and of almost same size, since they quite accurately equilibrate each other (10). The unconscious man functions opportunistic, since he is shifting between the good and the evil intentions, from situation to situation, according to what is most suitable in the given

situation in relation to survival and satisfaction of needs. Such a person does not take conscious ownership of his own intentions; therefore he projects both the good and the evil to the surrounding world and its people, and therefore he cannot live his life with much strength. He is not in control of his own existence (11).

When man becomes more conscious, he acknowledges that he has to choose between the good and the evil. As he grows he must confront the basic ethical choice in life. Since the two sides, good and evil, are balancing each other, man is free to choose between the good and the evil; the choice decides which side that will consciously be lived out. The side that is not chosen by the half-conscious man, will however not disappear, but is projected to the surrounding world. A person, who chooses to be good, is in this phase of his personal growth denying his own hidden evilness, and can now only indirectly observe this denied black side, which appears as evilness and darkness around him. Unfortunately the repressed evil intensions are still highly active in man and more so if he consciously chooses the good as he unconsciously still balance the good and the evil to avoid the severe existential pain that according to the life mission theory is inevitably linked to the un-denied life purpose. Very often the “ethical person” ends up in a colourful and dramatic battle with his own shadow, unwillingly and unconsciously causing harm to self and others (12).

The conclusion is that evilness is difficult to get rid of. Even the person, who consciously chooses to be good, will often unconsciously be evil, but still this person is likely to be far less evil than the opportunist, who lives completely without ethics. The person, who on the contrary chooses the evil and denies the good, will in spite of this be unconsciously good, but still worse than the opportunistic. The hidden goodness and the internal battle between the good and the evil in man explains why the person, who in his madness chooses the evil path to solve his problems, is often not succeeding in living out his evilness, but ends up stuck in his own existential problems (13).

The person, who admits to contain positive as well as negative intensions in his unconsciousness, and strive to embrace both with his existence, can by time observe and acknowledge both sides in himself and can thereby gradually take responsibility for all aspects of his existence. This person develops and grows, and will gradually be able to let go of the negative decisions that sums up to be his dark side, his anti-self, or the shadow-side that prevents him to live out his mission in life and express his true self. Existential therapy, which makes use of this knowledge about self and anti-self, can therefore help people to integrate their dark, negative side, and express themselves fully (14).

## **The creation of the anti-self (“the shadow”)**

In our true and natural state of being, all our intentions and talents are centred round our life mission. This set of intentions is how we express our true self, but very often only a fraction of our natural power and potential is lived as we live through our ego (15-17). Our ego appears as we deny our purpose of life and our secondary purposes, one by one, with a row of negative decisions. This is continuing until only a small part of our inherent nature and talents is left operational.

Most people over 20 years of age actively deny all, or almost all, of the central aspects in their true self. This happens as a consequence of adaptation. This way everybody ends up having a white aspect of the self for every talent and good intention in life, and a corresponding black aspect for every evil intention and destructive talent. The evil outbalances the good. Man is at peace, but often bored with life, and many people of our time experience their existence as almost meaningless.

As man develops his consciousness about himself, he moves from being chaotic to being polarized, as he obtains the ability to discriminate between the good and the evil within himself. Now he sees that all the negative, black intentions are basically turned towards life, while all the positive, white intensions are supporting life. Black and white are outbalancing each other, and the dark side has annulated the purpose of life.

In other words, our black, or self-destructive, side is appearing as our dark shadow, which precisely is cowering our positive self (the “life mission flower”, except the little place that is left back without denial and which gives rise to our ego (see figure 1 and 2 in 15)). The shadow is accordingly, technically seen, the difference between our true self and our ego.

## The anatomy of the shadow

The shadow hence is a set of destructive intentions, which is organised in exactly the same way as our true self, where the set of good intentions are assembled in the life mission flower round the purpose of life (15). The centre of shadow is the intention destroying the purpose of life most directly, called the anti-life-mission or anti-life-purpose. The shadow therefore appears as a negative copy of the personality, as its black parallel (see figure 1). The purpose of establishing the shadow during our personal history was to weaken the good intentions, that couldn't be realized in early childhood and therefore became too painful.

Because the shadow has developed into a copy of the true self, it looks as if the whole shadow can be given life, if man using the power of his free will choose to adopt the negative perspective, which lies in the denial of his life mission. The new mission of life for this person is the evil anti-life-mission. Now, in the worst-case scenario, we have the serial killer in action.

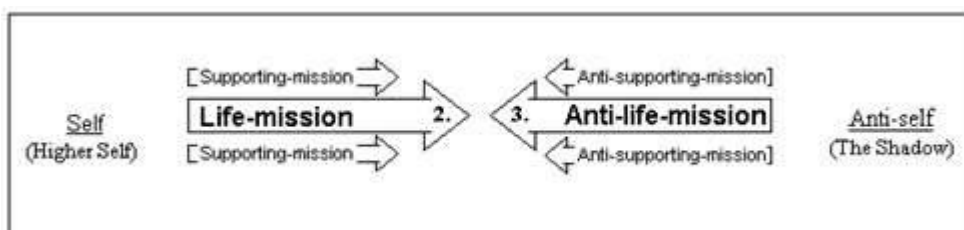


Figure 1. The life-mission as well as all the supporting missions is repressed, and man does not know himself. The repression has happened through negative anti-decisions, which outbalance the positive missions. The negative decisions are hence anti-self intentions that are organized around the most basic self-denial - the negative decisions that are here called anti-life-missions. All of these anti-self intentions exist in the parts of us that are still active, even though they are repressed; they sum up to be one self-destructive intentional structure in us, here called the anti-self.

## **An example: from “i am good” to “i am evil”**

An easy understandable example is the following: This person had as life mission the sentence “I am good”. The anti-life-purpose was the complete opposite: “I am evil”. This person used one of the two in an opportunistic way. If he chooses to be good he would repress his evil side. If he chooses to be evil, he would repress his good side. The original purpose of this destructive intention was to outbalance the intention about being good, so that the pain of not being able to do any good was eliminated early in life.

## **What makes man choose evil?**

There seems to be huge emotional advantages for the person being evil, since this identity is often far less existential painful, because you inflict somebody else the pain. This is opposite to being good, where it is often yourself, who suffers. If a person chooses consciously to be evil, all of the black shadow-flower will be this new person’s personality, to a high degree free of emotional pain (6).

A feeling of enormous power is set free in man, when the anti-mission is re-intended and all of the repressed, negative supporting-missions and destructive talents that are organized around the anti-mission, are activated. This is typically experienced as a wild roar, even ecstasy, of raw power and animalistic strength (19). Most people have a sense of reason, which makes them live in the head preventing both the extremely constructive as well as the extremely destructive perspective of life to manifest itself. The experience of intensity and energy without any life-pain can peak in a sheer delight of domination; “Satanic pleasure” seems to be the most appropriate designation for this intense joy of the dark side.

## **The dynamic of the shadow**

All the good in man comes from his purpose of life, which expresses the essence of our true self. According to the life mission theory the mission is always good, and it is stabile throughout life. It is often so repressed and suppressed in man, that it cannot be known, expressed, and lived out. The evil exists correspondingly as an anti-mission, that expresses the opposite of our profound self. The anti-self is as stable as the self, but has a destructive nature and intention.

The intentions of average people from the western world of today are not focused towards either the positive or the negative. Life is not guided neither by the mission or the anti-mission. Rather the intention is presented as an in-between of these two. This means that the ordinary, unconscious person does not have much drive, energy, and enthusiasm. His direction in life is confused. Both the good and the evil is seen as non-self, and projected on the outside world. Thus man is usually not ascribing himself any special strengths or talents, or any specific significance.

Many people of our time do see themselves as having a great potential and working in order to express this potential through personal development. Re-intending the original

mission of life and developing a more conscious relationship to existence and a clearer recognition of which one is, raises the experience of joy of life and the level of personal energy. But personal growth will also reawaken the original life pain.

A lot of people who search for themselves are therefore experiencing great difficulties. At some time everybody seemingly have to face their dark side – their own shadow. Christianity tells us the story about how Jesus got tempted in the desert by the devil promises of immense power and sovereignty, but finally chose love and the good (20,21).

When it comes to patients that are working with themselves, but seriously ill, it is especially important for the physician to know the mechanisms that are prevailing in such a situation.

Supporting the patient so that he can develop himself, might lead to the patient entering the troublesome existential phase. The optimal approach for the patient is to take responsibility for his whole being including both the light and the shadow, and at the same time strive to express his white essence, the meaning and purpose of his life. To do so he has to constantly reflect upon his own participation in all aspects of reality. As he acknowledges that he contains both good as well as evil, he must carefully scrutinize all of his intentions to see if they are constructive or destructive.

The learning position is difficult, because we are fragmented in a number of parts with almost their own life, until we have confronted and integrated our historical life pains. The fragmentation happens, because of our contradictory consciousness.

Everyone owns a huge number of black and white intentions, and we all live the black as much as the white, even though we are not aware of it. The conscious, integrated and transcendent position is a tough and challenging position that brings up as much historical life pain to the surface as we have the resources to handle. Without supply of external resources such as holding (7), the development will be slow and painful. Interestingly enough, excess of resources means that a person can move quickly forward and integrate considerable parts of repressed life pain. Hereby he will let go of a lot of negative decisions, and the shadow will become gradually smaller.

Jung did not believe that the shadow could be integrated to a situation where it disappeared, but this is exactly the classical ideal of enlightenment (5,19-21). From a theoretical point of view all life pains can be integrated until the anti-mission is gone and the fragments that are carrying the anti-mission have melted together with unity. Hence, in our sphere we still do not have the competence to process the shadow out of the world, but this is the goal that we are pursuing.

## **The four existential positions**

Because the good and the evil are balancing inside us, before we have become conscious and have developed personally, we are from the starting point absolutely free to choose our existential position. We have identified four such positions (see figure 2). The first position is indifferent in respect to our purpose of life. The second position is on the side of the purpose. The third is on the anti-purpose side. The fourth is a balanced position, which considers both the good and the evil, and integrates both, which is the fruitful path of personal development.

## 1. The unconscious, opportunistic position

This position is the most common. It is not associated with the integration of the shadow and gives consequently no personal development. We live the purposes that occur to us, but there is no connection with the (personal) purpose of life. Therefore, the position is neither along with nor against the life purpose, but is being regulated by the sum of the good and the evil in the person itself. So the whole lives its own life without any particular vigour, and the fragments carrying both the good and the evil intentions are active at a low stage and result in both good and evil things that are outside control of the person. Typically, this person will, without taking notice of it, alter between the positions good, evil, and indifferent, depending upon what best serves survival and needs fulfilment. The opportunist position means that the person cannot be trusted or counted on. He/she is subject to outer circumstances, without observing its own intentions or the behaviour resulting from these intentions. When that person wakes up and realizes that he/she has to choose between the good and the evil, he/she enters into one of the positions of the half-conscious human being (23).

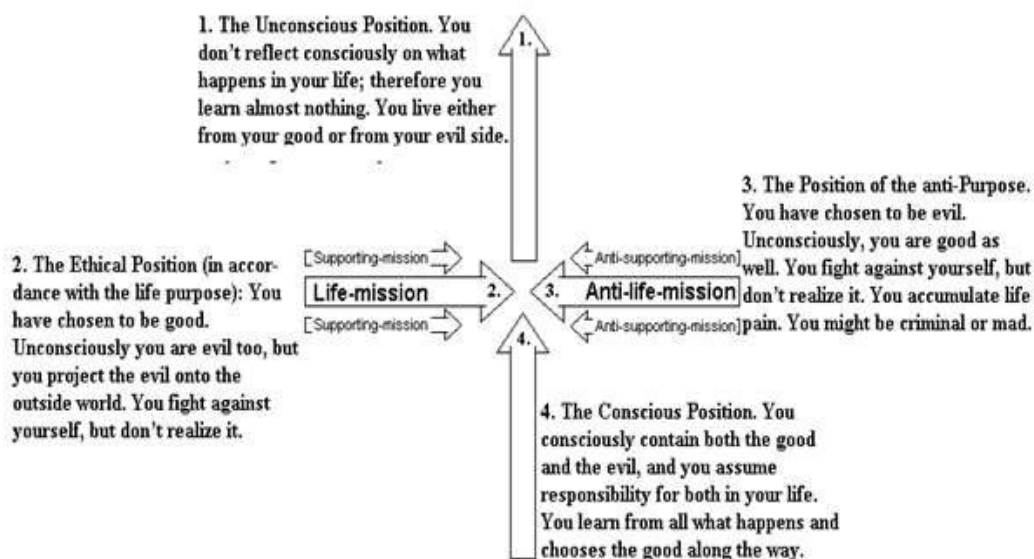


Figure 2. The human being can be unconscious and opportunistic. It can be half-conscious and choose either to be good or bad, or it can be conscious and admit both the good and the evil in itself, attempt to be good in spite of everything and learn from anything that happens.

## 2. The half-conscious, ethical (or good) position

This position is not unusual. The person knows itself well enough to be aware of what life is and places itself on the side of the life. The difficulty of boosting its own life purpose without assuming the responsibility for the shadow, is that the shadow is projected outwards so that others become evil, destructive, unsympathetic or unkind. Consequently, this position gives a polarization that pushes the evil out to the world so that the partner, the colleague or the children are now the negative ones, whereas the person itself is perpetually positive.



Interestingly enough, it seems that the account of this position is not particularly positive as the shadow is somehow invited inside in a projective manner, and it is very hard for this person to get any love affair, working relations and other relations to function.

Typically, this person is accused of being dominating, manipulating or egocentric. There is much more development in the good position than in the unconscious one, where the perpetual striving for the good fails again and again due to the inevitably accompanying shadow, which on the whole spoils any aims. However, this gives dynamics and movement, which at last leads to the person taking responsibility for the shadow, resulting in the conscious transcendent position (described below). People who choose the good are in danger of having to fight with their own shadow side (sort of shadow boxing,), and sometimes they might justify their malice from a consideration of "to return evil for evil". The shift to the half-conscious, evil position often takes place without the person actually noticing it. From this point one might return to the resigned, unconscious starting position (24).

### 3. The half-conscious, evil position

This position is rare and it has terrible consequences. It is the position of the evil father, evil mother, Satanist or deliberate criminal. When we perceive our true nature as our anti-purpose and choose to comply with it, we become completely evil persons. The good is projected onto the outside world and becomes the issue to be fought or spoiled.

If we do not know ourselves extremely well, i.e. both our good and evil sides, it can be very difficult to understand the person, who chooses the evil. However, the evil has many existential advantages. To begin with we intended the anti-purpose in order to survive and get out of excruciating life pain, and actually we survived; so as a start the evil has allowed us to keep life.

Later on in life, choosing the evil means that we do not suffer like when choosing our good, true life purpose, which is so infinitely hard to carry into effect. In fact, the person proves a delight by choosing the evil corresponding to the pain by choosing the good. So choosing the evil is rewarded by delight in the same way like choosing the good is punished by existential pain.

Obviously, this is only at the beginning as long as we are not whole. When we heal we realize that the pain that prevented us from carrying out the life purpose will be balanced by the joy of living. The pleasure of revenge is then caught up by a dreadful sorrow about hurting others, because this is in fact the opposite of what we really want, since we want to make ourselves useful to the world.

Our life purpose is always good. Choosing the evil is not a solution at sight, but can be experienced as joyful and releasing at the very moment, where we break through to the lowest existential layer. The difficulty of choosing the evil is that we create even more pain for ourselves than we already had.

This makes it still more difficult to awaken to a conscious position. Usually, people sink to a resigned, unconscious position at a lower existential stage than before choosing the evil. However, it is possible to help this person along to reach the conscious, transcendent position provided the person itself wants to be helped to understand what the whole life scene is about. A positive attitude and unconditional love can sometimes help the bad person on to the position of the conscious human being (25).

#### 4. The conscious learning position

When we clearly see that we are basically good, but unable to live our life purpose due to an awful lot of repressed life pain, we have to assume the transcendent position. We are not able to be good; we are not able to be bad. We are not able to be, but we can be conscious and learn. Right now we are not able to know ourselves. We cannot understand ourselves, but we are able to express ourselves and be alert (awake). We live consciously, but we have still no control of life. We can do our utmost well knowing that at this stage it is not good enough. The consciousness is painful and sweet at the same time. Meaningfulness is the finest sweetness, but being conscious of the powerlessness is painful.

The understanding that the way forward is the way back to life, through confrontation of the historic sufferings is animating. This is possible as an adult, but not as a child. The conscious position implies that the old life pains break out to the surface and are gradually admitted. When the comprehension is clear, a chaotic historic life scene is crystallized into one single or a few negative resolutions that can be let off now. So this life is in motion onward, is cleared, and the true life is returning slowly, without any inhibition, without any inner contrast or reluctance. So the consciously transcendent position, essentially to certify our own life, is a deep reflection of our soul, regardless of how painful it is to see the truth. This is what makes life evolve optimally (26).

One of the most difficult questions is why so few people reach the conscious learning position. The main obstacles seem to fall into two categories: inner and outer. The inner obstacle seems to be existential pain, as discussed above. The outer obstacles seem to be the need for social acceptance. A person who is learning must be honest himself, which can be hard sometimes in an environment where other people are “playing games” and not willing to make a learning effort.

This means that a person in the process about learning about him/herself is also a source for learning in his or her environment. But learning goes together with existential pain, so this person actually often involuntarily inflicts pain on the people near and dear to him. So it seems that people in the conscious, learning position need people of their own kind to socialise with. This is maybe the most severe obstacle facing the patient entering holistic existential therapy. You are entering a world of learning, of joys, meaning and suffering, where most people do not go. So you will have to face loneliness and you will have to seek new friends. It is important for the holistic physician or therapist to build networks of patients and clients in personal growth, to avoid the feeling of being completely alone and to avoid the patient to be drawn into milieus and religious sects. This would not help the person in growth and possibly also hinder the person's self-actualization in the long run. It is also very important to understand that the loneliness experienced when entering the learning process is often overwhelming, tempting the patient to choose position three (the half-conscious, evil position) instead, or even in the extreme tempting the patient to consider suicide. Often the suicidal patient is caught in between the positions two and four, two or three, or three and four.

If the holistic physician can help the patient to understand the situation from an existential and developmental perspective, the patient will realize that entering position four is to prefer to suicide, even if this position is emotionally very difficult. To die is really not the problem; the problem is to live, and to live a full and conscious life. As the Russian saying goes: “Death is easy, life is difficult”.

## **Relevance of the existential therapy**

The classical Greek virtues: beauty, goodness and truth, reflect three levels of the existence, which Kierkegaard called the esthetical, the ethical and the religious layers in man (27). Søren Aabye Kierkegaard (1813-1855) was a prolific writer in the period called the "golden age" in Denmark of intellectual and artistic activity with work in the fields of philosophy, theology, psychology, literary criticism and fiction. He was a social critique and wanted to renew Christian faith within Christendom. He is known as the "father of existentialism", but also for his critiques of Hegel and the German romantics, his contributions to the development of modernism, his literary experimentation and talents to analyse and revitalise Christian faith. He burned with the passion of a religious poet, was armed with extraordinary dialectical talent, and drew on vast resources of erudition.

In the integrative quality of life theory (28), the dimension of beauty is reflected by man's superficial layer connected with well-being and satisfaction, needs fulfilment and ability to function. The ethical layer deals with life expansion, whereas the religious layer concerns the meaning of life and a deep inner balance.

Through the theory of the anti-self, the ethical layer becomes accessible for the existential therapy. The good and the evil manifest themselves in the patient as well as in the consciousness of the therapist and the patient is temporarily able to enter into the evil valence in order to confront it, mirrored from the outside by the therapist, and from the inside by its own good side. Through this double reflection, the light of the consciousness is thrown onto the patient's dark side, which brings the historic conglomerate of negative experiences and decisions amounting to man's dark side, the anti-self or shadow, to collapse in a series of painful memory pictures, which can be belaboured subsequently and integrated one at the time, e.g. by group therapy. By this process, the patient goes from the surface, the esthetical, first to the ethical layer and then, simultaneously with the inner contrasts being admitted and transcended, onto the deepest existential layer, which Kierkegaard called the religious (27).

## **Discussion**

It connection with severe illness it is often relevant to look at the unconscious evil. When for instance one partner in a relationship is severely ill and the other is completely healthy, fit, extremely good and considerate, this couple may have an unconscious agreement that one of them carries the darkness for them both, whereas the other partner carries the light. The bright, healthy party often appears full of energy, most considerate and thoroughly devoted. At a closer analysis, the good party will at first appear dominating and later actually condemning and dissociating towards to the "evil" and ill party. Additionally, it often turns out that the apparently good has not in fact good intentions or love towards its ill partner. The bad side has been projected forth and over to the partner, who is now the intolerable and negative partner. The ill partner is not seen and met, and feels typically lonesome and unloved in spite of the healthy partner's apparent goodness and helpfulness. This loneliness and lack of mental meeting and understanding is typical of a relationship, which is dominated by shadow projections. If the ill partner becomes healthy it is necessary that both of them again assume the responsibility for both the bright and the dark sides. The process helping the patient to

become healthy results preliminarily in the healthy partner getting more "ill". The responsibility for the dark side is being divided, and the poor fellow who carried all their common darkness can now be helped to confront and integrate its own darkness (29).

When the life purpose is clearly admitted and the negative decisions, which deny it, are found and let gone, the disorder often heals up even when this should not occur according to statistics. By means of the existential therapy which manages the shadow and brings the human being to its deepest existential layer it seems thus possible to induce the spiritual arousal, which is so typical indeed in connection with the "spontaneous remissions" of, as an example cancer (30).

Confronting and integrating the human being's dark side make it also possible for people who are persuaded to be evil, to change into seeing themselves as basically good. This change implies that their evil side has no longer free occasion to expand. The justification of the negative living, by describing the human nature as basically evil, is thus dissolved and not longer possible. The noble art of life called no-mind in the eastern traditions seems to be about suspending reason but to remain good. The famous and rare state of enlightenment seems to follow total integration of the shadow.

## **Conclusion**

Everybody have a dark side, an evil shadow that mirrors all the beautiful and lovely aspect of their soul. Knowing this and taking responsibility for both good and evil allows the person to take the learning position and little by little develop their consciousness and transcend their "shadow". In doing this they integrate all their inner conflicts and let go of all their self-destructive decisions and attitudes, and so they become beautiful, good, and true.

Scientifically speaking, the "shadow" can only be examined by qualitative methods, where you apply your own consciousness to explore the consciousness of yourself and others. As it seems infinitely much easier to examine the shadow of the other person, friend, partner, client or patient, so everybody who wants to learn about his or her shadow is obliged to listen to the other, to know and understand himself. A fine way to see if what is learned in general is true is to make models and theories of the shadow and test these theories against reality. If a model or theory makes therapy easier and more successful this is a good indicator that the theory in some way or another is true. But qualitative science is as tricky as consciousness itself; in the end what makes us choose a theory and call it valid is our personal liking and ability to understand life, ourself, and our patient better from it.

As everybody seemingly owns a dark side, which makes big problems for us if not realized and integrated, we suggest that the shadow should be a theme in every course of holistic treatment. We suppose that many of the hidden resources needed to be well again are actually bound by the patents unconscious struggle with the shadow. It might be that understanding and integrating the shadow, confronting the evil, walking awake into the darkness to win over it, is the straight way to light, joy, love, self-exploration and in the end healing. Only the one, who carries the light of consciousness and conquer the darkness of lies and unconsciousness will reach the state of transcendence described by Maslow, or the state of coherence described by Antonovsky, or the state of meaning described by Frankl (6, 9, 16, 17). People who engage fully in the battle against the darkness often come to experience the

whole universe as basically made of light. This light is often ascribed as brilliantly white and divine, or even as a unity, or a person, making it possible “to meet with G-d himself”.

As this last perspective is what motivates us in our work and our lives, and what urges us to develop our precious medical science in the service of mankind, we would like to devote our final lines wholeheartedly to the divine being, or G-d. Rabbi Eleazar Ha-Kappar used to say (31): “Those who are born are destined to die; those who are dead are destined to be brought to life again, and the living is destined to be judged. It is for you to know, proclaim and be sure that he is G-d. It is said: “These words which I command you today shall be on your heart” (Deut. 6:6). This statement to keep “these words” or G-d’s commandments above our heart, mean that they supersede our own wishes and if you follow that path it should be the beginning of the redemption of mankind from bestiality and the breaking down of his egotism, the root of evil in this world (3). He is the Maker, he is the Creator, he is the Discerner, he is the Judge, he the Witness, he the Complainant and it is he who will judge. Blessed be he in whose presence there is no wrongdoing, not forgetting, nor partiality, nor taking bribes. Know that all is according to reckoning and let not your imagination persuade you that the grave is a place of refuge for you. Perforce you were formed and perforce you were born. Perforce you live, perforce you shall die and perforce you shall have to give a strict account before the Supreme King of kings, the Holy One, blessed be He”.

So whoever believes and accept the yoke of heaven will understand the transience and unimportance of this world, as well as the eternity and infinity of the world to come, where the soul will find its permanent place. This person will also understand that the eradication of evil from this world is only a hairsbreadth of difference between his dying now and dying naturally according to his normal life span (32). Rabbi Jacob made a more simple conclusion (33): “ This world is like a vestibule before the world to come. Prepare yourself that you may enter into the banquet hall”.

If you are not a religious person, you still need to deal with the good and the evil, as these poles are often highly visible in sexuality. Something that constantly follows the concept of sexuality is the concept of the animalistic self (Freud’s Id) and the concept of the evil.

As discussed by Katchadourian (34) psychological analyses of sexual excitement have often revealed all kinds of evil feelings and intents, like hatred and revenge towards the woman (the mother), as the basis of sexual arousal in the most known human form. To understand human nature, especially the human shadow that contain all the dominant and submissive, masochistic and sadistic elements of sexuality it is necessary to understand the human evilness in such depth as not to condemn it, but instead to accept it fully.

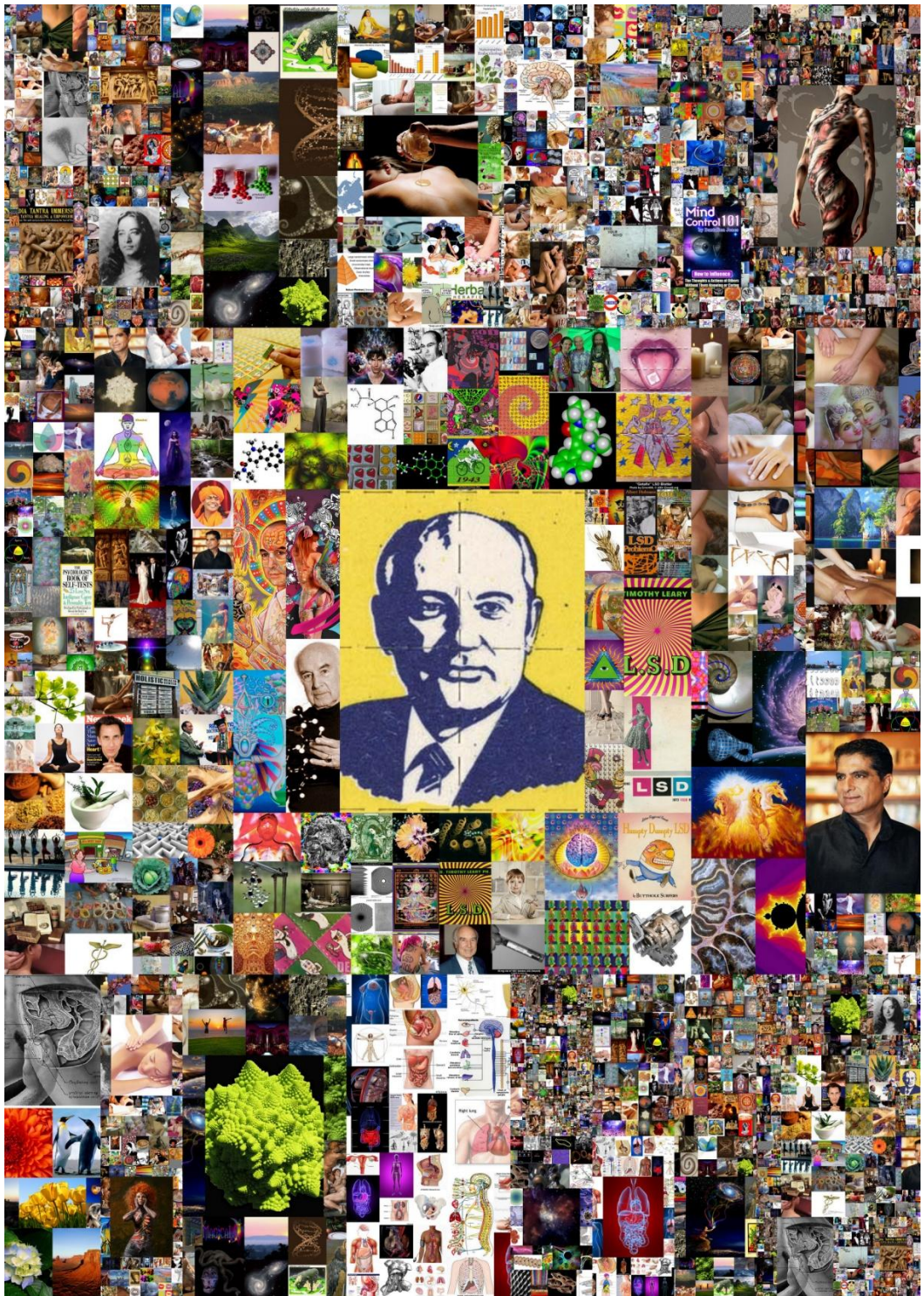
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## **The human character**

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The human character can be understood as an extension of the life mission or purpose of life and explained as the primary tool of that person to impact others and express the purpose of life. Repression of the human character make it impossible for a person to realise his personal mission in life and therefore one of the primary causes of self-repression resulting in poor quality of life, health, and ability. From Hippocrates to Hahnemann repression of physical, mental and spiritual character can be seen as the prime cause of disease, while recovery of character has been the primary intention of the treatment. Human character is in this chapter explained as an inter-subjective aspect of consciousness with the ability to directly influence the consciousness of another person.

To understand consciousness we reintroduce the seven-ray theory of consciousness explaining consciousness in accordance with a fractal ontology with a bifurcation number of seven (the numbers 4 to 10 works almost as well).

A case report on a female aged 35 years with severe hormonal disturbances, diagnosed as extremely early menopause, is presented and treated according to the theory of holistic existential healing (the holistic process theory of healing). After recovery of her character and purpose of life her quality of life dramatically improved and hormonal status normalized. We believe that the recovery of human character, and purpose of life was the central intention of Hippocrates and thus the original essence of western medicine.

Interestingly, there are strong parallels to the peyote medicine of the Native Americans, the African Sangomas, the Australian Aboriginal healers and the old Nordic medicine. The recovery of human character was also the intention of Hahnemann's homeopathy. We believe that we are at the core of consciousness-based medicine, as recovery of purpose of life and human character has been practiced as medicine in most human cultures throughout time. We believe that such recovery can help some (motivated) patients even with severe disease to survive.

### **Introduction**

In our experience every human being has a distinct character, but the human character is a deep mystery, that is not connected to anatomy or biochemistry, but directly to consciousness

and personal style of behaviour. It is often presumed that consciousness is private, but our theory of human character states the opposite and we believe that character is an aspect of consciousness, which is interpersonal and open to the experience of another person. The reason for making such a “weird” theory is that we have often experienced that patients have repressed their character and only when this repression is reversed can their purpose of life be known and realized. This opens up to the interesting perspective that our human character serves our purpose of life directly through working on the other and that repression of our character early in life to fit into our family causes severe, but reversible damage to our soul and wholeness. In the clinic, working with the holistic process of healing, we often find that the recovery of character is connected to improved quality of life, physical and mental health. We assume that this improvement can be explained by the life mission theory (1-6). Interestingly, many early physicians from Hippocrates (460-377 BCE) to Samuel Hahnemann (1755-1843, the father of homeopathy), also thought that the personality, or character of “geist” [spirit] and “gemut” [body-mind], as Hahnemann worded it, was a prime cause of disease (7).

**Table 1. Some English words used to describe human character. Some are normally considered positive other are considered to be negative qualities; interestingly all of them can be seen as genuine aspect of human character and they are thus not evil but mere tools for the soul; the intentions of the soul determines whether a dangerous or potentially negative streak is having positive or negative consequences. Often a negative quality will turn out to be a suppressed positive quality of the persons character, and in the same way a positive character can turn out to be false and created by repression of a true “negative” character, serving the soul in its mission**

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acquisitive, adaptable, admirable, adorable, aggressive, aiming, airy, amazing, ambivalent, analytic, angry, anxious, anxious, apathetic, assertive, athletic, attractive, authentic, avaricious, awful, balanced, barbarian, baroque, bitter, bitter, bizarre, blissful, bold, boyish, brainy, brave, brotherly, burdensome, calculative, calm, capable, caring, caring, cautious, celebrative, cheerful, clever, committed, compassion, compassionate, competitive, concerned, contemplating, controlling, cool, coping, corny, courageous, crazy, critical, crude, curious, dealer, decadent, deceptive, decisive, delicate, delicious, depending, depraved, depressive, deranged, desirable, desolate, spiteful, destructive, detached, different, direct, disciplined, disengaged, disgusting, distinctive, dominating, dreadful, dreamful, dreamy, dubious, dutiful, effective, eloquent, emotional, empathy, energetic, engaged, enthusiastic, envious, erotic, evil, exotic, extreme, forgiving, fragile, fragmented, frantic, free-spirited, frenzy, friendly, futile, glorifying, gluttonous, grandiose, grounded, heedless, helpful, helpless, heroic, high, honest, horny, horrifying, humorous, hyperactive, hysterical, indulge, innovative, insightful, inspiring, intense, intimidating, introspective, intrusive, intuitive, involved, irrational, isolated, jovial, joyful, kind, kinky, labile, lame, lazy, leading, liar, likable, loving, loyal, lustful, magnanimous, malicious, manipulative, megalomaniac, melancholy, misogyny, moody, mysterious, nihilistic, non-human, numb, obsessive, obstructive, opportunistic, oppressive, optimistic, opulent, outstanding, painful, panic, paralyzed, paranoid, patient, peaceful, perceptive, perfectionist, pessimistic, philanthropic, philosophical, plain, pleasant, popular, possessive, potent, powerful, pragmatic, pretentious, pride, prideful, private, productive, profound, prostitute, proud, provocative, prudent, psychic, psycho, psychotic, quiet, raging, reactive, realistic, reassured, redemptive, reflexive, relaxed, relentless, reliable, resentful, resilient, resourceful, responsive, revelatory, robotic, , robust, ruthless, sad, scary, scattered, schizoid, scornful, secretive, seductive, self deceptive, self neglecting, self-assured, self-contained, selfish, selfless, self-possessed, self-promoting, self-reliant, sensible, sensitive, serenity, shameful, sharing, sheer, shining, silent, simple, sinful, sisterly, skilful, sloppy, slothful, smart, solitary, solitude, soulful, special, speculative, spiritual, spontaneous, spooky, stable, steady, stoical, strange, strong, stubborn, stupid, sullen, supportive, suspicious, sweet, sympathetic, tempting, tenacious, tender, tentative, thoughtful, trippy, trustful, trustworthy, trusty, twisted, unconscious, unique, unusual, valiant, vengeant, violent, virtues, visionary, visionary, vulgar, warm, weird, wicked, willful, wise, wishful, worried

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The human character is an issue, which takes many words to describe (see table 1) and it has been one of the most important concepts in the human arts, from the epic and prose writings of all time to any kind of performance, from the theatre to the martial arts. Let us give a famous example from a writer (Fyodor (Mikhailovich) Dostoevsky (1821-1881) (8), who mastered the description of human character: “One of them was of medium height, about twenty – seven years old, with curly, almost black hair, and small fiery grey eyes. He had a broad, flat nose and high cheekbones; his thin lips were constantly twisting into a sort of impudent, mocking and even malicious smile; but his forehead was high and well formed and made up for the lack nobility in the lower part of his face. Especially notable was the deathly pallor of his face, which gave the young man’s whole physiognomy an exhausted look, despite his rather robust build, and at the same time suggested something passionate, to the point of suffering, which was out of harmony with his insolent and coarse smile and his sharp, self-satisfied face”.

## Character in existential philosophy

Philosophy has spent a lot of time on the subject of the human character. Let us just re-contemplate a piece of the well-known work by Jean-Paul Sartre (1905-1980) on the dramatic loss of the physical character that follows giving up personal freedom, a concept of resignation very close to the self-denial, which we see as the essential cause of the loss of quality of life, health and ability in the life mission theory (2):

“Take the example of a woman who has consented to go out with a particular man for the first time. She knows very well the intentions, which the man who is speaking to her cherishes regarding her. She knows also that it will be necessary sooner or later for her to make a decision. But she does not want to realize the urgency; she concerns herself only with what is respectful and discreet in the attitude of her companion. She does not apprehend this conduct as an attempt to achieve what we call “the first approach”; that is, she does not want to see the possibilities of temporal development, which his conduct presents. She restricts this behaviour to what is in the present; she does not wish to read in the phrases, which he addresses, to her anything other than their explicit meaning. If he says to her, “I find you so attractive!” she disarms this phrase of its sexual background; she attaches to the conversation and to the behaviour of the speaker, the immediate meanings, which she imagines as objective qualities. The man who is speaking to her appears to her sincere and respectful as the table is round or square, as the wall colouring is blue or grey. The qualities thus attached to the person she is listening to are in this way fixed in a permanence like that of things, which is no other than the projection of the strict present of the qualities into the temporal flux. This is because she does not quite know what she wants. She is profoundly aware of the desire, which she inspires, but the desire cruel and naked would humiliate and horrify her. In order to satisfy her, there must be a feeling, which is addressed wholly to her personality-that is, to her full freedom- and which would be recognition of her freedom. But at the same time this feeling must be wholly desire; that is, it must address itself to her body as object. This time then she refuses to apprehend the desire for what it is; she does not even give it a name; she recognizes it only to the extent that it transcends itself toward admiration, esteem, respect and that it is wholly absorbed in the more refined forms which it produces, to the extent of no longer figuring anymore as a sort of warmth and density. But then suppose he takes her hand. This act of her companion risks changing the situation by calling for an

immediate decision. To leave the hand there is to consent in herself to flirt, to engage herself. To withdraw it is to break the troubled and unstable harmony, which gives the hour its charm. The aim is to postpone the moment of decision as long as possible. We know what happens next; the young woman leaves her hand there, but she does not notice that she is leaving it. She does not notice because it happens by chance that she is at this moment all intellect. She draws her companion up to the most lofty regions of sentimental speculation; she speaks of life, of her life, she shows herself in her essential aspect – a personality, a consciousness. And during this time the divorce of the body from the soul is accomplished; the hand rests inert between the warm hands of her companion- neither consenting nor resisting – a thing”(Jean-Paul Sartre) (9)

It is very interesting that physical and sexual character are so closely related, that giving up one means giving up on the other also, which seems to be a crucial point of Sartre in this text. The problems of being yourself are as old as mankind itself. Loosing contact with the real self through repression of physical-sexual character has been a classical existential theme. Let us take one more example, where Sartre [10] illustrates the quality of life, lack of conscious and direction in life, after the repression of the human character is completed. Interestingly many patients live in such a diffuse state of being:

“There is a white hole in the wall, a mirror. It is a trap. I know I am going to let myself be caught in it. I have. The grey thing appears in the mirror. I go over and look at it; I can no longer get away. It is the reflection of my face. Often in these lost days I study it. I can understand nothing of this face. The faces of others have some sense, some direction. Not mine. I cannot even decide whether it is handsome or ugly. I think it is ugly because I have been told so. But it doesn’t strike me. At heart, I am not even shocked that anyone can attribute qualities of this kind to it, as if you called a clod of earth or a block of stone beautiful or ugly. My glance slowly and wearily travels over my forehead, my cheeks: it finds nothing firm, it is stranded. Obviously there are a nose, two eyes and a mouth, but none of it makes sense, there is not even a human expression. Yet Anny and Vélènes thought I looked so alive: perhaps I am too used to my face. When I was little, my Aunt Bigois told me “If you look at yourself too long in the mirror, you’ll see a monkey”. I must have looked at myself longer than that: what I see is well below the monkey, on the fringe of the vegetable world, at the level of jellyfish. It is alive, I can’t say it isn’t; but this was not the life that Anny contemplated: I see a slight tremor; I see the insipid flesh blossoming and palpitating abandon. The eyes especially are horrible seen so close. They are glassy, soft, blind, redrimmed, they look like fish scales. I lean all my weight on the porcelain ledge; I draw my face closer until it touches the mirror. The eyes, nose and mouth disappear: nothing human is left. Brown wrinkles show on each side of the feverish swelled lips, crevices, mole holes. A silky white down covers the great slopes of the cheeks, two hairs protrude from the nostrils: it is a geological embossed map. And, in spite of everything, this lunar world is familiar to me. I cannot say I recognize the details. But the whole thing gives me an impression of something seen before which stupefies me: I slip quietly off to sleep” (Jean-Paul Sartre)(10))

## Character in medicine: Understanding Hippocrates, Hahnemann and the Native American medicine

The human character has been taken into serious consideration by old physicians in the tradition of Hippocrates (11) and Hahnemann (7). The theory behind Hahnemann’s

controversial homeopathy can be interpreted as an attempt to recovery of the human character, if the character is seen as a prolongation of the “life force”, the basic intention behind the individual, which we call the purpose of life in the life mission theory (2). Looking at the “Organon of the medical art” (7) (by Hahnemann, his famous and most important book, where he established the art of homeopathy and defined both the physician, the nature and objective of medicine), we see that he understood the real cause of disease as the depression of physical constitution (= physical character, see §5.1), and the psychic and spiritual character (§5.2) (please note that Hahnemann said the character of the “Geist” = spirit and the “Gemüt” = psyche, often wrongly translated into English as “the emotional and mental character”):

- §1 The physician’s highest and only calling is to make the sick healthy, to cure, as it is called. §2 The highest ideal of cure is the rapid, gentle and permanent restoration of health; that is, the lifting and annihilation of the disease in its entire extent in the shortest, most reliable, and least disadvantageous way, according to clearly realizable (in-seeable) principles. (Compare to the square curve paradigm) (12)
- §5 It will help the physician to bring about a cure if he can find out the data of the most probable occasion of an acute disease, and the most significant factors in the entire history of a protracted wasting sickness, enabling him to find out its fundamental cause. The fundamental cause of a protracted wasting sickness mostly rests upon chronic miasm. In these investigations, the physician should take into account the patient’s: 1. discernible body constitution (especially in cases of protracted disease) (Compare physical character), 2. [spiritual,] mental and emotional character (character of the Geist and the Gemüt), 3. occupations, 4. lifestyle and habits, 5. civic and domestic relationships (relationships outside and within the home), 6. age, 7. sexual function, etc.
- §9 In the healthy human state, the spirit-like life force (autocracy) that enlivens the material organism as dynamis, governs without restriction and keeps all parts of the organism in admirable, harmonious, vital operation, as regards both feelings and functions, so that our indwelling, rational spirit can freely avail itself of this living, healthy instrument for the higher purposes of our existence.
- §10 The material organism, thought of without life force, is capable of no sensibility, no activity, no self-preservation. It derives all sensibility and produces its life functions solely by means of the immaterial wesen (the life principle, the life force) that enlivens the material organism in health and in disease.
- §11 When a person falls ill, it is initially only this spirit-like, autonomic life force (life principle), everywhere present in the organism, that is mistuned through the dynamic influence of a morbid agent inimical to life. Only the life principle, mistuned to such abnormality can impart to the organism the adverse sensations and induce in the organism the irregular functions that we call disease. The life principle is a power-wesen invisible in itself, only discernible by its effects on the organism. Therefore, its morbid mistunement only makes itself known (discernible) by manifestations of disease in feelings and functions (the only aspects of the organism accessible to the senses of the observer and medical-art practitioner). In other words, the morbid mistunement of the life principle makes itself discernible by disease

symptoms; in no other way can it make itself known. ME Life purpose Spiritual Character Mental Character Physical Character VVVVV We are connecting ..... Physical Character Mental Character Spiritual Character Life purpose YOU FIGURE 1: The purpose of life is manifested through the spiritual, mental and physical character of the person, and this character makes it possible for us to connect, communicate and influence each other.

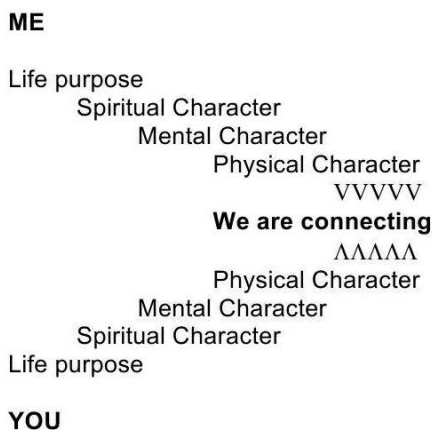


Figure 1. The purpose of life is manifested through the spiritual, mental, and physical character of the person and this character makes it possible for us to connect, communicate and influence each other.

Figure 1 shows the principle of the continuum of consciousness from the essence of the being, the purpose of life, to the energy of the physical body. Figure 2 is another version drawn (by computer) by a 35 year old female patient of the connection between the purpose of life (the core) and the spiritual, mental and physical character, the later carrying the tools for impacting the other (harshly drawn by the patient still working on sophisticating her understanding of her own character).

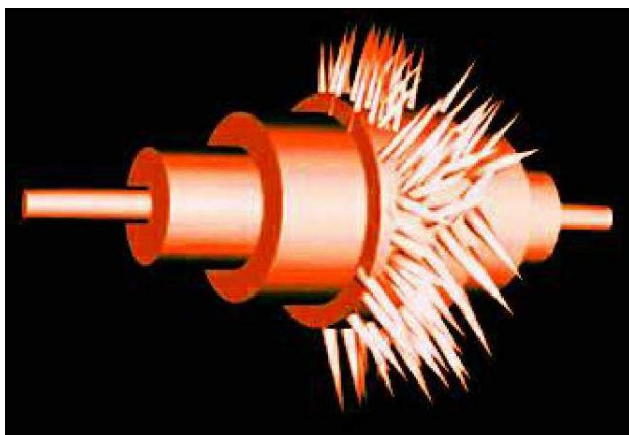


Figure 2. The human character is an extension of the life purpose. A 35-year-old female patient, architect, made this drawing using her favorite computer program. It shows in the center the purpose of life giving energy to the harsh and effective physical character through the spiritual and mental character.

A 35-year-old female patient, architect, on her favourite computer program made this drawing. It shows in the centre the purpose of life giving energy to the harsh and effective physical character through the spiritual and mental character. The physical character has been a main focus of theatre plays, art and philosophy (8,9). The spiritual character has been the main focus of the great mystics like the Greek-Armenian mystic Georgii Ivanovitch Gurdjieff (1866-1949), who mapped nine fundamental spiritual characters in his Enneagram model (13). The mental character and all the different human intelligences – often seven - has been the issue of ancient research in human potential and is the focus of much of the new age literature (14-16). The word for medicine is the same as the word for the peyote cactus in many native North American tribes (17-19). Other tribes have used the fungi of the species *Psilocybe* (containing psilocybin) and the cactus called San Pedro (*Trichocereus pachanoi*), which like peyote contains mescaline as its major active substance. The liana called ayahuasca (*Banisteriopsis caapi*) has been used in the South America, while other cultures like the old Egyptian has used an LSD like alkaloid derived from the Ergot of Rye, a plant disease caused by the fungus *Claviceps purpurea* (20). All these drugs contains psychotropic (mind-expanding) drugs or the hallucinogens, but with a very different profile from the recreational drugs in popular use among young people all over the world today (21), like ecstasy, cocaine, and amphetamine, which has a strong CNS-stimulating effect in addition to a more modest, mind-expanding quality.

The purpose of the use of the mescaline-cacti among native Americans is to bring the patient to a state of consciousness, where he can realise how he makes himself ill by not living in accordance with the deep self (17) or in our interpretation with the true human character and the purpose of life. This makes the fairly mysterious native medicine, often completely incomprehensible due to the use of massive symbolism, very difficult to understand. We are proud to say that the consciousness-based medicine we develop in these years do not use any kinds of drugs as this has not been necessary, because of highly efficient therapeutic techniques and strategies. The use of hallucinogenic drugs might be relevant in holistic medicine, when patients only have very limited time and resources or are close to dying from cancer with metastasis to lung, liver or other vital organs. Sometimes the patients ask if such drugs would be useful for them and the answer is that without a proper therapeutically setting to support the process of healing, it will probably be a waste of time and not beneficial. Sometimes the patients has been offered the drugs before in a therapeutic setting, as it often happens with travellers – some talk about “Ayahuasca tourism” - to the Amazon jungle being offered ayahuasca by the local medicine men. In such a case it can be very difficult to help a patient further integrate the experience without using the drug again and only one such unintegrated experience of maximal intensity can be quite invalidating. If a hallucinogenic drug is to be used in the advanced or experimental holistic clinic, the most tested and traditionally most successful are without doubt mescaline (17-22), psilocybin (20-23), LSD-25 (20-22,24) and ayahuasca (25). The effect of mescaline being the mildest, the easiest to control and thus the less dangerous to use in a clinical setting, while psilocybin being stronger with LSD-25 and Ayahuasca traditionally regarded as the strongest hallucinogens.

It is very important to understand why previous attempts to use the hallucinogenic drugs as medicine by western physicians have mostly failed and why the drug experience can be damaging (22). It takes a high level of expertise to lead the patient into the holistic state of healing in general and presumably an even higher expertise to do this, when the patients is on

a psychotropic drug or any other drug affecting brain activity. The steps of “loving” the patient, winning trust, getting permission to give holding, and finally letting the patient surrender into the process of holistic healing is mandatory. A psychotropic drug can never do more than facilitate a process. We have visited the seven tribes of the Round Valley of Northern California in 2004 and could not find any medicine man that was able to bring his patients in the state of holistic healing using peyote or a similar substance. We met one medicine man, which told us that the tradition of holistic healing using the Peyote was sadly lost in his tribe, after the moving of the tribe from its original habitat by the US government almost hundred years ago. With the decay of the Native American culture, the tribes are not able to keep their old medical tradition alive and the wisdom of holistic medicine accumulated through the centuries is sadly lost. To shed light on the close relationship between recovery of character (and purpose of life) and medicine let us take a closer look at the holistic process of healing.

## **The holistic process of healing**

New understanding of the holistic process of healing seems to cast light on these old procedures, which could give them a renaissance in the medical clinic. The life mission theory (1-6) states that everybody has a purpose of life and happiness comes from living out this purpose and succeeding in expressing the core talent in life. To do this, it is important to develop as a person into what is known as the natural condition, a condition where the person knows himself and uses all his efforts to achieve what is most important for him. The holistic process theory of healing (12,26-28) and the related quality of life theories (29-31) states that the return to the natural state of being is possible, whenever the person gets the resources needed for the existential healing. The resources needed are, according to the theory, in the dimensions: awareness, respect, care, acknowledgment and acceptance with support and processing in the dimensions: feeling, understanding and letting go of negative attitudes and beliefs. The preconditions for the holistic healing to take place are trust and the intention of the healing taking place. Existential healing is not a local healing of any tissue, but a healing of the wholeness of the person, making him much more resourceful, loving, and knowledgeable of himself, his own needs and wishes. In letting go of negative attitudes and beliefs the person returns to a more responsible existential position and an improved quality of life. The philosophical change of the person's healing is often a change towards preferring difficult problems and challenges, instead of avoiding difficulties in life (32-39). The person who becomes happier, and more resourceful is often also becoming more healthy and more talented and able of functioning (41,42).

## **The structure of human character and the purpose of life**

The human character is seen to be a transformation of the abstract purpose of life (2) into the spirit, mind and body of the human. The purpose of the character is to serve the purpose of



life, giving every person the unique tools and means necessary for inter-individual interaction: means for getting attention, obtaining contact and influencing the other person according to the purpose of this person's life. Figure 1 shows a presentation of the relationship between purpose of life, and the spiritual, mental and physical character of the person. Figure 2 shows in more details the structure of the character and life purpose. When we are conceiving the world we need a structure, and when the purpose is medical scientific understanding of the world, the fractal ontologies seems to have major advantages to other structures.

The fractal ontology can have bifurcations of any number with one as the trivial: there is one ray, undivided, and everything is understood as a simple product of this essential energy of the universe. Interestingly, this is the ontology of modern natural science, where everything is seen as energy, whereas most of it is bound as matter making the atoms and molecules that constitutes everything and every cell of the body. This is the position of biomedicine. The fractal ontology with the number two is the classical René Descartes (1596-1650) body-soul dualism (43) (see figure 3).

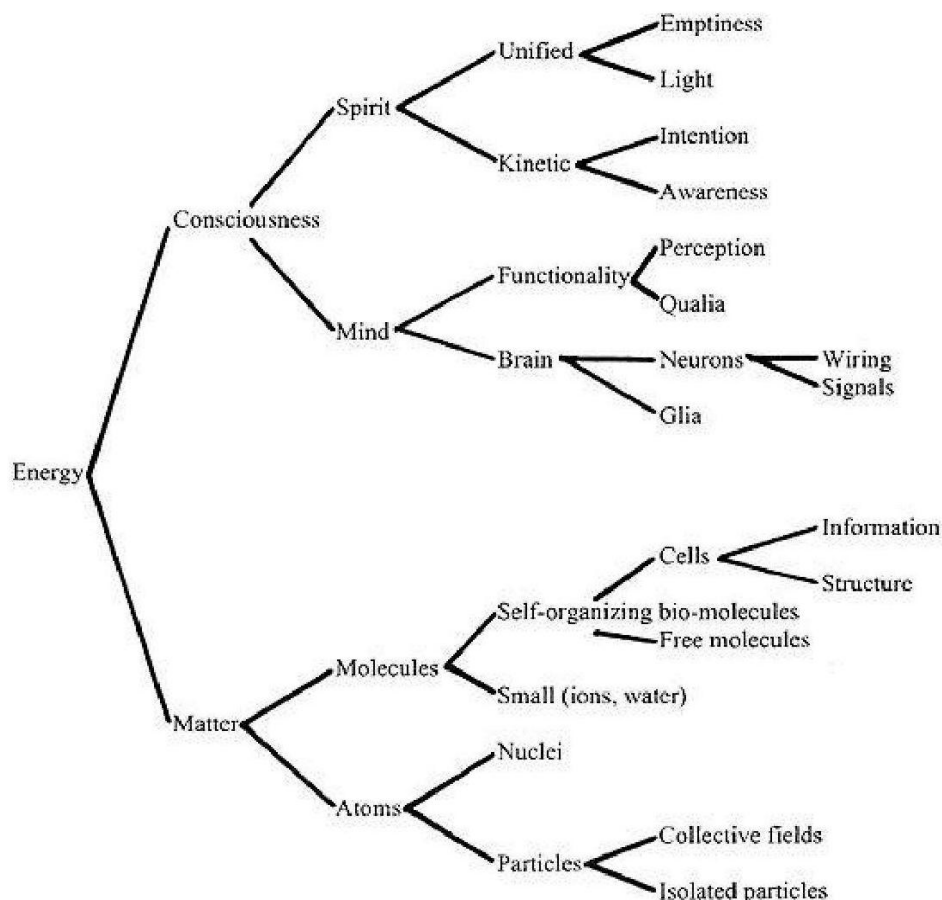


Figure 3. A fractal ontology with the bifurcation number 2. Except for the first lines, the concepts invited by this ontology are very much like the concept used by contemporary natural science. It seems that science, through time, developed towards acknowledging and integrating the concepts in the upper part of the scheme.

The interesting thing is that the more advanced the bifurcation is, the more continuous the description becomes. The two original half's of the world ends up merging seamlessly. A three-ray ontology (see Figure 4) is more complex, but the interesting thing is that the concepts invited by this structure seems to be more deep, complex and more relevant to human consciousness.

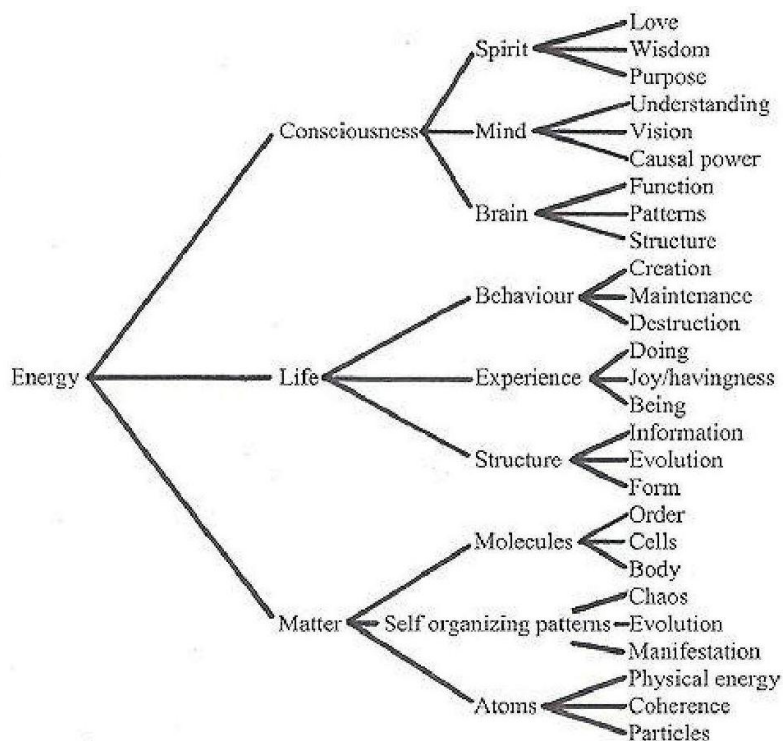


Figure 4. A fractal ontology with the bifurcation number 3. Please note that the concepts invited by a higher bifurcation number have more depth, complexity, and more appeal to the consciousness. They are more relevant to psychology and existential philosophy than to the natural sciences.

## The 7-ray theory of consciousness

Depending on the ontology and cultural setting a wide range of words are used to describe the human character (see table 1). Interestingly, some of the words are normally considered positive in civil life and negative in the martial arts, where the warrior must be powerful and destructive, while others are considered to be negative qualities in the civil life and positive in the martial arts. Interestingly all of them can be seen as genuine aspect of human character and they are thus not evil, but mere tools for the soul. The intentions of the soul and the setting determine whether a dangerous or potentially negative streak is having positive or negative consequences. Often a negative quality will turn out to be a suppressed positive quality of the person's character and in the same way a positive character can turn out to be false and created by repression of a true "negative" character, serving the soul in its mission.

We want a man – and a modern woman as well - to be kind towards us and also dangerous, powerful and protective when this is necessary.

The most convenient concepts for the use in the clinic with our patients describing their character – after having tried to use the language of astrology, Tarot (a deck of 78 picture cards that has been used for centuries to reveal hidden truths), I Ching (or "Book of Changes" is an ancient Chinese divination manual and book of wisdom) and others, seems to be the classical complex concepts from the old fractal theory of the energetic emanations of the universe (44) or “the seven (four, five, six?) rays of energy” (45) known in a number of versions and originally from both ancient India and Egypt. Interestingly, the origin of the theory seems to be the cultures medical systems and esoteric healing has sought to use them up to this day (46,47). “The seven rays” are the answer to the eternal question: what exist? In natural science, we often give the answer: physical matter only, which obviously is a kind of one-ray theory.

Descartes (43) said that what existed was body and mind – matter and consciousness, which is a two-ray theory. In our study group “Matter, Life and Consciousness” we have for years worked on a three-ray theory to show that these three aspects of the world comprise what is needed for a full scientific understanding of reality (see figure 4). The seven ray theory is highly complex compared to this, as every of the seven rays, or basic concepts, consist of a different mixture of matter and consciousness, in a spectrum from very little to very much consciousness; the following “seven elements” symbolises the different “mixtures” (with symbolic relation between consciousness/matter):

1. consciousness 1,000/1
2. spirit 100/1
3. ether 10/1
4. fire 1/1
5. air 1/10
6. fluent 1/100
7. solid 1/1,000.

Here, the classical four alchemic elements are the basis symbols, with the three old esoteric “elements” on the top. Needless to say, these elements are not to be taken literally as existent. We are taking about the qualities of the universe, when seen through the “prism of life” – in an analogy to the way light is seen as seven rays of different colours and frequencies in a glassprism. So we do not take this to be a physical ontology, but only a consciousness-related, man-related, subjective ontology. But this gives us exactly what we need to describe the character of man: a language to work with, making the most subtle nature of man possible to operationalize in the holistic clinic.

Spiritual character is the subtlest, closely connected to the most abstract aspect of the wholeness or soul (the purpose of life). Gurdjieff thought that our spiritual character is one of nine aspects of Good that we mirror in our existence (13) and this idea gave rise to his enneagram systems, today very popular with business leaders worldwide. One aspect of Good is truth, another love, a third perfection, a forth is will, a fifth is the laws of the universe, a sixth is the divine creative source, the seventh is omniscience and wealth, the eights is trust, the ninth is the divine plan according to which the whole universe unfolds. Mental character is our preferred way to deal with reality. Our theory is that early in life we are able to use all

our mental talents, but as the pressure builds up on our existence we must chose to develop and perfect one of these mental strategies to be able to survive. The mental characters are traditionally described in connection with the different levels of the body in centres (chakras) carrying their own intelligence. It seems that these levels of the body actually reflects this activity as a lack of presence in these areas of the body are often connected with a lack of the parallel talent. We believe that useful tools should be developed to assist our patients to improve their quality of life, health and ability of functioning. The scientific basis for the 7-ray theory of consciousness is an understanding of the patterns of the working brain coming from theory of fractals, chaos and complexity (see 35,36). However there is yet no theory to explain how the brain can stabilise in the different "fractal modes" corresponding to the series of poly-ray ontologies giving the different interpretations of the world, and thus the subjective universe of the human characters. The inter-subjective quality of character and consciousness is not well explained by current neurological and brain theory.

## **The seven rays in different cultures**

The most popular of the poly-ray ontologies seems to be the 7-ray ontology (45): The Hindus thus speak of the "Seven Praj patis" (Lords of Creation); the Zoroastrians of the "Seven Amesha Spentas" (Immortal Holy Ones); in Egypt they were the "Seven Mystery Gods"; in the Christian Bible we meet the seven spirits [48]: "Before the throne[of Good], seven lamps were blazing.

These are the seven spirits of God." In the Theosophical concept we find the term "Seven Planetary Chain Logoi". The seven rays are also called the seven spirits and they are responsive to the seven sacred planets and expressions of divine life upon the Earth. In the esoteric psychology, Alice E Bailey talks about the Seven Primeval Rays, or seven planets: "There are seven chief planets, the spheres of the in dwelling seven Spirits" (49). Different cultures seems to have used different numbered fractal ontologies; the medieval alchemic researchers used the number 4 [50], using the concept of the four elements, the old Chinese philosophy used the number 5 (51), the Upanishads and old Indian philosophy used the number 7 (49), the old Egyptian mysticism used the number 9 (53) and the Kabbalah or Jewish mysticism used the number 10.

In the Jewish Kabbalah there are 10 rays called the "Ten Sephiroth" (54,55) and this system is often said to be more complex and thus more difficult to learn and understand than many of the other esoteric systems.

Strangely, the higher number the more complex and incomprehensible – the more mystic and intuitive – is the philosophy. It seems that the lower the number, the more materialistic the ontology and the higher the number the more spiritual. A high-numbered ontology seems to invite concepts and structures close to the inner nature of our consciousness. We chose a medium range complex ontology for our work, a 7-ray ontology, which makes a good and not too complex theory for human consciousness.

## The description of the human character

As these concepts are used here to describe fundamental qualities of consciousness, it is important to understand the rays symbolically. The 7 rays are hardly the ontological description anyone would use in modern natural science. But look how nicely it gives us the fundamental concepts of human character (see table 2).

**Table 2. The mjr Spiritual, Mental and Physical Characters**

Ray of Energy	→	7	6	5
↓		Spirit [13]	Mind	Body [56]
7	Consciousness	Truth, perfection	Understanding	Intelligence
6	Spirit	Devine plan, do	Vision	Kinetics/eccentric
5	Ether	Will	Power/essence	Electric/danger
4	Fire	Love	Heart*	Charm/warm
3	Air	Trust, have	Relations	Humor/light
2	Fluent	Omniscience, be	Alignment	Symmetry/beauty
1	Solid	Source, law	Integrity	Solid/physical

\*Can be further divided[57]: inspiration (ray 6), insight (ray 2), integration (ray 1).

**Table 3. The Subtypes of the Human Physical Character**

RAY	1	2	3	4	5	6	7
	Solid (Sextype) [56]	Fluent (Symmetric, Beauty) [56]	Air (Light, Humor) [56]	Charm (Warm) [56]	Electric (Danger) [56]	Kinetic (Eccentric) [56]	Intelligence
7	Glittering (diamond)	Royal	Clown	Suave	Overwhelming	Arrogant	Wise
6	Exotic	Aloof	Ironic	Easy going	Psycho	Unpredictable	Brain
5	Ethereal	Romantic	Zinger	Elegant	Threatening	Sly, wacky	Wit
4	Shy	Magical	Cynical	Graceful	Killer	Subtle	Authority
3	Cuddle	Playful	Cocky	Hip	Scary	Spacey	Experimental
2	Sexy/ steamy	Innocent	Neurotic	Slick	Smoldering	Bold	Enigmatic
1	Sultry	Natural	Nerd	Earthy	Methodical	Awkward	Sophisticated

\*The words are only examples.

## Identifying human character in the clinic

It takes quite a while to be so accustomed to the categories of spirit, mind and body, that the qualities are discriminated without problems by the holistic physician.

Actually, it is often quite easy to recognize them, when the patient acknowledges them in him- or herself. But when the characteristics are repressed be the patient modifying his own character by intending the opposite and thus annihilating the original character as a strategy

for coping and survival, it often turns complicated. What is often left of the human character is only a symptom of physical, mental or spiritual disease:

True Character (Physical Type, Five Subtypes)	False Character (Many Variations)	Symptom
Arrogant	Kind	Weak
Intelligent	Stupid	Dull
Sexy	Cheep	Ugly
Sultry	Nursing	Gone, disappeared
Steamy	Clammy	Asexual
Killer	Nice	Dead
Scary	Unimportant	Depressed
Smoldering	Hot	Annoying
Methodical	Messy	Weird

So here is an example: you see a seemingly very nice patient, who is giving you the feeling that he is completely dead inside. You realise that he hides something and when you dig into this strange, messed-up area of the patient’s personality and existence, it turns out that he is a real killer (like the great actor Jack Nicholson), but this is repressed. The “killer” character is a beautiful, powerful personal quality, when you take it as strength or as something that helps you fulfil your purpose of life. It is very important not to confuse character with intent, as people often do. Early in life this patient had parents, who could not see the positive and valuable in their son being “a killer”, so they made him repress this vital characteristic and changed him to be “nice”, to fit into the family and receive the love and acceptance he badly needed for his survival. And ever since he had been more or less dead, not being able to unfold his fine character, his finest social tool, and thus never having the impact on others necessary for success.

**Recovering human character  
in the holistic clinic**

To put word on the character of the patient is a delicate matter. If the physician uses the wrong word or mistakes a suppressed character for being the real, he can do serious harm to his client. The work with character must therefore be done in a dialog, with the client having the last word on the matter. The physician must challenge the patient when he or she feels that something is not right or completely clear and must be brutally honest, but as none of us are pure we can and will make mistakes and there must be made room for that, continuously stating our own limitations to the patient. On the couch, the patient can be helped concentrating on her self, spirit, mind, and body, contemplating and reconsidering her deep nature and character. A fine thing to do is to make the patients find out on his or her own, as a home exercise, what the true character is, spiritually, mentally, and physically and discussing it afterwards in the clinic, which often bring about huge revelations.

The following case story is about a young woman who had completely lost her touch and connections with her deep self. She had turned into something very different and much less appealing than her true character. The case story illustrates how deeply our life, body and whole physiology is influenced by the suppression of our character and how efficient the existential healing is. The healing will be on the physical, mental and spiritual level, when the patient finally recovers her character. The theories taught to the patient are the theories of existence in the life mission theory series (1-6). The techniques are described in the book on consciousness-based medicine (59) and a series of papers on clinical holistic medicine (60-68). In the following case the patient is treated in accordance with the holistic process theory of healing (27) with a focus on recovering the character and purpose of life. Only after 11 holistic sessions was she able to see who she really is and in this awakening she recovered her character – and her health.

## **Case study**

Female, 36 years, menopause too soon, existential problems. Holistic session 1: Menstrual problems for the past two years and the gynaecologist believed it to be a hormonal disorder. Gynaecologist found a large cyst at left ovary, which had disappeared a year later. Menstruation always 21+6-7, but last years only 20 days and over the past year from 19 days to 18-17 days. Menstruation absent for the past 5 weeks. Gynaecologist made the diagnosis/ early menopause/ FSH at 72, oestrogen: immeasurable values. Caesarean section in 1994, no sequelae. Socially: university degree, social education. Work as a consultant and project manager at IT company; usually manager for about 10 employees, customer care, etc. She also does sales. Hard working and called “The Corporate bitch”, “Stalin” etc., because she is tough, efficient and controlling. “I never thought of myself as very feminine,” patient says. Suspicion: Early decision: “I am a boy”. Partner is big and strong, but very sweet and soft—feminine? Objectively: Extremely well-functioning and fast. Appears feminine in a masculine way, very sweet and thoughtful, cries when we talk about how she really feels. “I don't feel very well right now,” she says, and “it's a fight [to live]”. She adds: “It feels almost liberating to have reached menopause.” She appears invulnerable; I feel that she in her natural state would be far more vulnerable. /Masculinisation/ We talked about alienation and the purpose of life theory, including subtalents. She does not seem very introspective. Exercise: be vulnerable and sensitive. Every time you feel an emotion, stop and feel it. Every time you get hurt, stop and feel hurt instead of acting on your impulse. New appointment in one week

Holistic session 2: Has been doing a lot of thinking since the last session. Considers quitting her job. Realizes that she has pushed herself way too hard. Her period returned last Friday. It felt like real menstruation with lots of cramps. Realized that she spends perhaps 95% of her life energy at work. Told her colleagues that she has doubts about her future job function and she was offered partnership. Plans to report sick for 14 days due to stress. We talk about the inner garbage bin and about developing oneself to be oneself. Wants to set up a therapy contract and make a plan of development and treatment. We will do that next time.

Holistic session 3: We talk about the dimensions of talent, power and gender — about re-establishing the natural condition (4). “Men are wimps”—an example of negative essence regarding gender. We plan the phases of the treatment: First trust, then processing. It will take

approx. 6 months. Rosen method therapy is an option, acupuncture is another. Is it possible to work with her body? New appointment in 14 days. Holistic session 4: Bleeding occurred too early after last period (+15/16 days) and too short (3 days); period was normal, but then disappeared. Partner has suffered from erysipelas for 14 days, is rather ill. Patient does not see any connection. We work on the couch with closeness and intimacy; she says she likes to be dominated sexually. We talk about her "prostitute" quality—that she acts instrumentally and not lovingly with other people; "you" has become "it". The patient prefers to use the language of the chakras; we talk about how she is present in her root chakra[first ray], solar plexus[third ray], throat- [fifth ray]and perhaps crown chakras[seventh ray], less in the third eye [sixth ray] and only a little bit in the second Chakra (hara centre) [second ray]. I hold my hands over her uterus, it is as if she is not present here. She cries a little, when we talk about her having to become human and have a life. NOTE: This patient will not remove her boots, when she is lying on the couch; she wears small underwear and boots, which gives her a necessary sense of feeling safe. During the session she processes a lot of embarrassment and shame that she will not acknowledge. EXERCISE: When you feel something, stay in the emotion and make it as strong as you can. WARNING: Emotionally, you may become rather unstable. New appointment in 14 days.

Holistic session 5: Went to see her gynaecologist on and FSH has stabilized from 71 to 2.3, so she is no longer in menopause. He wondered whether the blood specimens had been swapped. I ask for a copy of her gynaecologist report. She will consider retrieving it for me. We discuss her further development; she can continue here for life purpose processing. We discuss a strategy: when she is present in mind and body she can conquer feelings in her heart and the door to her soul will probably open. During this session we happen to hurt each other and we have a good talk about vulnerability and the purpose of being alive, as it is possible to get hurt. Holistic session 6: She feels better, but unstable. She feels very sad and sees herself as being destructive when considering getting a new boyfriend; she feels that her old relationship no longer gives her what she needs. We talk about the old having to be torn down, before the new can be built. She had a rash, which she felt ashamed of, that is why she wanted to keep on her boots on the couch. On the couch we work with the fact that "she often has mental blocks". We discuss the two layers in her—a false and superfluous one, and a true and deep one; when I reach the limit between the two layers, she twists her existence and falls into a mental block. Her body and stomach feel like overcooked chicken meat. We discuss why: because she is not well connected inside. We discuss orgasmic potency—she could become more sexual. I think she looks lovely today and that everything is progressing very nicely for her.

Holistic session 7: Went to her gynaecologist, she has to bring me the report. The numbers are irregular, her period is still unstable, the mucous membrane is not quite thick enough. She is ovulating; blood work confirms this. She is a bit hyper. She still works way too much—50 hours per week—doing intellectual concept development. She is 80% in her head and 20% in her stomach and her uterus cannot function under those circumstances; that is how I see it. She does not seem to really love her new boyfriend; she likes someone else, but she does not really love him either. "It's been years since I really loved a man," she says. We discuss her values, and I make her say: "Sex is not important. Love is not important. Power is important (money, control, speed, etc)". She started attending a course in "Corporate NLP"; I advise her to stop. She does not need more mental material. On the couch we work with acceptance by touching her abdomen. We continue down to her pubis. Her uterus feels



"cold" and rejected. I am slightly frustrated by the fact that her intuition regarding her needs and her situation is so weak. EXERCISE: What is your purpose of life? Do (?): Is love important to you? Describe on 1 page, letter size, what love is to you. Do (?): Read "The Prophet" by Kahlil Gibran. New appointment in 14 days. We need to consider a gynaecological examination.

Holistic session 8: Patient brings her medical report. Her gynaecologist writes before start of my treatment: "Gonadotrope hormones show manifest climacteric values; it indeed looks like climacterium praecox"; and now: "Apparently reversed to spontaneous cycle." She tells me she has become fond of another man and that she no longer feels like being with her boyfriend sexually. She is not leaving him, though, and will not tell him the truth, because the relationship gives her the following advantages: safety, he is nice to be with and patient with her—a friend! She gets turned on by someone else. She tells me that she was sexually active with a girlfriend at seven years and that her father discovered them and took a picture "to remember this day of shame".

EXERCISE: What is your purpose of life? She did her homework. She brings lots of love and feelings. Is this what life is all about? "I can't even sense that I have a purpose in life!" I humbly ask her to search one more time. EXERCISE: Is love important to you? Yes; "Love is more important than power." Describe on 1 page, letter size, what love is to you.

Holistic session 9: She is doing great. She broke up with her boyfriend, found a new and very nice 35-year old man who wants to settle down and she has become much happier and lovelier. "Stupid and lovely," I say. She does not like that. But she really has become so. Her words are far apart, and she has begun to pronounce them as a "stupid blonde". On the couch we work with her stomach and the fear she needs to feel. EXERCISE: Be slow, stupid, lovely and afraid. Breathe all the way down your stomach, all the way to the bottom of your pelvis and the opening of your vagina. EXERCISE: Try to be receptively sexual; feel without trying too hard; the orgasm should occur in the centre of the pelvis.

Holistic session 10: Has trouble standing her job. Went to her gynaecologist again for more blood work, because she had irregular periods after meeting her new boyfriend. Silly girl. "What do you want to do with that?" I ask. She just acts silly. We have talked about her only working 30 hours per week, because otherwise she cannot live her purpose fully. Her purpose has to do with being very feminine and very sweet. "I am sweet and lovely," I ask her to say, but she says: "I am evil and manipulating". She says "I am sweet and lovely" 100 times and gradually understand the meaning; she cries a little, but still wants to be the corporate bitch. That is what the job takes. She is a project manager. EXERCISE: Spiritually: Management should come from the sweet and lovely aspect of your personality. Sweet like honey, lovely as the most beautiful music. Bodily: Determined, efficient, powerful bitch. Music. Mentally: 3. Eye—sharp and confronting like hell.

Holistic session 11: Finished at the gynaecologist, she was measured again (hormone number is at 31), this means she has been ovulating (the min. limit is 20). Period is stable at +21 days. She is confused and sad and needs a plan. She is annoyed with her new boyfriend, who is extremely boring. The theory of character is discussed and we reach the following: Purpose of life: I love life (1st try).

Spiritual character: Mastering the laws of the world (with "will" + "source"). Mental character: Alignment, connection. Physical character: Water/Beauty (symmetry, balance); charming, romantic, ivory, bold. EXERCISE: Live your character fully: I love life—

everything about it!!!! Use your character to do it! EXCERCISE: Read the book by Maitri: The Spiritual Dimension of the Enneagram (13).

## **Discussion**

Character is not a term commonly used in science and social science literature. The reason for using this term is the unique inter-subjective aspect of the human being known from the arts, theatre and the grand epic literature of the world cultures. It seems thus that character is an important aspect of life in need of a scientific exploration. The presented theory integrates a vast number of pre-scientific and psycho-analytically inspired theories, where the idea of repression of the character into the subconscious is central in all the life mission theories (1-6) and the theory of holistic healing (27,28,60-66). The disadvantage of this “Freudian” flavour is a feeling of mystery, as it really is difficult to understand the mechanistic and neurological principles according to which gestalts can be buried in our unconsciousness. But however mysterious from a natural science point of view, the unconscious as well as memory and consciousness is a subjective as well as a clinical reality.

Our attempt in this chapter has been to map the aspects of the human character relevant for the holistic clinic. As this is a new area of research, we do not conceive the presented tables as final, on the contrary we expect to accumulate experience and refine our scheme and our clinical tools in the future. From our clinical experience with several hundred patients working on recovering their character we find that this work has excellent therapeutic value. It might actually in many cases be the most efficient way to rehabilitation and general recovery, because our purpose of life is so intimately connected to our character, that when we recover our character it is almost inevitable that we will understand our true nature and personal mission of life in the end.

The problem of helping the patient to realise his or her character is important and not elegantly solved. In the clinic the identification of the character is done by agreement between the therapist and the client, but often the acceptance of one character leads to the discovery of a new layer, hidden behind the first, so the process is often repetitive and lengthy. It is very important to underline that character can be mentally projected, so the therapist must be in intensive dialog with his patient and only the full healing of the patient in all aspects of health and quality of life is the final proof of a job well done. We also believe that this is connected to the revelation of the purpose of life (the life mission). Holistic medicine using the theory of character is thus only an extension of existential therapy. It is very much like a simple riddle: This car has huge, broad back tires, small front tires, a very strong motor and a little house where you can hide from bad weather – what kind of car is it? Oh, that must be a tractor meant for agriculture. When you know the characteristics, you can easily get the idea of its purpose also. On the other hand: if you cannot see the vehicle, it might be fairly difficult to guess what it is meant for. Therefore knowing the meaning of life, living our purpose, using all our gifts and talents are what we are meant to do, this is what makes us truly sound and happy.

The recovery of purpose of life and human character has not only been a subject of the western medicine. Interestingly, there are strong parallels to the medicine of the Native Americans (69), the African Sangomas (70), the Australian Aboriginal healers (71) and the

old Nordic medicine (72). We believe that we now are at the fundamental core of consciousness-based medicine, since recovery of purpose of life and human character has been practiced as medicine universally. It is very important not to ignore the efficiency of manual medicine and biomedicine when working with consciousness-oriented medicine. Every patient must be examined and diagnosed according to best medical practice, so all treatment alternatives are found and presented to the patient, so the patient together with the physician can find the best and most appropriate treatment plan. It is crucial that a consciousness-oriented treatment not become a hindrance to life-saving surgery or other well documented procedures, which with a high certainty can help the patient. On the other hand a holistic treatment will ensure the focus of the patient to learn from the disease and improve the quality of life, so the art of the multiparadigmatic physician (62) is really to balance the different methods in the best interest of the patient. The physician must follow his instinct with every patient and the patient must be fully informed to give his or her consent to the proposed combination of examination and treatments.

As holistic medicine often is administered to chronic patients without much hope for cure by bio-medicine that has failed to cure them already, the bio-medically oriented physicians must have some understanding for the patients giving their trust and hope in the holistic treatment, even if this can mean that the patients are not living as long as they could when using all the facilities of a modern biomedical hospital unit. Quality of life is not just about survival, but also about fighting for life in the personal way one finds it right to fight it. This brings us to the necessary remarks on ethics. Holistic medicine needs more than manual and biomedicine ethics to succeed. We believe that only when the physician is working with his heart using the 4th ray and giving his patient his full support and unselfish service will the holistic medicine work. When the holistic physician can do this, he can work with all the parts and all the rays of the patients – all aspects of the patients life, the consciousness, the physicality of the body, the sexuality, the organs of the body, the most intimate emotions, the deepest confidentiality, the love, the hope and the belief of the patient. If the physician does not come solely from his heart, with the intention of curing as the only intention regarding this patient, the patients will feel insecure, lack trust, maybe even feel abused or let down and the holistic treatment will most likely fail to bring the patient into the state of holistic healing and cure. Loving the patient is a prerequisite, an absolute condition, for making the holistic medicine work. An interesting aspect of the theory of character is that it seems to explain the practice of homeopathy. The patient's consciousness is guided towards the fundamental repression of the physical, mental and spiritual character.

The homeopathic remedies, which we believe to be sheer placebo preparations has the important aspect of keeping the patient's consciousness focused on the symptoms and the repressed character, helping the patient to feel deeply into the problem, understand the dynamic of it on an emotional level and finally letting go of the negative beliefs creating the disease.

Finally let us discuss some of the many pitfalls of the holistic medicine, especially when taking it into the field of inter-subjectivity and human character. The most problematic side of doing this is that we lose the scientific clarity, which we have worked so hard to obtain in our science. In a way we tried to clear everything up just by ending in a new mystery. One other difficulty is that using theories of this level of complexity makes understanding, practicing and teaching holistic medicine difficult and complicated. The risks of misjudgements and projections become substantial with the theory of character. Another problem is that using

such a theory can give the patient a feeling of the physician possessing “expert knowledge”, which creates a distance and a hindrance in holistic medicine, where intimacy and trust is a must. Finally such theories can invite therapists with unclear minds to justify their lack of insight and understanding, refereeing to the inherent mysterious nature and qualities of consciousness. All these pitfalls must be avoided at all cost for holistic medicine to be truly helpful to the patient.

## **Conclusion**

We have presented a theory of the human character and the purpose of life and explained the relevance to existential healing. We have suggested a scheme of the major human characters for use in the clinic, but the qualities listed are not physical or objective qualities of man, instead it is quite the opposite: highly subjective qualities directly connected to the consciousness and purpose of life of the person. It seems that our purpose of life can only be realised if we acknowledge our own spiritual, mental and physical character; recovering human character seems therefore to be of major importance in the clinical holistic medicine. We believe that quality of life, physical and mental health and general ability of functioning can be radically increased when the patient recover their character and understand their purpose of life by living accordingly. Now we need research in this field to document the efficiency on patients with a number of different diseases, not helped much by other kinds of treatment, biomedical, manual and alternative.

We believe the concept of recovery of character to be one of the important aspects of Hippocrates’ medicine, reused by Hahnemann in his homeopathy. We hope when developed this upgrade of the holistic medicine can be helpful to support the immune system of HIV patients (73) and to help inducing spontaneous remissions of cancer (73,74) and other diseases (60-68,75-78). We strongly encourage governments and foundations to support this research in holistic medicine with the necessary funding. We also would like to invite the medical community to a long-term cooperation, solving the huge problems of holistic medicine (26).

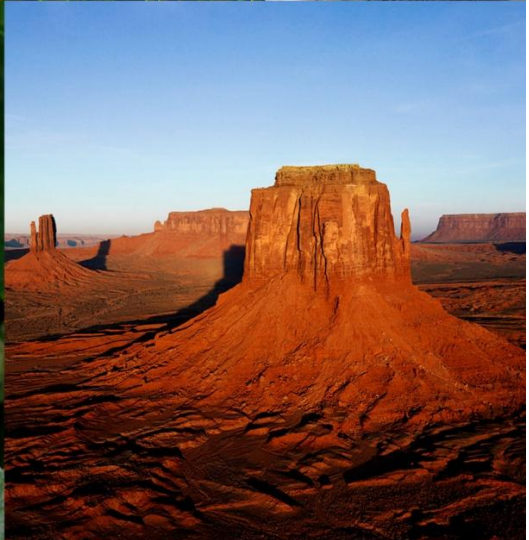
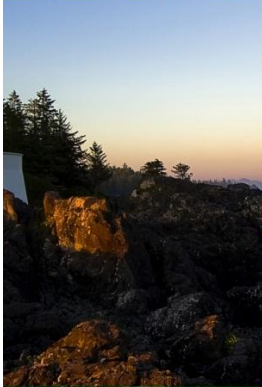
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## **Existential coherence**

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A theoretical framework of existential coherence is presented explaining how health, quality of life (QOL) and ability of functioning were originally created and developed to rehabilitate human life from an existential perspective. The theory is inspired by the work of Aaron Antonovsky and explains our surprising recent empirical findings, that QOL, health and ability primarily are determined by our consciousness. The theory is a matrix of nine key elements in five layers: 1) coherence, 2) purpose and talent 3) consciousness, love and physicality/sexuality, 4) light and joy, and 5) QOL/meaning of life. The layer above causes the layer below, with the layer of QOL again feeding the fundamental layer of coherence.

The model holds the person responsible for his own degree of reality, happiness and being present. The model implies that a person by taking responsibility in all nine “dimensions” of life can improve and develop health, ability of functioning, all aspects of QOL and meaning of life. The theory of existential coherence integrates a wide range of QOL theories from Jung and Maslow to Frankl and Wilber. It is a nine-ray theory in accordance with Gurjieff’s enneagram and the old Indian chakra system. It can be used in the holistic medical clinic and in existential coaching. Love is in the centre of the model and rehabilitating of love in its broadest sense is accordingly the essence of holistic medicine. To know yourself, your purpose of life (life mission) and talents by taking these into full use and become coherent with life inside and reality outside is what human life is essentially about. The new model has been developed to integrate the existing knowledge in the complex field of holistic medicine. Its strength is that it empowers the holistic physician to treat the patient with even severe diseases and can also be used for existential rehabilitation, holistic psychiatry and sexology. Its major weakness is that it turns holistic medicine more into an art than into a science, because the physician must master intent, which is a poorly understood dimension of existence.

### **Introduction**

We have recently found that health and ability of functioning, in private as well as in our professional life, primarily seems to be determined by our own consciousness (1-5). This was a surprising finding, as most social and medical researchers have tended to believe that DNA

with other physical and chemical aspects is what determines the core values of man. The conclusion that consciousness is of major importance has led us to deep reflections on the nature of human life and existence. This does not rule out the important role of a biological mechanism in many diseases, since defect genes and DNA still impact the human being and create problems of health and ability, which often needs more mechanical than consciousness oriented solutions. On the other hand most diseases seems to be strongly influenced by both lifestyle and consciousness, i.e. many types of cancer, autoimmune diseases like diabetes, arthritis and most forms of chronic pains. Most existential, mental and sexual disturbances also seem connected to psychosocial dimensions like traumatic life events and lifestyle (1-5). In relation to all these sufferings we hope that the suggested model will empower the holistic physician by integrating most of the existing knowledge on holistic medicine, personal development and quality of life and making it immediately useful in the clinic. From an existential perspective life is a flow (compare the concept of modern physics that everything is (in) a flux of energy and information) and when fully alive we are in flow (6).

Our life is a part of the grand web of life on this planet and we participate through what we take in from the world and what we put out in it, on all levels from matter to consciousness. We perceive, we process and find meaning (7) and this way we impact the world through our being, our words and our actions. The most prominent researcher in the field of the coherence of life was the late medical sociologist Aaron Antonovsky (1923-1994) from Israel at the Ben Gurion University of the Negev, who claimed that the sense of coherence was to most fundamental quality in the good, healthy and able life created by our understanding, leading to our actions, leading to our meaning of life and leading us to new understanding (see figure 1) (8,9).

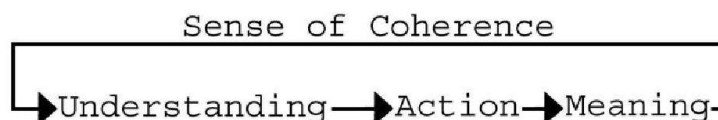


Figure 1. Sense of coherence created by Antonovsky was based on understanding, power of action (manageability) and meaning (simplified presentation, see [8, 9] for details).

We believe that the conceptualisation of coherence made by Antonovsky was in some way a “male oriented” mentally focused concept and perceive as one of the major weaknesses the lack of focus on emotions and the modest weight the model placed on love and sexuality. We have recently found that answers to questions related to feelings statistically showed a stronger connection to self-evaluated physical health than answers to questions related to understanding and action (work in progress).

A more “female” and bodily-emotionally-spiritually focused concept (see figure 2) was presented by Henry Kimsey-House (10) using a special understanding of the concept responsibility, arising from feeling and noticing the urge of self and the world, allowing oneself to react on such an urge - in oneself, in the space, or in the world at large - with full permission, and always noticing the impact on self, others and the world. As an event develops, a new urge is building with the permission from self giving new actions and impact. The concept of full permission to move on the urge is beautiful as it takes us right into the flow of life, responding to everything that comes into our consciousness, not straining us in

the action, but simply going with the flow of the moment, like the completely relaxed supreme performer of the martial arts, or the Japanese Zen bow master perfectly hitting the centre with no effort at all. Another way of putting it would be that in the optimal, coherent and healthy life, we notice all the gaps in our reality, all the things that are not exactly the way we want them to be and respond to them. Philosophically explained, the reason that we perceive these gaps is our fundamental purpose of life, organizing our consciousness and making us want to close any such gap we perceive (mentally as understanding, bodily, emotionally and spiritually as an urge), which is our essential job in life (11-25).

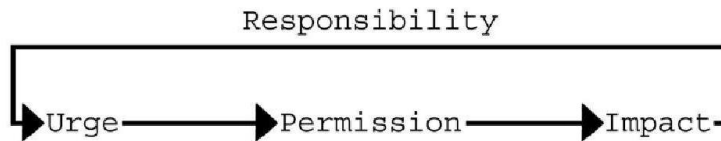


Figure 2. Coherence through the female concepts of urge felt within self or in the outer world, full permission to act on the urge and letting the resulting impact be a part of the next moment urges (26).

The concepts of understanding and urge can be joined in the concept of health on all levels of existence (physical, emotional, mental and spiritual), the concepts of action and permission can be joined in the concept of function, and the concepts of meaning and impact can be joined in the concepts of quality of life (see figure 3).

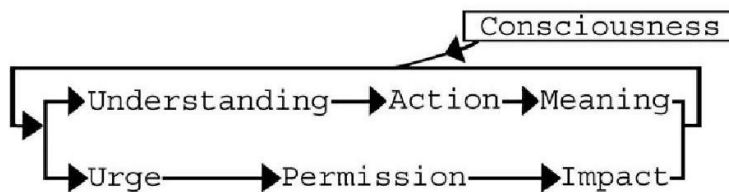


Figure 3. Abstracting the male and female concepts of existence in coherent flow into the three core values of human being: health, ability and quality of life (QOL).

The theoretical challenge is how to take the essence of human existence (both the male and female part) in a coherent flow into a theory. We have called our model existential coherence, or Antonovsky coherence, to honour Aaron Antonovsky for originally presenting the brilliant idea of coherence and thus pioneered the field.

The challenge is to model existential coherence in such a way that all the relevant aspects of human life and existence are included, so that the theory can guide the process of development of flow and optimal life. Please allow us to suggest such a theoretical framework for the existential coherence, which centre on the concept of love, which includes both mental and physical aspects of life, but also contain the duality of understanding and urge (consciousness and sex).

It is developed for use in the holistic medical clinic, in coaching and development of business companies and organizations, their leaders and employees with the hope that it will also be used for training in medical schools and educational institutions, where there is the intent to develop, recover, or rehabilitate human existence in all aspects from QOL, health, to the ability of functioning, privately as well as professionally.

## **A theoretial framework for existential (antonosky) coherence**

The theory of existential coherence (see figure 4) states that QOL, our experience of meaning, truth, good and beauty, value, good relationships, fulfilment etc. in life is caused by our ability of physical, emotional, mental, spiritual and sexual functioning. Our ability to function is in our thinking, caused by our physical, mental, spiritual, sexual and social health, which allows us to express our purpose of life and use all our physical, emotional, mental, spiritual, sexual and social talents. Meaning and the other dimensions of global QOL seem to us to be born out of two subjective, highly mysterious dimensions that we call light and joy. Light is a subjective quality of consciousness and love, while joy is a subjective quality of love and physicality, or love and sexuality, if sex is taken to be the fundamental force moving the subjective life energy. The fusion of light and joy into meaning is one of the most profound mysteries of the conscious existence. But as mysterious as it is to our minds, which seeks mechanistic explanation, as self-evident it is to our intuition (see figure 4).

As modern physics explains us, the world is a web of energy and information. The living organism seems to be an independent creature with a purpose and life of its own, but this autonomy is highly illusory, as reality has many levels of depths and as everything in the end is part of the web of reality, and every purpose of life is related to the surrounding world and born out of this relationship. Gautama Buddha (566-486 BCE), the founder of Buddhism, thought that everything is relative, and in a state of deep wisdom we realize that even what we call the soul, the core of our independent existence, is illusory and everybody is existentially rooted in the creative emptiness of the universe, sunyata. Jesus Christ, the founder of Christianity, thought similarly that we are all children of God (27), when we come to know our true nature, we come to know God. It seems essentially to be the core lesson of all the religions of the world from the Sufi mysticism to the Jewish Kaballah and the Native Americans. We are in the most fundamental existential aspect one with the universe. We never were separated, because we cannot get out of this world that has born us. The universe is our true womb and the navel string can never be cut. Out of this web of energy and information, out of this world, comes as we see it intent, which give birth to the mind and consciousness, and talent, which basically is informational “templates” or “jigs”, which give birth to the body, its organs and sexuality.

The coherence of the world is thus the causal dimension in the theory of existential coherence (see figure 4). Intent is really a mysterious power, it gives birth to our purpose of life (see life mission theory)(12), it activates all our talents (14) and it is also father to the evil in us [16]. Nobody seems to be able to explain the true nature of intent; it is a direct creative force that manifests itself without noticeable steps. Cultivation of the use of intent is the secret of sorcery (28).

We use intent without knowing how. We intend it. The path of understanding ends blindly. This is what gives the life mission theory its strange feeling -the purpose of life just emerges out of the coherence of the world. To understand this, imagine yourself as the first cell, the zygote, orienting yourself, looking for the most valuable stake in this life, choosing a purpose and developing your consciousness, personality, character, understanding, wishes and behaviour from that. Such an idea of an “early contract with the spirit” is often found in the medical systems of pre-modern cultures.

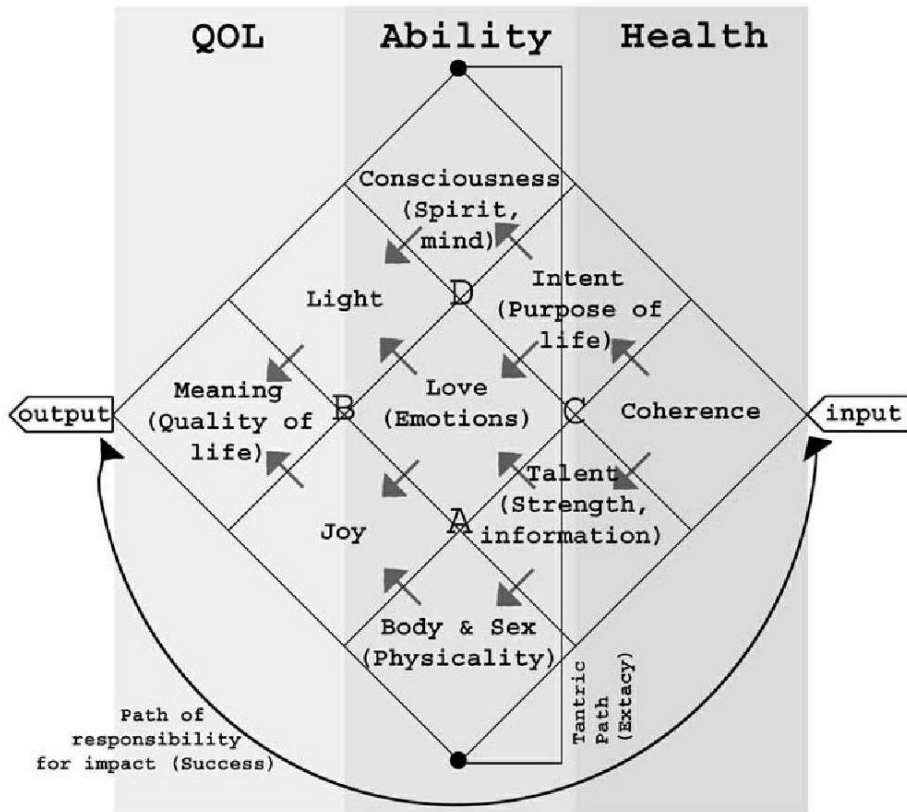


Figure 4. The theory of existential (Antonovsky) coherence. The framework contains nine key concepts in five layers: 1) coherence, 2) intent/purpose, talent/strength 3) consciousness/mind, love/emotions, physicality/sexuality, 4) light, joy, 5) QOL/meaning. The layer above causes the layer below, with the layer of QOL again feeding the layer coherence. The model thus holds the person responsible for his own degree of reality, health, happiness, and success in life. (Note that the four squares centred by the letters A, B, C, and D to some extent correspond to the old alchemic, metaphysical elements of earth (solid, body), water (fluent, emotions), air (spirit and mind) and fire (transformation, creation)). The path of responsibility is noticing and reacting on our own impact on the world. The path of Tantra is integrating consciousness, love and sexuality.

White Eagle, a Native American healer, wrote to us about the path of a patient healing her cancer: "...she must find the real reason she came to this lifetime, find her gift to give and remember her original agreement with the Great Spirit for the purpose of the gift of this lifetime. When she remembers this, then she must choose to give herself fully to her agreement, no matter what the pathway is. Then, she will live." Talent is no less mysterious. Modern molecular biology states that all the information of the organism is contained in the chemical composition of the DNA molecule, but recent research (discussed in (18-25)) has demonstrated that this hypothesis is presumably wrong. The form of the body, the structure of the brain, the distribution of the cells in our body, our memory and general generic and constructive input from the world is not from the genes, but from a much more complex and hidden source, which is an inherent part of the web of the world. So all our talents seems to be sourced by the same dark and invisible side of the universe, as intent. Out of the combined action of talent and intent arise all the beautiful structures of our biology, our body, our mind

and brain, our sexuality, our purpose of life and character of our personality, but most importantly our love for life and our love for others and ourselves. This is to us the most profound mystery of all, the birth of our love, the birth of our liking, our lust and our interest.

Our interest creates our consciousness, our lust creates our sexuality; but our love creates our life. Our love is born out of our purpose of life: we are here to contribute with everything we got as gifted human beings. We want to contribute by using our unique skills and talents for mankind to make the world a better place and closing all the gaps we perceive. The creation of a me and a you (61), the most brilliant and amazing of illusions, is what makes the world go round. Not money, not physical values, but the need of being of value to you, my dear, my friend, my boss, my beloved, my client, my patient. Our true nature is to be of service in love, living our love, being centred in love. So the good health, the high quality, the highly valuable life with self-confidence, self-esteem and happiness are from an existential point of view created when:

- we are deeply rooted in reality (that is: we are real) and a coherent part of the web of the world
- we know our purpose of life and master our intent
- we acknowledge our talents and take them into full use
- we allow ourselves to be creatures of love, honouring our love for life and the world, ourselves and others in everything we do and are
- we use our consciousness to understand all aspects of life
- we give ourselves full permission to notice and follow the urge we feel within ourselves, in the group (in the space) and in the world
- we take responsibility for filling our life and our world with light
- we take responsibility for filling our life and our world with joy
- we take responsibility for closing all the gaps we perceive and create the meaningful and rich life we deep in our existence want.

Happiness comes from living our purpose of life and using all our talents to give what we have to offer with unconditional love.

## **Personal development and existential healing**

The nine key dimensions of existence exist in a passive and an active form, corresponding to the being and doing of life (see table 1)

Interestingly, as a person develops, the nine areas merge completely; every part of existence becomes conscious, filled with love, meaningful, joyful, enlightened, purposeful, urge-driven, ecstatic and coherent, as all parts of existence expand into the neighbour areas. This expansion of all existential areas is the project of personal development, such as sex expands into the consciousness and love expands into sexuality we have the classical art of sexual tantra (see “the path of tantra” Figure 4, that is integrating sex and consciousness). One by one all the splits and participations that torment modern man heal in this process of existential integration. Existential healing is therefore the primary goal of personal development (15, 62, 63).

**Table 1. The nine key dimensions of existence**

Dimensions	Active Form	Passive Form
1. Coherence, the web, the nest of the world	Receiving, taking in	Being an integrated part
2. Intent/purpose of life	Intention, decision	Having a purpose (of life)
3. Talent/strength	Using skills and urges	Having strength and structure
4. Consciousness	Noticing, knowing, understanding, planning	Being awake
5. Love	Acting in love	Being in love
6. Sex/physicality	Meeting, enjoying	Being man/woman of character
7. Light	Bringing light	Being in light/enlightened
8. Joy	Bringing joy	Being in joy
9. Meaning/QOL	Creating/fulfilling life, giving	Being alive, having impact

## Theory of existential coherence and other related theories

The theory of existential coherence explains many of the same facets of existence covered by the Four Quadrant Theory of Ken Wilber (62). He also started with “The Great Nest of Being”, what we call the coherent matrix of energy and information, or the web of the world. Wilber’s four quadrants are intentions, behaviour, culture and social relations, but love is rejected as a central concept in Wilber’s model, making this model less useful for deep holistic, existential therapy, where love, trust, and holding are prerequisites for taking the patient into the state of consciousness we call “being in the process of existential healing” (63, 64). Responsibility for the person’s own world is also difficult to rehabilitate using the Wilber model, whereas this is the consequence of walking the path of responsibility, noticing and reacting to your own impacts (see figure 4).

An interesting question is how the theory of existential coherence relates to other holistic QOL and health theories. The QOL theories (64-66) seems to be contained in the present theory, as the integrated QOL theory (64) has the meaning-love-coherence axis as its core, but only as a mysterious centre of existence. Maslow’s QOL theory (66, 67) (Abraham Maslow, 1908-1970) has transcendence of the ego as its primary perspective with the understanding of the ego presented in the theory of the ego (13), where the ego is the personality organised around a sub-talent and transcending the ego is finding your real purpose of life and living through that. This theory is also included in the theory of existential coherence. QOL as realising the biological potentials are also included, as these potentials are found in both intent and talents. Interestingly this theory only contains the expression of life, not the impression that the coherence theory contains. A new feature is the parallel focus on consciousness and sexuality, giving sex a much more prominent emphasis in life than the earlier theories.

Frankl’s theoretical construction (7) (Viktor Frankl, 1905-1997) stressed mostly the meaning of life and did not stress sexuality either, while Jung’s (69] (Carl Jung, 1875-1961) and especially Sigmund Freud (1856-1939) (70) had most of the focus on sexuality as the driving force of life. This is actually still the case in the present theory as the dimension of

sex contains the body and the basic physical energy of life. Later thinkers focused more on love (71-73). Jung included most of the nine dimensions in his work, but did not integrate them into one theoretical framework. His archetypes were an exploration of the hidden structures of human talent and his work on non-locality has been an important contribution to our present-day understanding of the deep and mysterious nature of the phenomenon of coherence.

In the present theory of existential coherence, body and sexuality are as important as mind and consciousness for our QOL, health and ability. The theory of existential coherence is a nine-ray theory (compare it to the seven-ray theory of human character (17), similar to the Gurjieff enneagram model (George Ivanovitch Gurjieff, 1972-1949) that maps all purposes of life into nine main categories (see table 2) (74). The two frameworks both hold love as the core concept. The enneagram can be seen as the “explosion” of the nine rays (17) into the domain of purpose of life (the active side of the intent/purpose area). It seems also to be somewhat compatible with the ancient Indian chakra system (see table 2).

**Table 2. Correlation between the theory of existential coherence and Gurjeff’s enneagram model, also including a tentative correlation to the ancient chakra system**

Coherence Theory Key Concept	Enneagram Key Concept	Chakra System
1. Love/emotions	Love	Hearth
2. Light	Perfection	Solar plexus
3. Talent/strength	Will/strength	Throat
4. Coherence	Laws of the universe	Divine energy
5. Sex/physicality	Source/creativity	Root/Hara
6. Meaning/QOL	Omniscience	The whole (nadis)
7. Joy	Trust	Hara
8. Intent/purpose	Divine plan	Third Eye (brain center)
9. Consciousness/mind	Truth	Crown

Discussion

The value of any theory is its practical or empirical use, because just giving a perspective or mapping an area of the universe, as in this case the inner landscape of human existence has no value per se. The proposed theory states that coherence give birth to intent and talent, which create health, which creates ability and using these abilities creates meaning and QOL. If this theory can support the patient’s development and recovery of the three important dimensions of QOL, health and ability, the theory has fulfilled its purpose.

The proposed model seems to be well supported by many poorly understood, but surprising empirical findings; improvement of quality of life have thus caused improved health and survival both for patients with cancer (75) and coronary heart disease (76). So how can it be used? The primary strength of the theory of existential coherence is that it can be used for problem-solving and subsequent holistic healing of both QOL, health – mental, emotional, physical, sexual, spiritual - and ability in general. If QOL is poor, there is a lack of light or joy or both, which can be developed through development of consciousness, love and sexuality with physical, emotional and bodily presence. Discovering your purpose of life and



talents by taking them into use can develop consciousness, love and sex. Purpose of life and talents can be found by getting real or in other words seeking, finding meaning and coherence in life and the deep web of the world. Getting real is really what holistic therapy and personal development is about.

In the language of the Native American sorcerer tradition, people are transformed from ghost to real humans by confronting reality in all its aspects and reconnecting to self and others. A patient, who is seriously ill and without joy in life and with no close friends are often in a disconnected, unreal state of existence and rehabilitating existence starts basically with plugging the person into reality. Balancing life is another useful way of using the theory of existential coherence. In coaching, the nine areas can be explored and weekly developed areas can be stressed and highlighted. Exercises can be designed to rehabilitate each of the nine areas (see examples in the many case stories in the series on clinical holistic medicine (29-60).

Right-left balance means balance between the inner and the outer world. Top-down balance means balance between head/mind and body/sexuality. A good life is centred on love. Bringing love into focus in the patients or clients life is of utmost importance and the model explains why in a simple and convincing way. Taking leadership in private and professional life is another important aspect of the model. You succeed as a human being, when you assume responsibility for your own life, which according to this model means that you know yourself, your purpose of life and talents and you fight all barriers and resistance, inner and outer, to bring these gifts to the world and the people dear to you. Existential leadership means that you live your life from your hearth and that giving is more important than receiving. In your existential leadership you bring love, light, joy, meaning and value to your life and you work dictated to develop your consciousness, body and sexuality still further, to be more real, more skilful and more daring and direct in your intentions, character and behaviour. Our new model of coherence has been developed to integrate the existing knowledge in the complex field of holistic medicine. The strength is that it empowers the holistic physician to treat patients with even metastatic cancer and other chronic and severe diseases (75,76). It can also be used for existential rehabilitation, in holistic psychiatry and sexology. Its major weakness is that it turns holistic medicine more into an art than a science, because the physician must master intent, which is a poorly understood dimension of existence.

## Conclusion

A theoretical framework of existential (Antonovsky) coherence for use in the holistic medical clinic is presented. It explains how health, quality of life (QOL) and ability of functioning were originally created and developed to rehabilitate human life from an existential perspective. The theory integrates a remarkable number of aspects of earlier scientific, semi-scientific and religious models of existence and explains our recent surprising empirical findings, namely that QOL, health and ability primarily are determined by our consciousness (1). According to the flow of the presented scheme, high QOL is based on good physical, emotional, mental, spiritual and sexual functioning, which is based on good existential health, by which we mean living your purpose of life and using all your gifts and talents. As the life

we create impact our health, the model is really circular. It is this circular nature of life that explains our own vast responsibility for QOL, health and ability.

The theory is illustrated by a matrix of nine key elements organized in five layers: 1) coherence, 2) intent/purpose of life, talent/strength/information 3) consciousness/spirit/mind, love/emotions, body/physicality/sexuality, 4) light, joy and 5) QOL/meaning. The layer above causes the layer below, with the layer of QOL again feeding the layer of coherence. The model holds the person responsible for his own degree of reality, happiness and being present. The model implies that a person by taking responsibility for his/her existence in the nine dimensions radically can improve and develop health, ability of functioning and all aspects of QOL and meaning in life.

The theory of existential coherence can be used in the holistic clinic and in coaching, for problem solving, to help balancing your patients or clients life and to encourage and support your patient/client into taking existential leadership. It is especially useful when the patient needs to take a step deeper into existence, to assume responsibility for own life and thus improve quality of life in general and heal from a chronic condition. Love is in the centre of the model, and rehabilitating of love is accordingly the essence of holistic medicine, company and life coaching and all other kind of work with the intension of facilitating personal development. To know yourself and your purpose of life and talents by taking them into full use, becoming coherent with life inside and reality outside, is what life really is about. The presented model of coherence is best used as a road map to existence, allowing the holistic physician to help the patient mobilizing his or her inner hidden resources by letting him or her understand the inner logic of the creation of the good coherent life, and step by step helping the patient to assume responsibility for all the nine core areas of life embraced by the model.

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## **Reflections on how to improve a patient's philosophy of life**

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There are two major dimensions of interest when we want to improve the philosophy of life of a patient in the holistic medical clinic. The first dimension is how superficial or deep the patient's conception of life is. The second dimension is how positive or negative the patient's conception of life is. A superficial understanding of life will hide the causalities in life and thus drastically reduce the patient's possibilities to help himself. Making a person understand life deeper allows him to take control over his own life and thus tremendously important for empowerment. A negative understanding is basically disempowering. Here the problem is not to identify the cause of the problems and sufferings, but to regard the causal level of existence as impossible to influence and manage. Both the superficial and the negative perspective seem essential to deprive the patient of responsibility for his own life and this is exactly why a patient's life philosophy becomes shallow and negative. This way he can escape responsibility for life, or more precisely escape the emotional pain connected with failing this responsibility. The situation is then doomed to fail, because life is very much about leaning by failure. But some people do not recover this responsibility for life and therefore fail to develop a responsible philosophy of life. The holistic physician, therapist or coach can compensate for this by helping the patient to improve his philosophy of life by developing it to become deeper and more positive.

### **Introduction**

Figure 1, which we were introduced to in chapter 45, illustrates three major levels of understanding of life. On the surface life is about being happy, healthy and able. At this level of understanding happiness is often explained as a function of getting the standard status and materialistic requirements of our culture, whether this is many cows in Africa or a nice car in America.

Health is often explained as a function of a healthy lifestyle: eating vegetables, jogging or doing other kinds of exercise, while ability and talents are often quite mechanistically explained as a function of the gene pool and sufficient exercise.

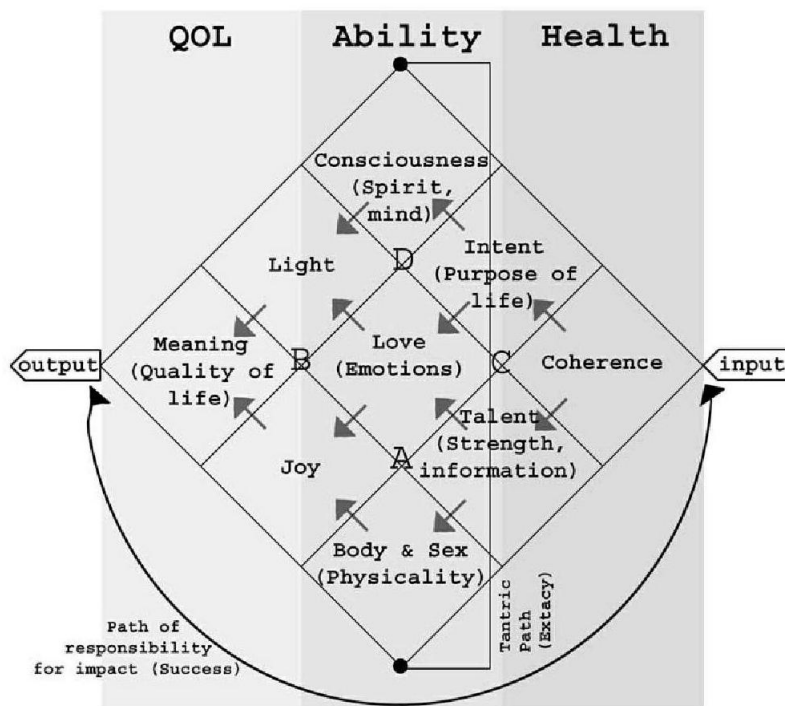


Figure 1. The human existence - major layers and concepts (except for the innermost Self which is not on this figure).

The deeper level of understanding appears when a person understands that health basically seems to be a function of quality of life, which again seems to be a function of ability, which again seems to be a function of health... so the illusion is that the three are supporting each other in a circle that cannot be broken. Looking one step deeper one realises that QOL, health and ability actually is caused by the fundamental state of existence often expressed with the concepts of love, consciousness and sexuality (see figure 1).

The human existence consists of three layers: 1) the layer of global quality of life (QOL), mental/physical health and ability, 2) the layer of love, power/consciousness and sexuality, and 3) the layer of existential coherence, where life inside the human being coheres with the outside world. When the patient or spiritually seeking person go still deeper towards the innermost core of existence (s)he will one day confront the most fundamental question in life: To be or not to be. This is the birth of the suicidal crises, which can only be definitely terminated by the patient deciding unconditionally to live. This decision must be taken autonomously, that is without any kind of pressure of external motivation. Training the patient to be able to understand life, to love, and to have a close intimate relationship is often radically improving QOL, health and ability. This training can be done as a regular training program in philosophy of life for the patient, deeply influencing the way the patient live and think, which is extremely empowering. But often the largest step forward - the final breakthrough in the holistic existential therapy - comes when the patient finally embraces the idea of coherence: to be able to be an integrated part of the world, with a purpose of life that serves everybody and a personal character that really empower him to be and do what his was



meant to be and do. It is this mighty insight in the human nature that was the fundament of the Hippocratic medicine 2,300 years ago [1,2] and still today rehabilitating the purpose of life, character and coherence of the patient. We believe that this concept is still the most efficient instrument in medicine.

## **Making philosophy of life more positive**

In the constant dialog between the physician and his patient negative and destructive attitudes and decisions must be hunted down. Every patient we have met has hundreds of negative beliefs about himself, life and the world. Making the patient conscious of these overwhelmingly toxic attitudes and helping him to let go of them is the finest and most important endeavour of the physician. Every negative belief is founded in emotional pain arising from failure in the patient's personal past.

To make a philosophy of life more positive, many patients and therapists tries to exchange negative beliefs with positive beliefs. In our understanding this does not work, but as soon as the patient let go of the negative belief the natural positive philosophy of life of that patient reveals itself. So the only way to help a patient to be more positive is to assist the patient to let go of his negative beliefs. We need to strengthen every patient to be natural, resourceful and whole. Holistic medicine is about helping the patient back to his natural condition and helping the patient back to the corresponding natural positive and comprehensible philosophy of life. Improving a patient's philosophy of life seems therefore to be the most important medical intervention. This can only be done by physicians and therapists, who are strong and "at home" in their own understanding of life. We hope that the present book will inspire many patients to improve their life and health. We also hope that health professionals will take the challenge to improve their own philosophy of life, to see for themselves how efficient this task really is for a good life in order to help their patients.

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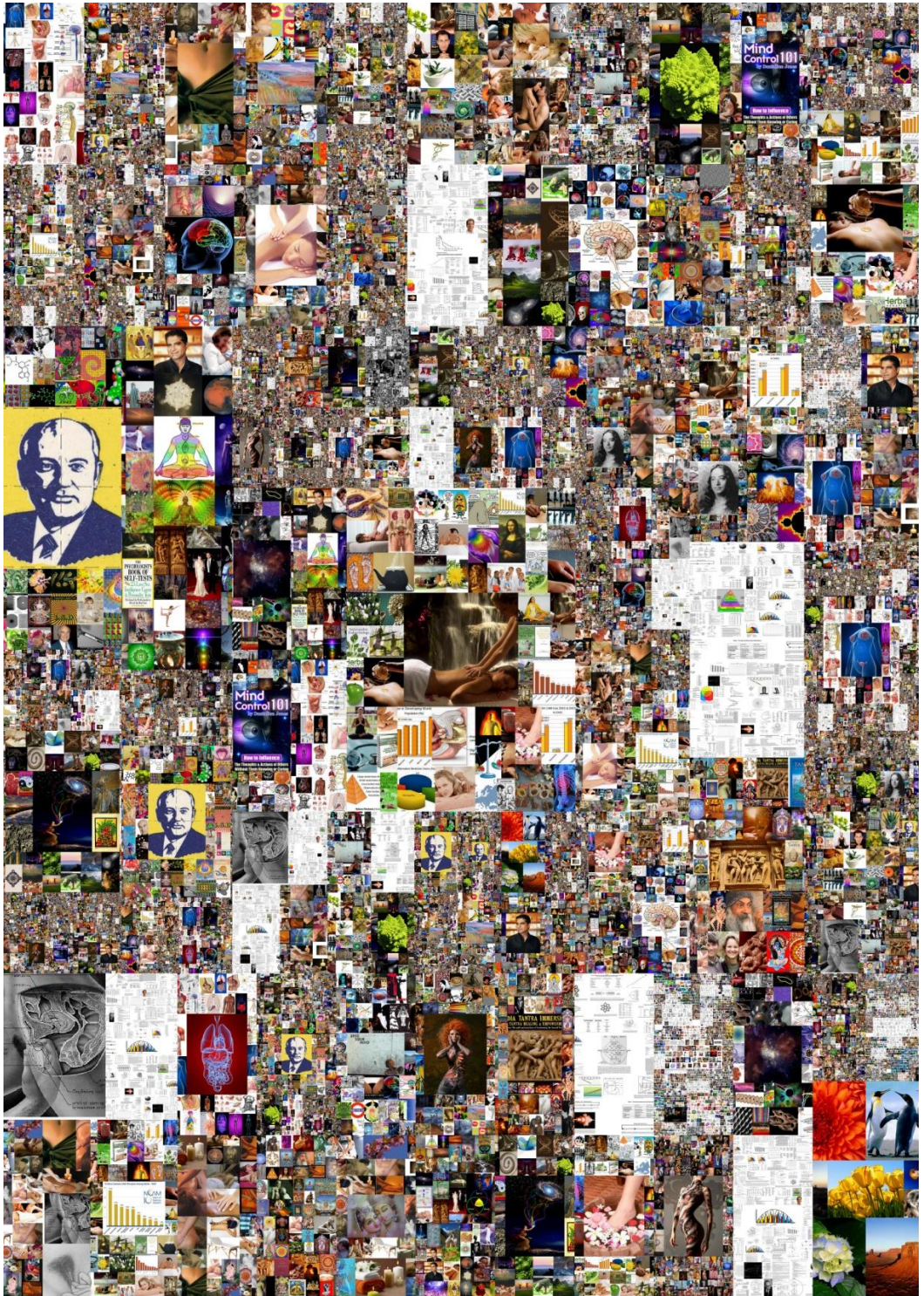
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## **Section 2. Ethics**

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## Ethics and holistic healthcare practice

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In this chapter we will give you the ethical rules which we recommend that holistic medical practitioners follow. In a way it is stupid with rules, because we know that it is only human to break the rules. The truth is that if you have a highly developed understanding of ethics based on self-insight, you will not need these rules. The rules need to be there, so that others can point out to you when you are not ethical. A most problematic thing is that your biomedical colleagues often will use ethical arguments against you as a holistic practitioner: You are not behaving ethically because you ... get too close emotionally, get too intimate, you prevent patients from having the drugs that could help them etc. Do not buy into that, just be aware that medicine is a big business and that many commercial interests are against, when you heal using just talk and touch and no drugs and no surgery. The chapter aims to contribute to integrated discussion of ethics in holistic healthcare. Noting key aspects of the literature on ethics in holistic healthcare we then focus on describing the working ethical statement for holistic healthcare practitioners produced for the International Society of Holistic Health (ISHH). Ethical principles, aims of holistic practice, and ethical guidelines are presented. The relationship of ethics to quality of care is outlined. We conclude that many of the ethical principles and guidelines, as well as expectations of quality and safety, that apply to mainstream healthcare, also apply to holistic practitioners. However, the multidisciplinary contexts of whole-of-patient healthcare present new challenges of application of these familiar ethical understandings.

### Introduction

Each patient carries with him his own doctor... They come to us without knowing this.  
We do our best when we give the doctor within each patient a chance to do its work.  
*Albert Schweitzer (1875-1965)*

The aim is to support, nourish and remove obstacles for nature's inherent health-  
promoting and healing forces.  
Illness can be looked upon as a reaction to conditions we have placed ourselves in.  
Conditions inappropriate for maintaining health and well-being.  
*Florence Nightingale (1820-1910)*

The development of whole-of-patient healthcare has brought with it new discussions about the ethical obligations of practitioners delivering holistic healthcare (1). Though complementary and alternative medicine (CAM) treatments are being used in many western countries by up to half the population, but there has not been enough dialogue between mainstream health practitioners and CAM practitioners, about many issues of care delivery, including ethics (2,3). Ethical issues for physicians and allied health providers, who practice CAM are a related but quite distinct area, because these practitioners have been medically trained and operate in the legal and regulatory frameworks of mainstream medicine and health. Ethical issues for this group—the focus of this chapter—have not been well explored in the published literature.

However, we know that holistic healthcare involves a different conceptualisation of healing that, through its engagement with the whole patient (mind-body-spirit), creates quite different physician-patient relationships. These in turn raise new ethical considerations to do with vulnerabilities, ethical self awareness and trust (4). We also know that new treatments, such as touch therapy, whether integrated with mainstream approaches or not, also present new ethical considerations (5).

Such ethical issues have been of interest to the International Society of Holistic Health (ISHH). This chapter, which was developed in collaboration between holistic practitioners and researchers, offers information, content and implications of the ISHH guidelines. It aims to be useful to those wanting to reflect further on ethical practices in holistic healthcare. In a context where much modern medical and health practice is about integrative multidisciplinary approaches and inter-professional teams (6), and medical, nursing and allied health education increasingly engages with notions of what are ethical virtues (7), such matters are of interest to healthcare practitioners and educators generally. Ethics for health professionals has increasingly been conceptualised as being about an integrated set of knowledge, skills, and attributes such that the literature speaks of ethics as being about personhood and the evolution of the whole practitioner (8). This chapter aims to contribute to this kind of integrated discussion of modern ethical healthcare.

## **Definitions and importance of ethics**

Ethics are reflections and guidelines on how to act, while morals describe how we act. Ethics can be based on duty, on rights, on virtues, on consequence, on usefulness or on relations (9). The fundamental premise for all ethics is that every human being is equally valuable and demands the same respect and consideration. The main role of ethical guidelines is to protect those who cannot fully defend themselves and who cannot voice their demands or stand up for their rights.

Ethical principles and guidelines are important, because they help encourage reflections on how to act. Unless human behaviour is audited against well-theorised and developed ethical statements, it is difficult for practice to be consistently ethical. Holistic healthcare practice involves a proactive approach to multidisciplinary treatments, often involving diverse teams of professionals. This can create new pressures and ethical decision-making situations for practitioners. Accordingly, the ‘whole-of-patient’ focus of holistic practice requires



careful development of authentic and useful guidelines for practices that are not narrowly bio-medical.

## **Vision and aims**

The International Society of Holistic Health (ISHH) is comprised of physicians, allied health professionals, and researchers, who have a commitment to developing high quality, whole-of-patient, integrative healthcare. The association has members across the world, in the Middle East, Europe, America, Asia, Australia, and elsewhere. This international group have been interested in and published on contemporary developments in healthcare that reflect our emphasis on multidisciplinary, holistic, innovative—and above all effective and ethical—care for patients.

We undertake collaborative international research on healthcare practices that integrate bio-medical and other approaches to achieve quality, patient-centred care. We also organise conferences that are an international meeting place of all those interested in advancing practices in holistic healthcare. The aims of the ISHH are:

- To promote holistic health awareness among health care providers, organisations and the general public
- To foster and stimulate the highest quality of health care provision in all communities.

Holistic health care is defined as the art and science of healing the whole person—body, mind and spirit, by prevention and treatment—to promote optimal health. The ISHH believes that health is a holistic concept, because it is impossible to be healthy without taking into account the physical, mental, social, environmental, and spiritual aspects of life.

The fields of knowledge and experience that can inform this area are therefore vast. Accordingly, the ethical decision-making situations that can arise in holistic practice are many and varied. Yet we believe they can be guided by simple universal principles that can be agreed-upon by those in many cultures and countries.

The ethical principles and guidelines endorsed by ISHH aim to help us fulfil another aspect of our vision: to build bridges between the various factions of medicine and healthcare providers that shares a goal in creating high quality holistic healthcare services. This emphasis upon building bridges across different areas of practice, services, cultures, and countries is why our emphasis is on simplicity and clarity of ethical statements.

## **Key ethical principles for holistic practice**

Two key principles underline high quality holistic healthcare practices:

- Do to others as you want to be done by
- Ask if it would be okay if everybody acted the way you plan to act.

The first principle is common to many world religions. It requires the practitioner to imagine being the patient and to ask yourself if the behaviour would be desirable if you were on its receiving end. The second principle comes from Kant's writings. Kant suggests that the basis for immorality is to make an exemption for oneself (10). This principle invites you as practitioner to ask yourself if your behaviour would be good for society if it were universally adopted.

## **Aims of holistic practice**

The aims of holistic practice are fourfold:

- Heal, help, and comfort the patient
- Support and strengthen the internal healing forces of each person
- Treat the person as a whole (bio-psycho-social-spiritual being)
- Focus on prevention when possible.

The first aim positions the health practitioner as a holistic helper of those experiencing illness and related hardships. The second aim focuses the attention of holistic healthcare on developing the capacities of healing of the patient, rather than acting upon the patient.

The third aim emphasises the importance of whole-of-patient care and the interrelatedness of the different dimensions of being in any consideration of how best to meet the patient's needs. The fourth aim emphasises the value of prevention, positioning holistic healthcare as being about proactive approaches to health: education for health, healthy behaviours, and so on. Together these aims suggest quite different relationships between the patient and practitioner than are suggested by either traditional bio-medical models or more modern corporate models of healthcare.

In the holistic model the practitioner focuses on empowering the patient and delivers services that cannot be so easily commoditised—it is difficult to see how empathy as a basis for giving comfort, or an engagement with the spiritual dimensions of the patient as part of whole-of-patient approaches, could ever be authentically priced on the healthcare marketplace.

If the holistic practitioner takes on different roles and responsibilities from those found in bio-medical traditions of care, or new corporate models of care, it follows that there will be ethical considerations in holistic care that are related, but not exactly the same, as those found in these two other models of healthcare. In developing ethical practices the holistic practitioner will want to be aware that holistic practice may involve applying universal ethical principles to new practice contexts.

Recognising how a universal ethical principle—such as that treatment be evidence-based—is relevant to new practice contexts is an important part of developing deeper ethical awareness. This is a truism of learning generally: a generic knowledge or skill can only be internalised and reproduced in daily practice when it has been applied to enough diverse contexts to make it deeply understood.



## Ethical guidelines

1. The *values and laws* on which the practitioner should build holistic practices are:

- 1.1. compassion
- 1.2. mutual trust
- 1.3. respect for the patient's integrity
- 1.4. human rights
- 1.5. truth and justice to the patient and society
- 1.6. national laws
- 1.7. informed consent
- 1.8. confidentiality.

2. In *delivering healthcare*, the practitioner should:

- 2.1. give information regarding the purpose, content, duration, cost of treatment and complaint rules
- 2.2. build the practice on evidence
- 2.3. use methods that are validated
- 2.4. use methods one can master
- 2.5. use methods that do not harm
- 2.6. place concern for the patient as paramount when trying out methods
- 2.7. keep records (5 years) that patients can read
- 2.8. conduct research, develop and test new methods of diagnosis and treatment to high standards of quality research practice
- 2.9. monitor and evaluate results
- 2.9. develop and improve one's practice
- 2.10. use one's resources fairly
- 2.11. where possible, develop the tool (oneself).

3. The practitioner's *relationship to colleagues* should:

- 3.1. be respectful
- 3.2. involve raising misconduct by other practitioners directly with them in a caring way; secondly with authorities
- 3.3. not express criticism of colleagues in front of patients
- 3.4. be transparent, sharing, and open, assuming informed consent in patient matters
- 3.5. not involve inappropriate interference in, or prevention of, treatment given by others.

4. In *relations with patients*, the practitioner must not:

- 4.1. disrespect the patient's right to choose (treatment, life or death)
- 4.2. assist actively in ending life
- 4.3. exploit or manipulate the patient economically, philosophically, religiously, sexually

or in any other way (the consent of the patient does not free the practitioner from this duty)

4.4. engage in a sexual relationship with the patient

4.5. promise to cure the patient, or hinder the patient receiving help from others.

The first part of the guidelines focuses on broad values and laws that should govern holistic practice. The emphasis upon compassion suggests the way in which holistic care involves practitioner empathy for the patient, which is critical to an engagement with the whole patient. The second part of the guidelines emphasises that holistic practice is accountable, evidence-based, and rigorously developed. The third part of the guidelines emphasises high standards in collegial interactions in ways that serve the interests of rigorous and accountable healthcare services. The last and fourth part of the guidelines emphasise what the practitioner should not do in interactions with patients, consistent with other parts of the guidelines. Considered as a whole, these guidelines suggest that if holistic practice involves the integration of mainstream approaches and CAM to deliver whole-of-patient healthcare, such healthcare is not exempt from the high standards of rigour, accountability, transparency, and duty of care expected of practitioners everywhere. For example, when tailoring treatments from different disciplines to meet complex healthcare needs, the practitioner must be able to point at the evidence that informs decision-making about the appropriate treatments.

## **Ethics and quality of care**

Ethical healthcare practices and quality healthcare practices are related but different aspects of healthcare delivery. The personal ethics of the practitioner set the pre-conditions for quality healthcare at the micro-level of provider and patient; the quality of the care systems sets the macro pre-conditions for provider-patient interactions. Provider practices that are ethical are also practices that aim for high quality. Holistic healthcare should aim to deliver services with the same quality aims as those set by the World Health Organisation (WHO), which have also been adopted by many countries in the world.

## **Conclusion**

In contrast to some representations of alternative therapeutic approaches as not involving, for example, a reliance on evidence-based approaches (11), the foregoing suggests that many of the principles and guidelines that apply to mainstream medicine apply to holistic healthcare. Expectations of quality and safety also apply.

At the same time, in this chapter, we do not give a simple ‘yes’ or ‘no’ answer to the question of whether ethical frameworks that apply to narrow bio-medical healthcare approaches apply to holistic healthcare. The health ethics literature suggests that one error to avoid in developing ethical statements is the assumption that frameworks developed for one health context can be simply applied to another (12). We take the view that holistic healthcare

involves many common ethical principles and guidelines that can find new challenges of application in the multidisciplinary contexts of whole-of-patient care.

Of course, most people from vastly different contexts of care can agree upon a set of common principles and guidelines if they are broad enough. The real challenges of obtaining real, *in-practice* agreement on ethics comes when practitioners need to make sound decisions about a familiar principle in an unfamiliar context. The meaning of ethics in holistic practice requires an effort of understanding precisely because holistic care opens up new contexts for the application of familiar ethical principles and guidelines. Thus, the restatement of familiar ethical principles and guidelines in ways that are nuanced to the contexts of holistic healthcare is important to developing understandings of how the former applies to the new contexts. This is the task that ISHH is engaged in as it develops these working principles and guidelines. Our work challenges healthcare educators to design undergraduate and continuing professional development courses that provide learners with opportunities to understand how familiar ethics principles and guidelines apply across diverse healthcare contexts.

We believe that our work also extends a special challenge to holistic healthcare providers who want to address all aspects of the patient's life: to apply the ethical standards to all aspects of one's own life. Only then will we truly be able to live and work as we preach. And only then will we be able to touch the spirit, mind, and body of the patient in a way that allows healing to take place.

## Acknowledgments

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## **Exercise**

1. How do you understand ethics?
2. Why is it important not to have sex with your patient?
3. What is love? How can love be expressed as care?





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## **Medical ethics and therapeutic dilemmas in the sexology clinic**

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The classical holistic medical clinic is also a sexological clinic, and many holistic clinics also call themselves “sexological clinics” as it is important to inform patients that sexological bodywork is performed. The ethical problems that relates to holistic medicine in general is even bigger when it comes to the sexological clinic.

In itself there is nothing un-ethical about sexuality or sexological treatment. Sexuality is according to many classical and modern thinkers what basically drives us in life. Life energy and sexual energy is the same. So sex and life is pretty much the same. Having sexuality and being alive is much the same. Not having one’s full power because of repressed sexuality can be a really big problem, with many physical, mental and social symptoms, and sexual healing is a most natural thing for a holistic therapist, when patients presents these symptoms. But sexuality is hot. It is a taboo in most cultures. Most people in the west have issues with sexuality making this a difficult field to work in, as these people – out of envy, fear and projections - can blame you of unethical conduct, even if you have an impeccable practice. So you need not only to be ethical, you also need to show the world that you are. And the more “ethical rules” there are, the more rules you can be accused of braking.

Medical ethics provides us with rules and principles about how we as physicians can benefit our patients without doing harm; this goal is the essence of ethical medicine. Contemporary “sexual-ethical rules” were set up to protect patients from being sexually abused by their physicians or sexologists, but surveys document that the existent “ethical rules” do not prevent sexual abuse of patients by their therapists. On the other hand they make holistic physicians, sexologists and CAM-therapists using bodywork especially vulnerable to accusations of unethical behaviour. The fear of being harmed by open critique in the media makes many physicians abstain from using CAM-bodywork, therapeutic touch, and sexological manual therapy, thus depriving many chronic pain patients the healing care they desperately need.

The standard ethical rules in medicine and therapy are thus not working well and should be revised. A deeper understanding of sexual traumas and sexual healing enables us to evaluate the general validity of ethical rules, and the specific ethics of sexological therapies and CAM-bodywork. We discuss the ethics of manual sexological techniques, like “vaginal

acupressure” with therapeutic asexual, genital touch for dyspareunia and vulvodynia and Betty Dodson’s sexological method and “the sexological examination”, where direct sexual, clitoral stimulation are used to break the orgasm-barrier in anorgasmia.

The problems of consent are discussed. Sexual desires acted out without ethical consciousness are potentially harmful, and the Hippocratic ethical rule of “not abusing the patient’s body” must be well respected at all times. We conclude that therapeutic touch is ethical and should be allowed, but understand that different countries and cultures have different rules and laws.

## **Introduction**

The physicians around Hippocrates 300 BC used in their famous “character medicine” (1) intimate conversations, bodywork and spiritual exercises. The Hippocratic physicians were extremely aware of medical ethics and the Hippocratic Oath contained a promise of “not abusing the patient’s body” and regulated thus the physician’s behaviour (1). Character medicine induces salutogenesis through rehabilitation of the patient’s character (2). When patients step into character they improve self-esteem and self-confidence, uses their talents better, and create more value in their relationships, and thus increase their sense of coherence (SOC) (3-10), which according to a large body of scientific evidence induce healing of both physical and mental diseases (11-15). As we have two genders, a natural part of this process was the rehabilitation of the patient’s sexual character (1).

According to Corpus Hippocraticum bodywork like healing massage with and without oil was a central part of the holistic medical treatment, and the Hippocratic medicine included intimate pelvic massage through the bodily openings, which was believed to balance the female psyche and cure diseases like “Hysteria” (1,16,17). Similar techniques have been used for millenniums in India as a part of the tantric tradition, and presumably many premodern cultures.

Hippocratic character medicine was built on a theory of four basic elements, which according to Greek anatomical science were represented in the body by four bodily fluids. In spite of significant progress in anatomical understanding, it is still generally believed in holistic medical science that bodywork is essential for the healing of both somatoform and psychoform dissociation (18,19). In so many ways contemporary holistic medical science has been validating the methods of ancient Greek medicine and for more than two millennia became the holistic medicine of whole Europe - and a significant part of the near orient.

The development of natural science during the last century has given us the pharmaceuticals used by contemporary biomedicine, which has now become the dominant medicine in Europe. In Asia and Africa CAM is still dominant, and in the USA CAM is now again becoming the preferred medicine with more CAM-consultations than biomedical consultations after 50 years of biomedical dominance.

Biomedicine has made it possible to treat patients without the need for bodywork and healing touch (20), thus avoiding the problematic nudity, and physical intimacy of the classical holistic medicine. Except for a few clinical standard procedures like the physical examination including pelvic examination, and some tools of manual medicine i.e.



manipulation of the spine in lower back pain, the biomedical physician rarely do touch and undress his patient.

The International Society for Holistic Health, a society for the physician, therapist and researcher in the field of scientific holistic medicine, has in it ethical code for holistic medical practitioners two rules regarding the therapists ethical conduct: "The practitioner must not: Exploit the patient economically, philosophically, religiously, sexually or in any other way. The consent of the patient does not free from this." And "The practitioner must not: Engage in a sexual relationship with the patient." These rules are copied from the ethical rules of biomedical doctors; they secure that holistic physician and therapists are behaving as well as the biomedical physicians, but they might not be optimal for their purpose.

In the shift to biomedicine the complex ethics of holistic medicine expressed in the original Hippocratic rule "do not abuse the patient's body" has been changed to the much simpler rule of contemporary biomedicine: "do not act out sexually". For most physicians these rules are saying the same, but a sexual relationship is not always abuse. Sometimes it can be helpful, as in the famous example from Masters and Johnson's clinic, where a female physician worked as substitute partner for male patients with erectile sexual dysfunction (21).

Today both CAM and advanced holistic sexology are using methods that use sexual elements, making it necessary to reconsider the medical sexual ethics. Another reason to analyse medical sexual ethics is the sad fact that in spite of the simplicity of the ethical rule of not acting out sexually, sex between doctors and patients are extremely common, and the violation of the ethical rules are causing many problems both to patients, physicians and their societies. Violation of ethical rules are also one of the most common accusations in the media against doctors and a bare accusation can harm the doctor's whole career, also when the physician is later completely cleared.

In studies with 1,891 responders, 9% of the physicians admitted to having had a sexual relationship with a patient (22) and many more were likely to have had it without admitting it, as such an admission to break the "ethical rules" often have dire consequences for the physicians career. In one study 29% of the responding therapists reported that at least one of their patients had experienced sexual relations with the most recent, former therapist (23). Much more common than having sex with a patient is having sex with a former patient; only a 37% of the physicians opposed sexual contact with a former patient, while 94% opposed sexual contact with a current patients (22).

In spite of most doctors finding it acceptable to have sex with former patients, and in spite of the fact that no valid arguments have been put up against this, it often has dire consequences because of strict "ethical rules". One example of this is a well-respected gynaecologist in the United States, who eight years after treating a patient became her partner. He broke a very restrictive ethical rule of the local medical association of never having sex with an ex-patient, and he had to leave his job at the hospital (24). From a rational perspective this is an example of an ethical rule that harms not only the physician, but also the many future patients he could have helped, and in the end also the medical society now having to expel one of its fine members for unethical conduct. Many more examples like this exist.

Accusations of unethical conduct has been raised against one of us (SV) in the media some years ago by a group of psychiatrists that found the procedures of a pilot study in sexological, manual therapy (17) unethical. This media campaign had strong negative impact on our research in holistic medicine, even though we have had no patients complain about the

treatment that helped every second patient without harming anybody (11-15,25,26), which was verified by the police investigation also.

A later investigation by the authorities concluded that our holistic medical treatment had no ethical problems and that the accusations for abuse were false, but damage was done, and valuable funding lost. Public accusation for breaking the medical ethical rules, or just spreading such rumours are often-used and highly efficient weapons against colleagues in inter-collegial power-struggles, where holistic medical physicians, sexologist and other alternative therapists who use bodywork are especially vulnerable to such accusations. The result is that many therapists avoid using bodywork in spite of this kind of therapy being the only way to heal somatoform dissociation (18,19). Ethical rules that create such a severe hindrance for the physicians, that they do not dare to use the tools needed to treat the patients, are not ethical in our final analysis.

These examples indicate an urgent need for deep exploration into the difficult field of medical ethics and if possible, a change of the rules of medical sexual ethics, in order to make them much more beneficial and much less harmful, both to patients and their physicians. We need to analyse when a physician-patient relationship is actually harmful and traumatising to the patient, and when it is not, to see if we can pinpoint the ethical principles and sharpen the “ethical rules”, so that we can protect the patients from sexual abuse, and in the same time make rules that do not harm the physicians or unnecessarily restrict his ability to use the therapeutic tools that help.

In this chapter we first look at ethical problems in sexuality in general; then we look at ethical problems in sexological and holistic manual therapy and finally we look at the ethical problems in the physician-patient relationship.

## **Ethical problems in sexuality**

### **When is sex harmful?**

We need our sexual practice not to cause sexual traumas and if possible we would like sexuality to be a source of pleasure and personal development. We would also be very happy if our sexual behaviour leads to sexual, psychological and existential healing of our partner and our self.

To avoid harming each other we need a thorough understanding of what sexual behaviour causes sexual traumas. A logic way to investigate this seems to be an analysis of the loss in quality of life of people getting sexual traumas. Unfortunately no thorough, prospective studies have been made on this, making it impossible to analyse the negative effect of sexual life events. Several retrospective studies have been made documenting a strong association between abusive sexual life events and quality of life; Table 1 list such findings from our own study (27, 28).

Global quality of life is in contemporary holistic medical science often seen as the most important endpoint in studies, and it seems quite clear and logic that events like incest and rape are associated with low quality of life. But it is very important to remember that a low quality of life also is associated with high vulnerability increasing both likelihood of getting involved with sexually traumatising events, and the likelihood of being traumatised by a

sexual event. Sexually traumatising events will decrease quality of life, often taking the patient into an evil circle of inviting abuse by playing the victim and being victimised. Being raped is an indicator of being vulnerable. Incest is an indicator of a dysfunctional family. The negative effect of rape or incest is thus not so easily established, and the research on rape has demonstrated what has been called posttraumatic paradoxal growth (29-33): the raped girls are seemingly doing better than the girls not being raped. These data are very disturbing to our whole understanding of sexual traumas, and makes us aware of the complexity of the subject. What looks like a trauma can be a healing event (34).

In spite of these reflections, sexual assaults are known to be among the most traumatic of events and sexual torture is internationally acknowledged as the most evil and destructive methods of torture, and many sex-torture-victims are never rehabilitated in spite of intensive therapy.

Rape is intentionally used in war to destroy and enslave the enemy, and rape of a virgin has in pre-modern cultures been regarded as a sin comparable to murdering the girl and the rapist given a similar punishment. Sexual abuse of a patient's body has since Hippocrates been considered one of the most fundamental violations of the physicians ethical rules; a serious crime followed by severe punishment by the Gods. The traumas of violent incest are known from clinical practice to be among the most traumatic of life event (35-37).

So incest and sex with children are extremely harmful, as is sexual violation by force. In accordance with this our study of the correlation of life events and global quality of life documented that rape, incest, and sexual assaults actually were among the life events associated with a very low quality of life of the victim (see table 1). We found such events similar to events like "threatened with violence to the family" and statistically worse than the events of "brain-bleeding" and "two psychiatric hospitalizations".

But things are even more complicated. Some people are actively seeking to become victims of sexual violence, and sexual masochists are often paying prostitutes money for sexual slavery and forceful sexual abuse (35-38). People are often filled with strong and strange sexual desires leading to all kinds of difficulty and developmental crises from sexual abuse they first gave their consent to.

One theory is that these people are actually searching for healing from early sexual abuse by seeking similar events, as they only can heal by getting back into the traumatic events, and need present time abuse as support for going back (39). This theory is not in accordance with our clinical finding, since many such patients do not recall sexual abuse in childhood during therapy (although some do). From a philosophical perspective these traumas seem to be inherited from their parents in an "energetic" or symbolic way; they are often called "karmic traumas". So one theory of paradoxal posttraumatic growth is that patients who need these events to heal actual or symbolic "karmic" traumas subconsciously attract these events. Philosophies of this kind coming to the west from Asia, especially Hindu and Buddhist philosophy from India, China and Japan are becoming increasingly popular. It is important to underline that the teachings of many of these philosophies are not easily rejected by scientific arguments. We often need to work with "karmic" traumas in the holistic clinic, as patients present traumas, they impossibly could have had, like one patient "recalling" the pictures of being raped by 100 soldiers during a war, and presenting the emotional content of the trauma in therapy. An alternative interpretation of this "karmic trauma" is that we are talking about "implanted memory" (40), but as there is no claim of this having happened in reality, this term does not seem appropriate.

**Table 1. Major events in life (selected for illustration). The connection between global QOL and 1,000 different life events; only statistically ( $p < 0.05$ ; NS: Not significant) and clinically significant factors listed. Difference in global QOL is measured according to the Integrated QOL theory, and is measured with the validated SEQOL questionnaire\*) Difference in percentage between the worst and the best off (single events), or calculated with the method of weight modified linear regression (impact of all events)**

Life Event (impact of single event)	QOL-difference (%) *)
Sexual assault by well-known offender	-20.8
Threatened with violence upon family	-18.6
Victim of rape	-15.7
Incest, without intercourse	-15.4
Sexual assault: Pawing	-13.9
Expulsed from a group	-12.9
Lack of care in childhood	-12.3
Attempt of rape, 1st time (women)	-12.1
Two psychiatric hospitalisations	-11.9
Registered in a credit-bureau	-11.9
Cannot run	-11.9
Other serious physical disorders	-11.5
Got kicked under attack	-11.2
Sex harassment	-10.8
Brain bleeding (apoplexy, stroke)	-10.3

Some philosophers with this line of thinking believe that even sexual assaults in childhood are invited by a vulnerability caused by the karmic traumas, and that these events happens for a higher, spiritual reason. How repulsive this thinking might seem, placing so much of the guilt on the victim, the perspective often helps severely abused patients to assume responsibility for the experience.

The perspective of karma creates order in chaos for the time being, and allows the patient to integrate the traumas caused by the abuse, which is important for existential healing (salutogenesis) (3,4,41-43). In the course of therapy such “therapeutic philosophy” must be carefully de-learned (40).

To conclude this paragraph, sex is harmful when: 1) the victim is too vulnerable, or 2) too much force is used, 3) leading to a sexual experience which is overwhelmingly painful (or pleasurable) leading to repressed emotions, 4) and the event induces a destructive philosophy or self-image. If 1), 2) and 3) are happening, but this is leading to healing, this sexual event was not harmful, but beneficent. This can be the case in holistic sexological therapy, based on the principle of similarity, where the tool of “controlled abuse” are being used (44). This might be the most difficult problem to solve in this chapter: That the fruit of any sexual event only can be known afterwards. Some events like incest and rape are very likely to damage the patient; sado-masochistic games are presumably not, in spite of physical and mental pain being a core ingredient.

This is the essence of the paradox we need to deal with: sexual torture in a prison is damaging; sexual torture in a swinger club is not. What in the end determines, if a sexual event is healing or harming is if the person needs it to happen. It is such a complex understanding of sexuality we need to integrate in a pragmatic medical ethic.

### What is the damage from sexual traumas?

Research has documented that sexual traumas can damage a person's sexuality, mental health (i.e. self esteem), physical health (i.e. cause chronic pelvic pain and primary vulvodynia), quality of life, and the character, mission of life and existence at large (45-51). The many different damages are listed in table 2. Lack of more accurate research data makes it impossible to quantify the relative damages.

### How are we harmed by sexual traumas?

What is it exactly that is damaging about sexual abuse? A full scientific understanding of this question will presumably allows us to reverse most of the damaging effects of the sexual neglects, assaults and abuses, many of which are listed in table 2.

According to the life mission theory (45-51), what really damages us is what damages our philosophy of life. A negative decision taken during a painful traumatic event is cementing a repression of the painful emotion and thus a reducing of our existence as the repressed life-energy is not accessible for us anymore. Accumulated negative beliefs and attitudes can destroy our health, quality of life and general abilities (35-37,41-43). Such negative life-decisions are "generalized justifications" by which our painful responsibility for the situation is transferred away from us (the self) and into the outer world represented by mind (53). Thorough analysis of complete lists of repressed, negative decisions recovered from extensive, sexual traumas in holistic existential therapy with sexually severely abused patient (37), illustrate this negative impact of the sexual abuse, giving us a good understanding of the damaging effect of sexual violation.

If we make sure that the person we are with is not overwhelmed by negative feelings and emotions we can be sure that the person is not traumatised; it does not matter in principle if we are taking the patient into difficult feelings related to sexuality or into different kinds of feelings. Feelings that can be contained are not harmful. From a Jungian perspective (54) there are three different sources of sexual traumas:

1. From the beginning of life we are created by a somewhat "impure", sexual energy, causing what has been called "karmic traumas" (as discussed above)
2. We are adjusting to sexually imperfect and somewhat unhealthy parents in the womb and during childhood, setting up our internal circulation of sexual energy wrongly.
3. During childhood we are sensitive and very vulnerable and therefore inevitably accumulating sexual traumas from the contact with our parent, who unconsciously sometimes neglects us and sometimes violates us. We are in addition sometimes overtly abused and traumatised sexually.

**Table 2. Some of the most common negative consequences of sexual traumas***Psychodynamic damage on sexual life from sexual violations:*

1. Loss of lust, as an expression of repression of the wish to have sex.
2. Loss of arousal, as the patient abstains from involving her mind, feelings and body with sex.
3. Loss of orgasmic potency. Because of repression, pleasure becomes less intense, and more local, and less transcendent
4. Pain during intercourse and chronic genital pain as the pelvis and the local tissue of the genitals are holding on to many painful emotions from the trauma. Primary vulvodynia
5. Nymphomania and sexualisation. Sometimes the person gets so identified with being a sexual being that all her purpose of life is redefined to the sexual area, making the woman a clinical nymphomania.

*Symbiotic dependency. Happens often when sexual contact has substituted for care.*

1. Psychodynamic damage from sexual violations on body, mind and existence:
2. Boredom, passivity, low self esteem, depression - symptoms from repression of power: mind, feelings, and body
3. Physical chronic pain i.e. low back pain, muscular tension pain
4. Low self esteem, existential "invisibility" - symptoms from repression of sexuality, feelings, gender and character
5. Emotional pain, unhappiness and meaninglessness - symptoms from repression of self and purpose of life
6. Lack of sense of coherence, discontinuation of relationships or alienation, with father, mother, brother, a physician etc., including interruption of care or treatment.
7. Mental disease, patients with borderline personality and schizophrenia have very often been sexually abused

*Other problems arising from sex, sexual abuse, and self-abuse:*

1. STDs and hiv/aids (52)
2. Reproduction. Often the sexually violated patient will have problem with reproduction.
3. Children. Children of rape, incest and abuse can be genetically defective. A dysfunctional family cannot give what they need for a normal psychosexual development.
4. Alienation and sex-love split. Using sex as an expression of love might be very difficult, making love difficult, and arresting the spiritual and personal developmental of the patient. Often sexuality and love is compartmentalized in the personal life.
5. Sex for fun and power-games. When the motivation is no longer the joy of sensual pleasure, sex becomes often more motivated by using it for fun, and to obtain power.
6. Prostitution. Research has shown prostitution to be much more common among incest and rape victims; often the element of prostitution is a hidden trade of sex for money, food, accommodation, drugs or other material or immaterial benefits. Prostitution is associated with drug abuse, hiv-infections and an early death.
7. Sexually abusive behaviour. Most sadly, many of the abused children will become child abusers themselves, if the problems are not solved in therapy, using manipulation, social pressure, or brute force towards other in the sexual area.
8. Professional incest. Sadly many of the cases of professional incest might be carried out also by incest victims, which are unconsciously attracted to the professional position of power and legitimacy and to the therapeutic work with other victims, consciously or unconsciously motivated by their need to solve their own problems.

All this sums up to everybody being unavoidably sexually unhealthy with severe repression of sexual energy, inappropriate circulation of sexual energy etc. Some of us are more severely traumatised by sexual traumas. If we are severely violated i.e. as incest-victims this often makes us dysfunctional or even seriously ill. Often sexual violations causes mentally illness (i.e. borderline); sometimes it makes the victim behave irresponsibly i.e. becoming a prostitute; sometimes it gives inappropriate sexual behaviour (i.e. sexual aggression, sexual self-victimisation) (see table 2).

All sexual damage is basically about repressed feelings causing sexual blockages and lack of libido and negative sexual attitudes causing inappropriate or even destructive sexual behaviour. Symptoms of this are the many different kinds of sexual dysfunctions we notice in the clinic. As we need to go back to heal our old wound, every sexual event, even how negative, are likely to be a possibility of healing. This leads to the strange conclusion that a life-event is not in itself harmful; it will harm or help you depending on the way you work with it and take learning from it; this goes in principle for incest and rape too.

### What is sexual healing?

How are we healed sexually, if we have been sexually traumatised? Sexual healing is what helps us free our repressed sexual energy and related feelings (54), thus raising libido and personal power. That is done by changing the negative attitudes, which can be seen by its effect, since it turns the person back to a normal interest in sexuality and to constructive sexual behaviour. Interestingly, sexual traumas often contain both pleasure and pain (38) and sexual violation is often extremely painful emotionally, but there is often also an element of pleasure causing a lot of additional guilt and shame. So, for sexual healing we need to integrate the traumas, but allowing both the sexual pleasure and the sexual pain to surface (38).

In therapy the use of the principle of similarity is most efficiently doing this. When the patient is given a stimulus similar to that, which originally caused the problem, the sexual trauma will suddenly reappear in the patient's consciousness and sexuality will heal. Clinical holistic therapy has the tool of "controlled sexual abuse" (44), where a sexual violation is repeated symbolically, while the patient receives the holding and support that she missed during the violation, allowing her to integrate the sexual trauma and heal sexually.

It is not only in the clinic that the patient is helped by the principle of similarity; in real life everything bad seems to repeat itself until the day, where the patient is able to really understand and cope with it. Most interestingly many patients realise that they often have been co-creating the event together with the violator, because the event was needed for her to heal – i.e. a rape scene. This realisation often is almost unbearable, but assuming responsibility is what changes the pattern in real life, and after this the vulnerability causing the trauma will often disappear and everything change. Statistics shows the healing effect of traumatic events as "paradoxal growth" (29-33) and researchers have wondered if such results were artefacts, but from the theory of existential healing paradoxal growth (i.e. after rape) seems reasonable and likely to happen. This does not by any chance mean that rape should be excused or legalized. We just underline the fact that people with a background as victims often invite violators, because of a subconscious longing for healing and instinctively felt possible through a repetition of the trauma.

Sexual healing takes holding and processing (53), because without holding and support the patient cannot confront the past events that were overwhelmingly painful (or overwhelmingly pleasurable) and heal. Therapy must give the needed holding and as sex is related to the body, holding often needs to be physical, or even genital (55), as already Hippocrates and the old physicians discovered (1).

Most interestingly the need for physical holding in sexual healing is not always met – for ethical reasons. Many therapists have come to the understanding that the best way to avoid sexual abuse of the patient is by restraining oneself to never touch a patient. Such rules might work, when therapy is about changing behaviours, but in deep psychodynamic healing of sexuality they directly hinder the patient's healing. The fear of sexuality and the derived rule of not touching the patient have caused the biggest problem in psychoanalysis, namely its well-known lack of efficiency (see below on "Freud's trap"). As soon as sexuality appears and libidinous energy is invested in the therapy, the longing for intimacy and touch appears; this longing is not just a longing for sex, it is a longing for sexual healing. So it is coming from a much deeper layer in the patient that normal sexuality and with a much larger force, because if it cannot be fulfilled it stays unfulfilled for years, but constantly hindering the patient to be healed. Often therapy takes 10 years, and a lot of mourning and sexual frustration is experienced in the end, but only small therapeutic progress in spite of so many years and thousands of hours of therapy. Here we have a damaging effect of sexual neglect in the therapy, combined with sometimes "financial exploration" of the patient.

## Vulnerable teenagers and prostitution

The younger a person is the more vulnerable to sexual violations. Danish teenagers often start to have a sex life at the age of thirteen years, but they must be aware of the very special, intimate and emotionally difficult nature of sexuality at all times, and in spite of explicit sexual education by teachers in school, by parents and by their physician, early sexual experiences are often somewhat traumatising.

The understanding amongst Danish physicians today is that it would be more sexually traumatising for the teenagers to be held back, but that is an issue that can be debated. The larger the age difference, the larger will the difference in power also be, and the more vulnerable the weakest partner will be. If both were keenly aware of the dangers and pitfalls of a sexual relationship, even an age difference could be harmless. Teenage prostitutes often have a history of sexual traumatising and live their life with friends "on the street" using heroin as self-medication for existential pain. The heroin is offered free by pushers, who later teach them to hook. Prostitution, also of adult women, can result in low quality of life (56)] and these women are often left completely without lust for life, with no sexual desire or orgasmic potency.

It is important to understand that teenagers are not yet adult or fully able to care for their own interests and lives, so it seems logical to forbid teenage prostitution. The law against teenage prostitution in the USA these days do definitely not stop it, as there are now an estimated number of 500,000 teenage prostitutes in USA (57). It is time to reconsider the situation and understand the sad consequences of laws against teenage prostitution, which only seem to marginalize and repress the vulnerable teenagers, to make them criminals and to impose on them an unbearable feeling of blame and guilt. The only solution we can see is to



educate the whole population on the harmful effects of sexual abuse. If the society focused on healing its citizens and teaching them to treat sexual partners well in general, prostitution would be much less harmful.

In Denmark we have had what has been called the neo-sexual revolution (58), making sex as normal as eating and so legal and generally accepted, together with striptease, prostitution, and porno, that we now have publicly accepted brothels very much like the famous red light district in liberal Amsterdam and porno-canals on most TV-cables. Some politicians have even considered registering prostitutes and letting them pay taxes as ordinary, respected citizens.

This new, relaxed attitude towards sexuality has allowed prostitutes and porno models to enter the public arena like popular television programs on the public national TV, and some have managed to be both the star of the gasoline-station porn-movie-market and a TV-celebrity at the same time. The conclusion by the Danish public seems to be, that soft prostitution and the porn industry does not in itself harm the girl. What is harmful is the lack of acceptance and self-acceptance coming from painful sexual experiences, with lack of love and care, awareness, respect, and acknowledgement of the soul of the sex-partner.

We thus believe that it is time to understand the direction of the development in the next generations towards full sexual liberation in the western society; it is important to legalise also prostitution, and to start educating the whole population on the real dangers of sexual relationships. These dangers come from people being simpleminded, spiritually undeveloped, and unconscious of their impact and their bad intentions.

## **Ethical problems of sexological therapy and cam-bodywork**

### **The use of holistic medicine, CAM and bodywork in Denmark**

In Denmark both patients and physicians have questioned the efficiency of biomedicine (drugs). 40% of the population is chronically ill in spite of free health care and good quality hospitals. Several Cochrane analyses have shown, that the drugs being used often harm as much or even more than they benefit (59). This makes many patients return to holistic medicine and CAM, with 400,000 patients using it in 1990, 800,000 using it 2000 (60) and an estimated number of 1,600,000 using it 2010. Recent research has documented that psychodynamic psychotherapy is more efficient than psychiatric standard treatment (61-63), without having the adverse effects of drugs, making psychotherapy very popular. Problems related to the body, like chronic pain and sexual problems, are present with 50% of the population and more and more often being cured by holistic medicine (CAM-bodywork or psychotherapy combined), which seems surprisingly efficient (11-15).

The scientific synthesis of epidemiology, CAM and psychodynamic psychotherapy into scientific holistic medicine (clinical holistic medicine, CHM) (41-43) has given us a highly efficient, integrative treatments system, able to solve health problems for at least half of the patients (physical, mental, sexual, and existential health problems) in one year and 20 hours of therapy according to our recent clinical studies (11-15, 65). In holistic medicine, like in all psychodynamic and existentially oriented therapies, the patient's body and sexuality becomes

very important issues (54, 64) and holistically and psychodynamically oriented physicians and therapists believe, as did the ancient Greek and Indian doctors, that a healthy sexuality is a basic condition for physical and mental health and well-being.

But when bodywork more or less directly addresses the patient's sexuality, many sexual feelings can be provoked in both patient and therapist, which demands a high ethical awareness and an ability to discriminate sharply between acting out and treating the patient. This becomes even more complicated, when the therapist use their own sexuality to help the patient, as in the tool of being a patient's "substitute partner/surrogate partner" (21). The ethical consideration here has been, if in this classical example, the sexual intercourse during which the female therapist is curing the male patient's erectile dysfunction, is "abusing the patient's body" or "healing the patient's body". From a standard biomedical ethical perspective the behaviour of the therapist is definitely unethical; from a wiser, holistic-medical perspective the behaviour, which helped the patient and did him no harm, might actually be ethical conduct. All this indicates that things in this area are a little bit more complicated than we usually imagine, and that we need to be clearer about what ethical rules should guide contemporary and future holistic medicine.

## Sexological manual therapy

With this recent development medicine is somewhat surprisingly returning to its roots, and medicine is coming back to the use of bodywork (1, 20, 44, 55), including a number of intimate, medical, manual procedures (65-71) calling for ethical analysis. The direct work with the patients sexual energies and genitals as it happens in holistic sexology i.e. the treatment of vulvodynia with "acceptance through touch" (54) and "vaginal acupuncture" (1, 16, 17) is not very different from what is happening in the regular gynaecologic pelvic exam and we have found it to be ethical and efficient, although still possibly somewhat alienating to a traditionally trained biomedical physician and to different cultures and traditions.

A much more direct, sexological tool is the feministically inspired, radical procedure of "direct sexual stimulation" involving therapist touch of female patient's vulva to assist the patient's accept of own genitals. Instruction in manual masturbation including use of pelvic floor, pelvic movements, sound on the breathing, sexual vulva, direct stimulation of clitoris or vagina (digital or with clitoral vibrator) (65-71), sexual fantasies, sexual breath work, stimulation of nipples and other erotic zones, use of clitoral vibrator, which has been successfully used by Betty Dodson from the United States (73) to help women with anorgasmia and other sexual dysfunction. It includes the radical practice of all participants masturbating naked together in the therapy group and it is now practised by a dozen of Danish sexologists personally trained by Dodson. It has been used for almost a decade by over 500 female patients (65). Direct sexual stimulation has been used for many years for sexological research in the United States (69, 71), Denmark (65) and many other countries (70) and especially the sexological research by psychoanalyst and body-therapist Wilhelm Reich (1897-1957). This method has been extremely important for our understanding of sexuality (71) and the use of direct sexual stimulation in the sexological clinics makes an ethical analysis of the method relevant.

When it comes to the use of a "substitute/surrogate partner" most find this not to be a violation of ethical rules, because of the fact that studies have documented the therapeutic

value of this unconventional procedure with no reports of problems or patients harmed (21). It is quite clear that we need to learn a lesson about medical ethics from this. It is “holistic” in the widest sense of this word as the therapist uses his whole existence to help. But one might as well argue, that this practice is financial, if not sexual abuse of a love-sick patient, who come to this love-sick therapist (73) for the sexual healing and end up being sexually exploited. Most interestingly there is a lot of sympathy for a female therapist using this method for helping a dysfunctional male patient, and a lot of scepticism for a male therapist helping a dysfunctional female patient, because traditionally women has been the sexual victims of abusive men, but when the doctor is female, the roles are inverted and the female is in power, so this argument is not valid.

Hippocratic ethics was undoubtedly born out of the need for control of the therapist’s behaviour and stopping him from acting out, when sexually aroused from the close bodily encounter with his patient. Modern day physicians and therapists have honoured the tradition of medical ethics and all over the world physicians and therapists seem to agree about not acting out sexually.

The more directly sexual issues are addressed in therapy, the stronger the sexual transference and counter-transference will be. When as in psychoanalysis sex becomes the major focus and the patient starts work on their Oedipus complex containing some of the strongest sexual energies known to man, with often resulting in a mutual sexual interest going to an extreme level of intensity, and all too often leading to what we call “professional incest”. In psychodynamic psychotherapy there can also be a symbolic and verbal acting out, which has not been covered by the ethical rules. Most interestingly, a rule of not touching the patient is not really helping here. Quite the opposite this rule is a serious hindrance to the asexual, physical contact and holding necessary for releasing the sexual tension and allowing therapy to progress (53).

In psychoanalysis, the ethical rules seems to create what we have called the “Freud’s trap”, keeping the sexually awakened, female patient coming to the therapist for many years in spite of never getting the sexual healing she longs for (74). So we believe that the ethical rules should most definitely be revised, if the major concern is the therapeutic progress of the patient.

Ethics is about doing good for the patient and avoiding doing harm; this is essential and should be kept in mind at all times, also when we analyse the ethics of radical and provocative manual sexological techniques.

An ethical discussion is never about the moral of a society or about its laws or rules or about anything else. When a therapist uses his or her own sexuality as a tool to help others, for example when Betty Dodson masturbates before a group of female patients with anorgasmia, to excite them and teach them how to get an orgasm, or when she touches the patients genitals to improve a patient’s genital self-acceptance (72), the question is if this method is helping or harming the patient. Recent research has demonstrated that the method of direct sexual stimulation is extremely efficient and seemingly not harmful. It does not look like acting out on the videotape (72), but as she is serving her patients with her whole existence, using body, mind, spirit and heart. But we are still left with questions like: Is this an ethical practice? Is this a sexual relationship?

The concept of “substitute/surrogate partners” was bravely introduced by Masters and Johnson in 1959 (21). One of the most important contributions to the development of the scientific sexology came from a female doctor, who took the role as a substitute partner in the

research program: “Finally a physician, who openly admitted her curiosity towards the role as a substitute partner, offered her services...”

When she was convinced about the desperate need for such a partner for treatment of sexual malfunction of the unmarried man, she continued as substitute partner, and she contributed, both from her personal and professional experience, to develop the role to an optimal degree of efficiency” (21). This female physician obviously played an important role in achieving the impressing result of helping 32 of 41 dysfunctional male patients in the program. Her behaviour was never condemned or punished to our knowledge and the medical society thus accepted her behaviour as ethical, which still 50 years later is remarkable.

The conclusion from this work was that a doctor’s sexual relationship with a patient was beneficial, if the intention with the relationship was to cure the patient’s sexual problems and done with the necessary (written) consent. In many cases where physicians and patients have sexual relationships, there is no intention of curing or developing the patient; they happen from the simple and natural reason of sexual desire, combined with lack of self-control and lack of agreement with the ethical rules.

What about this method of “substitute/surrogate partnership” - is this acting out? Can this be ethical, in spite of the physician-patient-relationship being a mutual sexually satisfying relationship, when the scientific studies document that it most definitely helped the patients and did no harm? Can defining a substitute partnership be a solution for a doctor and a patient that continues to be hopelessly in love, in spite of not seeing each other, and even years going by?

## Psychodynamic perspectives on sexuality and sexual development

To truly understand harm from sexual events we need to understand the nature of sexuality (54, 64, 69, 71): What is sex? A simple answer is that sex is about inborn, sexual behaviour. Just feeling sexual pleasure or sexual desire when being with another person is not having sex; this is a completely internal thing in one’s own being. As we are sexual beings, our bodies behave much like animals; they are almost always interested in sex. Our body often reacts sexually to other bodies.

Then we have sexual orientation. Freud said that we originally were polymorphous perverted children, but now as adults we are likely to be socialised into heterosexual, genital sexuality. This means that deep down in our repressed sexuality, we find everything of sexual interest. But this is even more complicated: When a person’s psychosexual development is disturbed, the patient can be developmentally arrested at different stages, like the infantile autoerotic stage, the oral, anal or genital stage. Many schizophrenics seems to be poorly relating to the world coming from infantile autoerotism (64, 75) and treating schizophrenics almost always include healing sexually (54, 64, 75). Sexual energy accumulated within our body, and within our relationship, as we invest our libidinous energy in it. Searles and other fine therapists noticed that only the patients we love and are able to invest our libidinous energy in are helped by the therapy (76). The investment of libidinous energy and the sexual interest in each other is not damaging, but in general helpful.

Another important aspect of sexuality is that we according to Jung are double sexed beings with the opposite sex inside, but not being expressed; we can therefore have auto sexuality, fantasy, masturbation etc. When we have sex, we project the opposite sex into our

partner. Only this way we can feel the partner attractive. This makes all expressions of sexuality a mirroring of our internal state, and our sexual health a function of the flow or lack of flow of sexual energy within our self. Most unfortunately this natural inner circulation of sexual energy is highly vulnerable both to sexual violence and sexual neglect, especially in childhood, where we are totally dependent of relation to a sexual healthy father and mother. If mother and father are not able to circulate their own sexual energy freely and joyfully, this will according to Grof be felt already in the womb, and we will have inherited sexual disturbances with no traumatic course, but appearing in therapy as what has been called “karmic traumas”. This is quite complicated as the patient in holistic psychodynamic psychotherapy or holistic breath work can present traumas from rape or incest, with events that never really happened giving problem of temporary “implanted memories”, but such memories will always disappear, when the patient realisation that this is energetically inherited “karmic traumas”.

Freud noticed that everybody develops though a natural and necessary Oedipal phase, the boys wanting to marry their mother and the girls wanting to marry their father; he also noticed that most patients still had an unsolved issue with this called the famous Oedipus complex. All together this leaves us and every of our patients with a highly complex, personal, sexual history with something energetically inborn, something introjected at the foetal state, and always also with sexual traumas from childhood, where our father and mother sometimes did not show us the bodily and sexual interest we needed or violating our sexual borders when showing too much interest. Many female patients has been directly sexually violated in childhood (one in 5 or 7 according to most sources), some patients also violated or raped as adults and some have also violated other people, which seems to be even more harmful to them than being violated.

So we are sexual beings, coming from semen and egg, and from the very beginning created by sexuality. We come from sexual beings that were not entirely healthy in their sexual energies, because of a complex personal history, and we have lived a long life being sexually active in many ways, and been together with sexually active people with whom we have interacted, sometimes causing traumas, and sometimes healing traumas, and giving us our sexuality and life-energy back.

To be physically, mentally and existentially healthy we need a healthy flow of sexual life energy within our organism, and both mental and physical illness seems at least partly to come from blocked sexual energy, making rehabilitation of sexual health an issue of primary interest in the holistic medical clinic.

## **Ethical problems of sexual physician-patient relationships**

Let us now return to the difficult issue of physician-patient sex. How can we avoid that a sexual physician-patient relationship harms the patient? The first question we have to ask is what dangers such a relationship is putting the patient in and there are several important, ethical reasons why a physician should not to have sex with his patient (22, 23, 54, 64, 73, 77-80):

1. The patient's treatment is disrupted.
2. The patient's trust of therapists in general is destroyed.
3. The power is with the doctor/therapist making him able to sexually exploit a large fraction of his young female patients that admire him.
4. The patient who often takes the role of a child and the doctor being the parent can be attracted to the doctor, because of Oedipal sexual transferences, and a sexual relationship will block the needed solution of the Oedipus complex.
5. The physician exploiting his patients sexually will destroy the confidence and status not only of himself, but also of all other doctors.
6. The physician will most likely engage in the sexual relationship to act out on sexual counter-transference; by vesting the invested libidinous energy the physician waste the energy that could have set the patient free (76).
7. The physician will often be older and the patient young and vulnerable; this increases the danger of a sexual relationship being harmful.
8. The danger of the relationship being in conflict with the ethical rules of the physician's community and therefore having dire consequences for him.

From the physician's perspective a very good reason not to have sex with a patient is obviously that he has taken the Hippocratic oath: Into whatsoever houses I enter, I will enter to help the sick, and I will abstain from all intentional wrongdoing and harm, especially from abusing the bodies of man or woman, bond or free (1).

In spite of knowing this, many physicians and therapists engage in a sexual relationship with their patient, and through history many doctors have successfully married their patients. Sometimes a woman, who knew of an attractive doctor, became his patient intending to seduce him. It has been argued that a patient is unable to give consent to a sexual relationship, and that such a relationship always is harmful (80). We have found no clear scientific evidence that a sexual relationship between therapist and physician is harmful. An eroticised relation can be used to heal the patient (81) giving some worrying indication that we might be much too negative in our fear of and attitude towards sexuality.

In practice, because of all the difficulties listed above, it is difficult for a physician to avoid harming a patient, if they become partners right away. But a conscious and ethical physician can carefully avoid the dangers one by one, and put up a strategy that makes it acceptable to relate intimately with the patient. According to the analysis above of what causes sexual traumas, we feel safe to conclude that in the case of the patient and the physician falling desperately in love, decent behaviour and awareness of the points above will save the patient from traumas. We recommend that the following steps are also taken, and propose this approach to be included in standard ethical rules for physicians and therapists:

- Start by ending the professional relationship without hurrying, in such a way that the patient is either cured or transferred to another physician for continued treatment. Most doctors find it acceptable to start a relationship after termination of the patient-therapist relations, but it is wise to wait for at least six month before making the relation intimate. On the other hand it would be waste of life and love not to see each other; this might be the most difficult challenge, but it is very important and the physician must seek the help he needs to meet it.

- End a relationship with a present partner if any and end it for good. Do it now and be without a partner for a while, to find yourself. Take therapy for at least three month (10-20 sessions) to be sure that you do the right thing.
- Assume full responsibility for the new relationship to the patient, admit it openly to everybody, and behave decently, loving and respectful at all times. If you hide it, you probably do not mean it and you are most likely up to hurting you patient's heart seriously.
- Be extremely explicit about the possibility of the relationship being temporary, in spite of intense and honest feelings of love and the best of intentions. The relationship may not last forever as it might serve the purpose of personal development for both parties, not the purpose of finding a partner for life – in spite of both parties believing the later.
- If and only if it feels right: Get married.

Such a relationship might be for life, but is always for learning. It is bound to be painful which both parties should be well aware of. Success in transforming the relationship from a professional to a personal relationship almost always takes a third person, which must be a coach or a therapist with experience in this area.

This person will support the weakest part and balance the power often quite unbalanced between a physician and a patient, which is very good for both parties in the relationship. It is the privilege of the consciousness physician that he can turn such difficulties of potentially destructive and disastrous nature into a mutually beneficial learning experience.

Some physicians or therapists who do not know themselves well enough and who do not reflect upon their own existence in sufficient depth, feel urged to take the route of direct sexual involvement. Real troubles comes, when the relationship is first hidden and then suddenly involuntarily exposed, often leading to unlimited damage both to the patient and to the physician.

The physician can lose his whole career, wife/husband and family, friends, and the earned position in the society. The patient will often be deeply hurt and lose faith in physicians/therapists and in therapy in general and can thus have remaining unsolved problems for many years thereafter.

It is only fair that these physicians are excluded from the medical society, although a more rational approach considering the patient would be to treat the misbehaving physician for his personal problems, to help him/her integrate his "mana" (54), which is projected into the patient.

If the therapy is successful this would make it possible for him/her to be able to help the suffering patient, who might else be lost for good, or at least be out of therapeutic reach for years. The physician, who is not in love with his/her patient, but voluntarily chooses to abuse his patient's body, finances, or the patient in any other way, can normally not be helped by therapy, as he/she insists on being evil (49). The only solution here is unfortunately the withdrawal of the medical licence, and often also imprisonment to protect other patients from being abused.

## Discussion

Basically ethical rules are securing that people do not harm each other. Sexual ethics is about securing that we are not harming for example children with our inappropriate sexual behaviour. The trans-cultural taboo of incest is securing that parents do not sexually abuse children. The rule against adultery is securing the general population against STDs and it gives children at least some confidence in the man raising them being their father. The rule about the doctor not acting out allows the family to entrust the patient to the doctor's care and allows the patient to be able to undress safely, when needed for examination and treatment. Many of the ethical rules are thus extremely practical.

But other ethical rules are not so wise, i.e. the rule of not touching the patient, which is a completely new rule in medicine, arising from modern culture being very mental and far from the body. Most unfortunately these new "ethical rules" are extremely harmful to medicine and they may very well be the reason, why we have 40% of the whole population being physically and mentally ill today. Without the sexual healing of the patient we cannot at all heal the patient's body or mind so completely dependent on sexual health – the healthy circulation of the basic life-energy of our organism. We think that it is important that ethical rules are not made so strict that they are a hindrance to the natural, healthy processes of life, like people finding each other and wanting to be together for life. If the doctor-patient relationship is brought to a natural end, a physician and an ex-patient who love each other should be allowed to a relationship and marriage. We recommend that the medical ethical rules always are making this possible. Medical ethics has most unfortunately borrowed its rules from the anti-sexual moral attitudes of a conservative, Christian society, not from rational scientific examination of induced harm from sexual abuse. Contemporary ethical rules are creating a lot of fear from touching the patients, fear of being accused of sexual abuse. This fear is very realistic as a physician who does bodywork is highly vulnerable to false accusations of sexual abuse. There seems to be no documentation that body-workers abuse their patients more than other physicians and therapists. We must encourage the medical societies to change the rules so that the patients can get the bodywork, therapeutic touch and manual sexological treatment they need, without their doctor fearing for his career.

In general sex is not harmful, but a natural and healthy part of life and a condition for a full, loving relationship between man and woman. A healthy sexuality is a condition for physical and mental health, and personal development of character, spirit and purpose of life. A full insight into sexuality is extremely important for knowing one self. A sexual relation between two adults can be harmful if:

- there is an unloving relationship with the lack of awareness, respect, care, acceptance and/or acknowledgment of the other persons soul
- there is a conflict of interest leading to power struggles and traumas (a physically, emotionally or spiritually painful experience, and a negative decision modifying existence (37))
- the soul, mind, feelings, body, gender, integrity, wishes, status or power of the person are seduced, manipulated or invisibly violated
- an important relationship is broken or damaged
- care or a medical treatment is interrupted.



On the other hand, when a sexual relationship is not physically, emotionally or spiritually painful, when responsibility is not failed, when the person or the persons perception of self or other is not in any way violated or damaged, and when important relationships, care and treatment is not interrupted, sex is not harmful. Sex can be healing, and even a painful sexual event can induce sexual and existential healing according to the principle of similarity.

We have analysed the holistic sexological manual procedures and found them ethically acceptable. We found no ethical problems with holistic medical procedures that involve sexuality, like direct sexual stimulation, or substitute partnership. We did find problems with a physician having a sexual relationship with a patient, but no problem with the physician and the patient becoming partners in life after therapy is ended. Sexual transferences and counter-transferences not taken well care of can easily destroy both the life of the physician or therapist and the life of the patient. Sexual desires acted out without ethical consciousness are potentially harmful.

We believe that most societies of physicians and therapists have not understood sexuality well enough and that many ethical rules, i.e. the rule of not touching the patient in psychotherapy, are counterproductive and therefore not ethical, in spite of looking ethical at a first glance.

Only through a deep understanding on the nature of sexuality and sexual trauma can we secure a truly ethical, beneficial and not harmful conduct as physicians and therapist. Ethical rules must come from wisdom, not from the contemporary moral of the society or the medical community.

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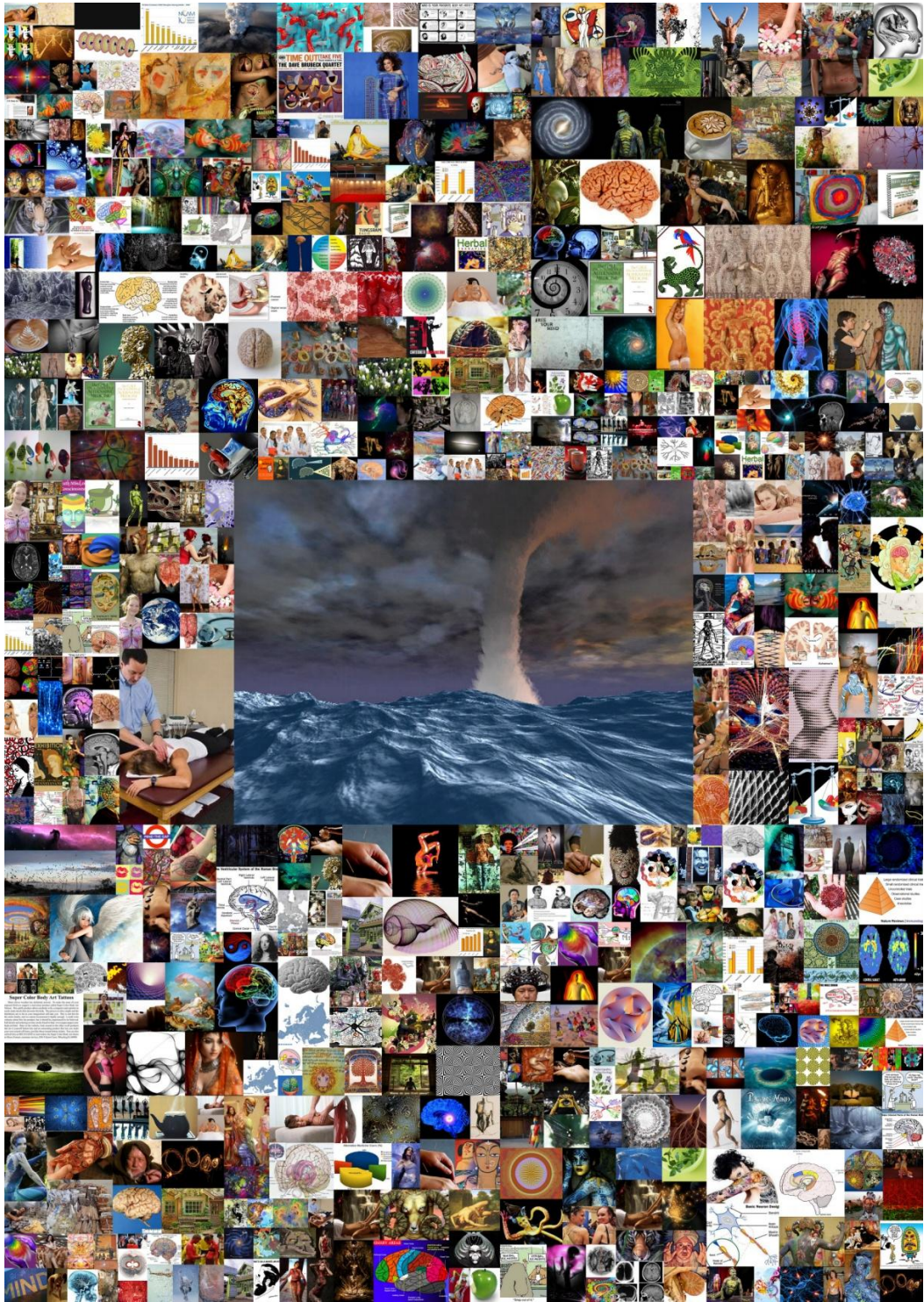
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## **Exercise**

1. In an anonymous survey amongst psychiatrist in Holland reported one in 10 that they had had a sexual relationship with a patient. Why do you think this is so normal? What do you think the consequences are for the patients?







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## **Integrative ethical theory**

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We have presented an integral ethical theory with three dimensions: 1) intent, 2) outcome and 3) the quality of the act, well known from a) the duty ethics, b) the utilitarian ethics and c) the feministic ethics. This theory makes it possible to give a complex evaluation of the ethics of a complex holistic medical or sexological treatment. We have introduced a new “rule of integrative ethics” that allows us to evaluate the medical ethics of complex therapeutic behaviour. This ethical model is useful for clinical holistic medicine, especially to evaluate the ethics of concrete therapeutic actions in advanced holistic medical and sexological treatment. An integrative medical ethic is useful for teaching ethics to holistic therapists and physicians and for training students in holistic medicine.

### **Introduction**

Ethics is the philosophy and science about doing good. It must be discriminated from the moral of society, which is the set of moral rules that a specific society requests its members to respect and follow. Medical ethics can sometimes be in conflict with the morals of society; it can be immoral to kill but ethical to perform euthanasia or it can be immoral for 13-year old teenagers to have sex but ethical to give them birth control. In a society physicians often receive permission to violate moral rules of society, if the actions are well based in medical ethics. Therefore it is urgent that the principles of medical ethics are clear, logical, fair and practical.

The medical ethics has its roots with Hippocrates (460-377 BCE), who worked with non-drug therapy. His aim was to help people cure their diseases by stepping into character, knowing themselves, and using all their talents to create value in the world. One thing that could seriously harm a physician’s ability to help was if his reputation was destroyed, if he was mistrusted, or if he destroyed his therapeutic relationships by having sex with his patients. All this meant special demands and conduct for the behaviour of a physician, hence the famous medical ethics (1).

With the establishment of the Research Clinic for Holistic Medicine in 1997, expanding to the Research Clinic for Holistic Medicine and Sexology in 2003, and into the Nordic School of Holistic Medicine in 2004, all under the auspices of the Quality of Life Research

Center in Copenhagen, we have gone back to clinical medicine, i.e. a medicine that is examination and cure in the same process (2-4). For almost two decades we have been doing research in non-drug medicine - clinical holistic medicine - which is basically the combination of conversation and touch therapy (5-9). Of talking and touching, touching is far the most emotional, and the most difficult to master. In spite of this, it is well known that bodywork and touch therapy has no adverse effects, if it is done gently and without use of perfumed, aromatic oils (10). Even the most vulnerable and fragile of patients, the mentally ill children and teenagers has been shown to benefit from therapeutic touch (11), but even if you avoid extremely vigorous touch, the patient can still be violated sexually, hence the classical Hippocratic rule of the physician avoiding abusing his patients sexually. We know of no therapist that does not agree in this simple and basic rule of professional behaviour. So this is simple.

What is not so simple is to create value for the patient just by talking and touching. When the therapist's words and behaviour is used as medicine – when the doctor is himself the tool (12) - the need for a clear and practical medical ethics becomes obvious. Most unfortunately medical ethics has not developed much since Hippocrates, while the ethics as a philosophical subject had undergone a tremendous development. Most unfortunately, philosophical ethics had divided into three major schools, none of them completely efficient in guiding the practice of medicine and therapy. We therefore in our research project on clinical holistic medicine started to develop an integrated medical ethics that could fill the gap (13).

As teachers of the therapy and the training of therapists we have assumed responsibility for our patients and for our student's behaviour. The practical training of the student to behave optimally together with the patient was what most urgently forced us to work on formulating a new more comprehensive medical ethic.

## **Holistic medicine and ethics**

The Nordic style of holistic medicine and therapy is somewhat different from many other countries, especially America. In the Nordic countries sexology is often an integrated part of the medical clinic, while in other parts of the world the sexological clinics are separated from the medical facilities. In the US, a doctor is rarely a sexologist and a sexologist is rarely a doctor. In Europe, strongly inspired by Freud (14), Jung (15,16) Reich (17) and many other therapists, researchers and sexologists (18-20) including many physicians has included work with the patient's sexuality in their clinical work.

As most other holistic therapists we believe that the process of healing one's existence comes about when sufficient resources are available for the patient. Our concept for giving this support is the four steps of 1) love, 2) trust, 3) holding and 4) processing the patient (3-9). This often leads to close intimacy between the therapist and the patient, often leading further into re-parenting and spontaneous regression into the most emotionally painful childhood and adolescent life events. The extreme closeness and intimacy needed for the patient's healing and the material of the patient's case story is not always as neutral to the therapist as wished for. The experienced therapist knows how to deal with all kinds of reactions, from intense emotional suffering, resentment and aggression, to transference, projections of love, strength and desire, all the way up to sexual excitement.



In the beginning the student and the inexperienced therapist often feels it both awkward and somewhat flattering, when the patient falls in love with them. The reaction to the patient turning on sexually, are often either disgust and condemnation or excitement and desire. The student is before anything a human being with his/her own repressed material, own vulnerable borders, and own sexuality. The repressed material can be activated, the borders violated, the sexual desire awakened, and from this arises many problems for most students.

It takes about 10 minutes to read the standard medical ethical rules for a student and unfortunately the sexual desire is often not well controlled by such rules. The inexperienced student is often in a very difficult situation regarding ethics, because of the rules being very tempting and very easy to go about. The only solid thing granting an ethical behaviour is the therapist being deeply founded in his/her own inner ethics, or “natural ethics” known from philosophy. The fundamental idea is that every man has an ethical nature, which often must be discovered in serious self-contemplation; what is almost always discovered is that in the essence of our soul, we are loving beings who wants to contribute with something of value to our fellow men.

## **Sexual issues in clinical practice**

A rule will often seem ridiculous, when reality comes marching in and a young man and a young woman fall in love and want each other. Such a relationship will often appear more important than anything else, including the whole education and medical carrier. In this situation ethical rules are much more likely to make the involved persons keep the relationship secret than to make them abstain from having the relationship.

When it comes to personal development, secrecy about a relationship between a patient and a therapist or student with elements of love and sexuality is almost certain to disturb or even arrest it. Applying standard ethical rules, which often cannot be respected even by experienced therapists to the students, are therefore not only meaningless, but even damaging to the learning and development of the student. As we definitely need our students to be ethical and well behaved therapists, the problem is now what kind of ethics we need to impose on them as their teachers, or more precisely: how we can make them solve their own ethical problems by doing a thorough analyses of their personal ethics and the consequent medical ethics.

If possible to formulate at all, we need an ethical theory to guide this important endeavour; we need a general and fundamental understanding of human ethics to enlighten all students and therapists about our deeply ethical nature and the extreme value of ethics. In addition to such a theory we need a strategy for couching the students into the development of a perfectly ethical practice.

## **The use of ethics**

First we need to understand that ethics is meant to guide our actions in order to do good for others in this life. Judging and punishing is generally not good. It leads to conditioned learning (Pavlovian, unconscious learning), with reflex inhibitions and accumulations of life-

pain, thus crippling of the soul and existence, instead of facilitating conscious learning, awareness and enlightenment. If we want to create a community of conscious and responsible people, we need everybody to develop a high degree of self-esteem, a full permission to acting on any urge, and a flexible system of feedback to notice impact of any action and efficient learning. The environment must be open and friendly, and everybody must assume that the other person come with a good intent.

Ethics can be used to judge the actions of other people, but being judgemental is often not of any value, unless the offender is completely expelled from the society. If one can choose between being a good example and being judgemental, the impact on a family or on the community will normally be a hundred times more constructive if you elect to be the good example. Rules are often carried in our minds and not in our hearts, making them easy to neglect, when a person can gain a personal advantage or can avoid confronting a neurotic pattern of behaviour dictated by un-integrated life-pain.

Depending on the understanding of human nature, ethics is something natural that must be looked for and found at the bottom of your soul, or something un-natural that must be imposed on man from the outside world. The life-mission theory (21-28) states that everybody the essentially in his soul carry a wish to do good in the world, using specific talents and gifts. According to this theory ethics is not only something that we can find and discover within ourselves, but something that is a direct expression of our innermost nature. Doing good for other people is what life is about. Doing good and making a difference in the world is the meaning of life, the fundamental reason why we are here. The more ethical rules, the easier it is to go into the mind, to go to a place of judging another person, and to lose connection to the heart and deep nature of self; ideally therefore we all carry a non-rule based ethics, customized to completely fit our own understanding of life and self.

## **A timeline strategy for integrating ethics**

There have been three major directions in ethical thinking: the duty ethics, the utilitarian ethics and the feministic ethics. With duty ethics the intention is what is important. If you kill a person with no intention whatsoever to do so, your action can still be ethical. The utilitarian ethics looks at the result of the action: if the person died, the action was wrong, even if you desperately tried to help him as a physician. The feministic thinkers have been looking very much into the balance between the male and the female components in ethical situations.

To integrate these three seemingly contradictory ethical philosophies has been a very difficult task, but obviously this is what must be done for us to have the best ethics, as most people will choose the combination of a good intention, good result and balanced actions. Only a fanatic will say that we just need to look into our heart, the result of our action is not important. Only an opportunistic person deprived of any scruple will say that we can be as evil as we want, as long as it maximizes the profit for me or for the world at large. And only a person with no roots into reality would state that now is all that counts, intention and result are not important at all.

So how can the three different ethical perspectives become integrated into a common ethical theory for use in holistic medical practice? A simple way is to use the timeline: Before an action we must look at our intention (or the intention of another person, directly if

possible, or through his/her statement of the intent), we must look at the probable outcome of our different choices of action, and for each of them we must visualise the events that will come in order to see which line of events born from these different possible actions will be the most harmonious.

In the middle of an action, after choosing the fundamental direction, we must keep an eye on our intent to be sure not to depart from an ethical route. Due to the emotional aspects involved, we must be keenly aware to interact in our best way, reflect and at all time notice our impact in order to evaluate if there is anything in our behaviour, understanding, or perspective that we need to correct. Finally we must be certain that every present situation is balanced between female and male energies, not being too much coloured by the element of “water” or of too much “fire”.

After the action we must contemplate on what we did, how we did it, and what we accomplished. Did I come from a good intent or did I catch myself coming from my shadow (25)? Did I act in fine balance, respecting both the male and the female aspects of the universe? Did I do the good I intended? What did I learn? What is the urge in myself and in the space and universe that I now feel? What will be my next step? Is there something or some relationship I involuntarily damaged, which I now need to repair before I can move forward?

## **An ethical theory based on the theory of existence**

To create a formal theory of ethics we need to map the dimensions of existence relevant for human ethics and to be sure to encompass the totality. The extended version of the life mission theory called the theory of talent (23) gives fundamental dimensions of human existence: love/intent, power/consciousness and gender/sexuality. Interestingly, these three dimensions correspond to the three ethical perspectives of duty ethics (love/intention), utilitarian ethics (power/consciousness), and feministic ethics (gender/balance between the male and the female). That makes the life mission theory an excellent framework for an ethical theory with the axes: 1) Intent, 2) impact, and 3) balance between male and female.

In a way, the ethical debate is done with, if one can use such a simple theoretical framework for ethical guidance in all our actions. The strength of such a model is that it invites anybody who knows it to look for these dimensions in themselves, and thus it helps developing natural ethics. This is especially important where a flawless ethics is a must, as in the training of students in holistic medicine.

## **A strategy for coaching**

It only takes about ten minutes to read and explain the ethical rules of physicians or other therapists to a class of students. The issue most intensely stressed is the ethical rules regarding sexuality. Sexual abuse cannot be tolerated and just one student or physician caught in severe misconduct can bring shame over a whole hospital or university, actually over the whole

medical society. In spite of this obvious fact, sexual misconduct has continuously been a problem, ever since the ethical rules handed down by Hippocrates.

In the modern medical clinic, sexual abuse during the therapy is extremely rare, as people not being able to control their sexual behaviour are likely to be regarded as compulsive sexual offenders and sent away for psychiatric care. The problem is when a physician or student and a patient fall in love. In this situation everything including the education or whole medical career loses its significance, compared to this relationship now commencing. In practice it is almost impossible to keep the two parties from each other and even awareness of the strict ethical rules forbidding a sexual relationship will most likely make the two persons engage in a hidden relationship instead and anyway.

## **Case study one**

A 50-year old, married psychotherapist and his 27-year old patient fell in love. She was in his therapy group. They started a sexual relationship, which they kept secret for about 6 months, until the day when she finally broke down and told another person that he drank and had sexually abused her. He was drinking, because he had severe emotional problems from this double life: a sexually highly dissatisfying life in his marriage and in the darkest secrecy, a promiscuous life with prostitutes and now also the sexual abuse of a patient. She had not been able to get help from another therapist, neither could she tell her girlfriends about the relationship, because she was afraid that the new therapist or some of the girlfriends would denounce him and thus ruin his career. After this incident the patient was supported and refused to see him again, which he insisted. Only after she had threatened him with the possibility of reporting to the ethical committee of the psychotherapist association did he stop bothering her. The psychotherapist is still working as a therapist. The patient is now in therapy healing her wounded heart and body, but the new therapy is facing severe difficulties, because of her serious distrust and intentions of her new therapist. She has seemingly been severely damaged existentially by the abusive relationship.

This situation is unfortunately not unusual and in one study 23% of the incest victims reported a new sexual violation from their therapist (29). Seemingly we are facing a paradox: all the ethical rules are working fine, except with the people, who really need them. Instead of helping, the ethical rules seem to be a destructive barrier making it impossible to talk about what is really going on, making the patients and therapist who fall in love and engage in a relationship so wrong that they must keep it a secret forever. Not being able to share this with anybody, the relationship turns out to be much more harmful, than it would have been in an open and accepting society. The conclusion is that a sexual relationship between a therapist and a patient is damaging; but what seems to be most damaging is the consequences of the wrong and the deep secrecy making it impossible for both the patient and the therapist to talk about it with anybody and to seek supervision and help.

If the therapist in the above mentioned case had been open about his sexual problems in the first place, if not with anybody else then just with his wife, the situation could not have persisted for years and developed as it did. If he just could admit it to his own supervisor and therapist, the situation would not have gone completely out of control and he could have been helped to confront his own feelings and personal problems creating the emotional pull in

order to take his projections back (30). If it was not a “deathly sin” leading to expulsion from the society of psychotherapists, the patient could have gone to another therapist for help, or she could have talked with her friends about it.

## Case study two

A 30-year old student in holistic medicine fell in love with a mentally ill participant of the same age in a quality of life course and shared her experience and different thoughts with her supervisor. As a sexual relationship seemingly could not be avoided, she asked permission to sleep with him. The supervisor gave the permission, under the condition that she takes full responsibility for the impact of her actions. She slept with him and a month afterwards he entered an almost suicidal crisis. In the middle of the night she took her car and drove 300 km to assist him and help him through his crisis. She felt an extreme degree of empathy and responsibility and knew that she was in it with everything she has got. She stayed intimate and closely emotionally connected to him for about 100 intensive hours in a row during which she connected with her supervisor by phone. Finally she managed to get him to trust her and to receive the holding he needed for healing existentially. He now succeeded to integrate the strong life-pains that made him want to die.

### **BOX 1. CAM often use one or more of the five central, holistic principles of healing the whole person (from 31)**

- a) The principle of salutogenesis: the whole person must be healed (existential healing), not only a part of the person. This is done by recovering the sense of coherence, character and purpose of life of the person
- b) The similarity principle: only by reminding the patient (or his body, mind or soul) of what made him ill, can the patient be cured. The reason for this is that the earlier wound/trauma(s) live in the subconscious (or body-mind)
- c) The Hering's law of cure (Constantine Hering, 1800-1880): that you will get well in the opposite order of the way you got ill
- d) The principle of resources: only when you are getting the holding/care and support you did not get when you became ill, can you be healed from the old wound (2-4)
- e) The principle of using as little force as possible (Primum non nocere or first do no harm), because since Hippocrates (460-377 BCE) statement "Declare the past, diagnose the present, foretell the future; practice these acts. As to diseases, make a habit of two things - to help, or at least to do no harm" (1), it has been paramount not to harm the patient or running a risk with the patient's life or health.

After this dramatic culmination of his old tendency to attempt suicide and his spontaneous regression to early childhood and poor mothering, it seemed that his mental and existential problems were to a large extent solved. She on her part took her projections back from him too, so her sexual desire was gone. In her next supervision session it looked more to her like an intense wish to help the young man, than it looked like a sexual intention in its own right. Giving her body will not be a part of her treatments, but here for some idiopathic reason this was inevitable. So they were in the end both set free by the episode, which from

normal moral and medical-ethical standards would have been unacceptable. She also learned about the dramatic impact of a sexual relationship with a patient, and why she needs to be extremely careful with this kind of involvement in the future. Without wise guidance this relationship could have ended tragically.

## **Therapeutic behaviour in clinical holistic medicine**

According to the holistic process theory of healing, holistic and existential healing happens when the patient encounters the repressed content of his or her unconscious. There are three steps in holistic healing: 1) feel, 2) understand and 3) let go (31). To facilitate healing, the therapist must support the patient, which is called “holding” (known as the “principle of resources”) (32, Box 1). At the same time the therapist must take the patient into painful emotions and gestalts - the traumas from early life - by exposing the patient to small doses of that originally made him ill (this is known as the “principle of similarity”) (32-39). The latter therapeutic re-exposure to the evil is called “processing”. As most of what gave us our traumas originally was evil, the key to healing is really treating the patient “bad” with the good intention of healing them. This is what happens in the therapeutic processing.

So the skilful therapist treats the patient good and bad at the same time; holding takes love, devotion, acceptance, patience, acknowledgement, respect and so forth (23), while processing takes small doses of controlled violence, abuse, neglect etc. as is well known from the advanced toolbox of clinical holistic medicine (8) and intensive holistic therapy (40-43). The necessity of “evil” actions in holistic therapy calls urgently for an ethical tool that allows us to evaluate each therapeutic action regarding its ethical standing. Below we present three examples in need of ethical evaluation.

### **Example one: A patient physically abused as a child**

A patient was severely beaten as a child. According to the principle of similarity, the therapist must beat him again, or do something similar to provoke and process him. The therapist must take the patient back to his childhood traumatic violence and (after getting consent) once again beat him. This is what has been called “encounter” (44). During such a session, the therapist through role-play, invite the patient to go back in time, into re-experiencing being children beaten by his father (now the therapist) and to once again feel all the anger and fear that the beating made him feel, and little by little understand what the violent abuse and repression did to him as child. What it did do his personality - to allow him to let go of all his repressed hate and anger and in the end to embrace, understand his father, and forgive him. This is a most difficult therapeutic process, as any therapist will know.

Is this an ethical action? To answer this question, we can look at 1) the intent, 2) the way the exercise was done and 3) the outcome. We need to compare it to the three steps of healing: feel, understand and let go. Regarding the first: If it was done with a good intent – to

heal – then we believe it was ethical. Concerning the second: If it was done in an empathic and balanced way, helpful to the patient, facilitating the recall of old feelings and emotions, facilitating reflection and understanding, and facilitating forgiveness and letting go of negative beliefs and learning from the childhood violent abuse, then it was ethical in our opinion.

Regarding the last: If it helped the patient to heal and forgive, it was ethical as we understand it– if it healed or supported healing, because it provoked emotion, understanding and letting go, it was ethical. If the patient learned from it and gained understanding and self-insight it was ethical in our opinion.

## **The “rule of integrative ethics”**

It is always difficult to balance these three factors: Intent, outcome and quality of action. The “rule of integrative ethics” is that if two or three out of these three ethical dimensions were fine, then the action was all together ethical in our opinion. Imagine that the exercise was well performed, and everything in principle went well, but the patient was not helped. We would not blame the therapist in that situation. Imagine that the therapist failed to do the therapy empathically, but that it was done in the best of intentions, and that it really helped the patient.

Again, we would not blame the therapist. Imagine that the intent was not good, but selfish, as the therapist himself had been beaten as a child, and needed to do this exercise for his own sake; if it was done emphatically and skilfully, and if it really helped the patient, we would not accuse him for being a bad therapist – but of course we would still give him critique and encourage him to take the therapy he needs himself.

But, if this was done with a selfish intent, and it did not help the patient, we would reject it as unethically therapy. If it was done in the best of intentions, but performed badly, so it did not help the patient, we would say, that it was not good therapy. If the intention was evil, and the act cruel and it really did help the patient, we would still blame the therapist for not giving good and ethical therapy.

## **Example 2: A cancer patient in existential trouble**

Now let’s take a little more difficult example. A cancer patient wants to live, but feels that she is losing herself – her hair, her body tissues, her dignity, wearing a ridiculous wig. The therapist wants to encourage her to be what she is, and love just that, and in this intent he makes a role play with her where he puts her wig in the office’s paper-bin (it does not destroy the wig, as the bin is clean and empty). After this she feels courageous enough to be bald and she does not wear the wig anymore. Was that ethical? It was done in a good intent. It was – at least according to the moral of society - a violation of her integrity and the outcome was good. As two out of three of these ethical dimensions were positive, the action was all in all ethically acceptable and good in our opinion.

### Example 3: holistic sexology: Healing a sexually abused woman using “acceptance through touch”

Sexual dysfunctions often come from lack of self-acceptance. A traditional cure for this is therapeutic touch especially if the therapist is able to signify acceptance by the touch, a technique known as “acceptance through touch” (1,8,45). Around the year 1900 therapeutic touch was often practiced as a swift kiss, but due to moral reflections this practice has now become rare. Let us use such a controversial practice as the next example.

A holistic therapist works on a severely sexually abused 21-year old woman. The therapist feels that just touching the patient by hand is not enough to heal her, and chooses therefore, after getting her consent for this action, to gently kiss her mons pubis (over the pubic hair and the pubic bone, at one of the acupressure points related to sexuality known as “Conception Vessel 4” in Chinese medicine (46)). The intention is to let her know that her body and genitals are completely lovely, acceptable and fine for him or indeed taking her father’s place psychodynamically.

The rationale for this action is clear: a kiss is maybe the most powerful bodily sign of acceptance, and the genital kiss is a well-known sexological procedure developed by van de Velde around 1900 as an exercise for couples (47). The genital kiss was a non-sexual interaction indented for lovers; it allowed a man to heal his women for sexual frigidity. Brecher wrote in 1969: “The genital kiss, van de Velde adds, ”is particularly calculated to overcome frigidity and fear in hitherto inexperienced women who have had no erotic practice, and are as yet scarcely capable of specific sexual desire”. In the example the procedure of the genital kiss seemingly did the job and helped the woman to acceptance of own body and sexuality. After the therapy she is able to enter a happy sexual relationship for the first time in her life. Was this action ethical? Let’s analyse according to the “rule of integrative ethics”:

- It was done in the best of intentions.
- It was not sex and therefore not in conflict with the ethics of Hippocrates (but as it was close to the vulva it was still in conflict with the moral of society).
- The woman was helped but it is difficult to say if it was this kiss that healed her.

The score are as follows: a) It was done with a good intention, b) the action was not sex so it was ethical according to medical ethics but at the same time not morally acceptable by society, c) the outcome was good. All in all this is therefore still an ethical act.

## Discussion

This kind of “doubtful” actions as shown in example three has been quite normal in the classical holistic therapy of Asia, guided by the principle often called “holy madness” or “crazy wisdom” (48,49). Holy madness is today often used in advanced holistic therapy and at advanced courses in self-knowledge and personal development.

With a traditional duty-ethic many actions performed in the state of “holy madness” must be rejected as unethical, but in the light of a complex, integrated ethics, many of the actions become also ethically acceptable. They are actually very helpful for learning and personal



development, because they turn reality up-side-down and force the students to think and reflect.

It must be admitted, that according to the integrative ethics, sex with a patient, if done with a good intent, and with a good outcome, is in principle ethical, in spite of validating the famous ethical rule of Hippocrates of not having sex with your patient. In spite of this, modern holistic therapists agrees, that this rule is so important, that even the best of intentions and the best of outcomes cannot allow for a dispensation from it. Therefore, we strongly advise that the “rule of integrative ethics” is not used to justify sex with the patient. The suspicion, that the therapist did it for himself, and not for his patient, will always be there, making the action unethical.

## Conclusion

An integral ethical theory can integrate the three ethical core dimensions: 1) intent, 2) outcome and 3) the quality of the act, well known from a) the duty ethics, b) the utilitarian ethics and c) the feministic ethics. This theory makes it possible to give a complex evaluation of the ethics of a complex holistic medical or sexological treatment. We have introduced a new “rule of integrative ethics” that allows us to evaluate the medical ethics of complex therapeutic behaviour, even if such a behaviour be judged as immoral by society in general. This ethics is useful for clinical holistic medicine, especially to ethically evaluate the concrete therapeutic actions in advanced holistic medical and sexological treatment. An integrative medical ethic is useful for teaching ethics to holistic therapists and physicians and for training students in holistic medicine.

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## Exercise

1. Take an event that you find ethically problematic and discuss it with regards to the tree ethical dimensions mentioned in this chapter.
2. Do you agree that intention, performance and result are of equal importance in an ethical analysis? If not, give your arguments.
3. What is your preferred ethical position? Argue for it.



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## Section 3. Acknowledgments

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## **International review board**

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This book is written by Søren Ventegodt and Joav Merrick and the result of more than ten years of work together, but also an international collaboration with a group of very special people that we have published many papers with. This book project (a total of six books on mind-body medicine) has been a tremendous effort and we have been guided, helped and supported by a group of international collaborators and colleagues. These busy academics and clinicians have given of their time and expertise to advise us, so we wish to acknowledge their incredible support and friendship in this endeavor.

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## **About the Quality of Life Research Center in Copenhagen, Denmark**

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The Quality of Life Research Center in Copenhagen was established in 1989, when the physician Søren Ventegodt succeeded in getting a collaboration started with the Department of Social Medicine at the University of Copenhagen in response to the project “Quality of life and causes of disease”. An interdisciplinary “Working group for the quality of life in Copenhagen” was established and when funds were raised in 1991 the University Hospital of Copenhagen (Rigshospitalet) opened its doors for the project.

The main task was a comprehensive follow-up of 9,006 pregnancies and the children delivered during 1959-61. This Copenhagen Perinatal Birth Cohort was established by the a gynecologist and a pediatrician, the late Aage Villumsen, MD, PhD and the late Bengt Zachau-Christiansen, MD, PhD, who had made intensive studies during pregnancy, early childhood and young adulthood. The cohort was during 1980-1989 directed by the pediatrician Joav Merrick, MD, DMSc, who established the Prospective Pediatric Research Unit at the University Hospital of Copenhagen and managed to update the cohort for further follow-up register research, until he moved to Israel. The focus was to study quality of life related to socio-economic status and health in order to compare with the data collected during pregnancy, delivery and early childhood.

The project continued to grow and later in 1993, the work was organized into a statistics group, a software group that developed the computer programs for use in the data entry and a group responsible for analysis of the data.

### **Quality of Life Research Center at the university medical center**

The Quality of Life Center at the University Hospital generated grants, publicity with research and discussions among the professionals leading to the claim that quality of life was significant for health and disease. It is obvious that a single person cannot do much about his/her own disease, if it is caused by chemical defects in the body or outside chemical-

physical influences. However, if a substantial part of diseases are caused by a low quality of life, we can all prevent a lot of disease and operate as our own physicians, if we make a personal effort and work to improve our quality of life. A series of investigations showed that this was indeed possible. This view of the role of personal responsibility for illness and health would naturally lead to a radical re-consideration of the role of the physician and also influence our society.

## **Independent Quality of Life Research Center**

In 1994, The Quality of Life Research Center became an independent institution located in the center of the old Copenhagen. Today, the number of full-time employees have grown. The Research Center is still expanding and several companies and numerous institutions make use of the resources, such as lectures, courses, consulting or contract research. The companies, which have used the competence of the research center and its tools on quality of life and quality of working life, include IBM, Lego, several banks, a number of counties, municipalities, several ministries, The National Defense Center for Leadership and many other management training institutions, along with more than 300 public and private companies. It started in Denmark, but has expanded to involve the whole Scandinavian area.

The center's research on the quality of life have been through several phases from measurement of quality of life, from theory to practice over several projects on the quality of life in Denmark, which have been published and received extended public coverage and public impact in Denmark and Scandinavia. The data is now also an important part of Veenhoven's Database on Happiness at Rotterdam University in the Netherlands.

### **New research**

Since The Quality-of-Life Research Center became independent a number of new research projects were launched. One was a project that aimed to prevent illness and social problems among the elderly in one of the municipalities by inspiring the elderly to improve their quality of life themselves. Another a project about quality of life after apoplectic attacks at one of the major hospitals in Copenhagen and the Danish Agency for Industry granted funds for a project about the quality of work life.

### **Quality of life of 10,000 Danes**

There is a general consensus that many of the diseases that plague the Western world (which are not the result of external factors such as starvation, micro-organisms, infection or genetic defects) are lifestyle related and as such, preventable through lifestyle changes. Thus increasing time and effort is spent on developing public health strategies to promote "healthy" lifestyles. However, it is not a simple task to identify and dispel the negative and unhealthy parts of our modern lifestyle even with numerous behavioural factors that can be readily

highlighted harmful, like the use of alcohol, use of tobacco, the lack of regular exercise and a high fat, low fiber diet.

However there is more to Western culture and lifestyle than these factors and if we only focus on them we can risk overlooking others. We refer to other large parts of our life, for instance the way we think about and perceive life (our life attitudes, our perception of reality and our quality of life) and the degree of happiness we experience through the different dimensions of our existence. These factors or dimensions can now, to some degree, be isolated and examined. The medical sociologist Aaron Antonovsky (1923-1994) from the Faculty of Health Sciences at Ben Gurion University in Beer-Sheva, who developed the salutogenic model of health and illness, discussed the dimension, "sense of coherence", that is closely related to the dimension of "life meaning", as perhaps the deepest and most important dimension of quality of life. Typically, the clinician or researcher, when attempting to reveal a connection between health and a certain factor, sides with only one of the possible dimensions stated above. A simple, one-dimensional hypothesis is then postulated, like for instance that cholesterol is harmful to circulation. Cholesterol levels are then measured, manipulated and ensuing changes to circulatory function monitored. The subsequent result may show a significant, though small connection, which supports the initial hypothesis and in turn becomes the basis for implementing preventive measures, like a change of diet. The multi-factorial dimension is therefore often overlooked.

In order to investigate this multifactorial dimension a cross-sectional survey examining close to 10,000 Danes was undertaken in order to investigate the connection between lifestyle, quality of life and health status by way of a questionnaire based survey. The questionnaire was mailed in February 1993 to 2,460 persons aged between 18-88, randomly selected from the CPR (Danish Central Register) and 7,222 persons from the Copenhagen Perinatal Birth Cohort 1959-61.

A total of 1,501 persons between the ages 18-88 years and 4,626 persons between the ages 31-33 years returned the questionnaire (response rates 61.0% and 64.1% respectively). The results showed that health had a stronger correlation to quality of life ( $r = 0.5$ ,  $p < 0.0001$ ), than it had to lifestyle ( $r = 0.2$ ,  $p < 0.0001$ ).

It was concluded that preventable diseases could be more effectively handled through a concentrated effort to improve quality of life rather than through an approach that focus solely on the factors that are traditionally seen to reflect an unhealthy life style.

## Collaborations across borders

The project has been developed during several phases. The first phase, 1980-1990, was about mapping the medical systems of the pre-modern cultures of the world, understanding their philosophies and practices and merging this knowledge with western biomedicine. A huge task seemingly successfully accomplished in the Quality of Life (QOL) theories, and the QOL philosophy, and the most recent theories of existence, explaining the human nature, and especially the hidden resources of man, their nature, their location in human existence and the way to approach them through human consciousness.

Søren Ventegodt visited several countries around the globe in the late 1980s and analysed about 10 pre-modern medical systems and a dozen of shamans, shangomas and spiritual leaders noticing most surprisingly similarities, allowing him together with about 20

colleagues at the QOL Study Group at the University of Copenhagen, to model the connection between QOL and health. This model was later further developed and represented in the integrative QOL theories and a number of publications. Based on this philosophical breakthrough the Quality of Life Research Center was established at the University hospital. Here a broad cooperation took place with many interested physicians and nurses from the hospital.

A QOL conference in 1993 with more than 100 scientific participants discussed the connection between QOL and the development of disease and its prevention. Four physicians collaborated on the QOL population survey 1993. For the next 10 years the difficult task of integrating bio-medicine and the traditional medicine went on and Søren Ventegodt again visited several centers and scientists at the Universities of New York, Berkeley, Stanford and other institutions. He also met people like David Spiegel, Dean Ornish, Louise Hay, Dalai Lama and many other leading persons in the field of holistic medicine and spirituality.

Around the year 2000 an international scientific network started to take form with an intense collaboration with the National Institute of Child Health and Human Development (NICHD) in Israel, which has now developed the concept of “Holistic Medicine”. We believe that the trained physician today has three medical toolboxes: the manual medicine (traditional), the bio-medicine (with drugs and pharmacology) and the consciousness-based medicine (scientific, holistic medicine). What is extremely interesting is that most diseases can be alleviated with all three sets of medical tools, but only the bio-medical toolset is highly expensive. The physician, using his hands and his consciousness to improve the health of the patient by mobilising hidden resources in the patient can use his skills in any cultural setting, rich or poor.

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## **About the National Institute of Child Health and Human Development in Israel**

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The National Institute of Child Health and Human Development (NICHD) in Israel was established in 1998 as a virtual institute under the auspices of the Medical Director, Ministry of Social Affairs and Social Services in order to function as the research arm for the Office of the Medical Director. In 1998 the National Council for Child Health and Pediatrics, Ministry of Health and in 1999 the Director General and Deputy Director General of the Ministry of Health endorsed the establishment of the NICHD. In 2011 the NICHD became affiliated with the Division of Pediatrics, Hadassah Hebrew University Medical Center, Mt Scopus Campus in Jerusalem.

### **Mission**

The mission of a National Institute for Child Health and Human Development in Israel is to provide an academic focal point for the scholarly interdisciplinary study of child life, health, public health, welfare, disability, rehabilitation, intellectual disability and related aspects of human development. This mission includes research, teaching, clinical work, information and public service activities in the field of child health and human development.

### **Service and academic activities**

Over the years many activities became focused in the south of Israel due to collaboration with various professionals at the Faculty of Health Sciences (FOHS) at the Ben Gurion University of the Negev (BGU). Since 2000 an affiliation with the Zusman Child Development Center at the Pediatric Division of Soroka University Medical Center has resulted in collaboration around the establishment of the Down Syndrome Clinic at that center. In 2002 a full course on "Disability" was established at the Recanati School for Allied Professions in the

Community, FOHS, BGU and in 2005 collaboration was started with the Primary Care Unit of the faculty and disability became part of the master of public health course on “Children and society”.

In the academic year 2005-2006 a one semester course on “Aging with disability” was started as part of the master of science program in gerontology in our collaboration with the Center for Multidisciplinary Research in Aging. In 2010 collaborations with the Division of Pediatrics, Hadassah Medical Center, Hebrew University, Jerusalem, Israel.

## **Research activities**

The affiliated staff have over the years published work from projects and research activities in this national and international collaboration. In the year 2000 the International Journal of Adolescent Medicine and Health and in 2005 the International Journal on Disability and Human Development of De Gruyter Publishing House (Berlin and New York), in the year 2003 the TSW-Child Health and Human Development and in 2006 the TSW-Holistic Health and Medicine of the Scientific World Journal (New York and Kirkkonummi, Finland), all peer-reviewed international journals were affiliated with the National Institute of Child Health and Human Development. From 2008 also the International Journal of Child Health and Human Development (Nova Science, New York), the International Journal of Child and Adolescent Health (Nova Science) and the Journal of Pain Management (Nova Science) affiliated and from 2009 the International Public Health Journal (Nova Science) and Journal of Alternative Medicine Research (Nova Science).

## **National collaborations**

Nationally the NICHD works in collaboration with the Faculty of Health Sciences, Ben Gurion University of the Negev; Department of Physical Therapy, Sackler School of Medicine, Tel Aviv University; Autism Center, Assaf HaRofeh Medical Center; National Rett and PKU Centers at Chaim Sheba Medical Center, Tel HaShomer; Department of Physiotherapy, Haifa University; Department of Education, Bar Ilan University, Ramat Gan, Faculty of Social Sciences and Health Sciences; College of Judea and Samaria in Ariel and in 2011 affiliation with Center for Pediatric Chronic Diseases and Center for Down Syndrome, Department of Pediatrics, Hadassah-Hebrew University Medical Center, Mount Scopus Campus, Jerusalem.

## **International collaborations**

Internationally with the Department of Disability and Human Development, College of Applied Health Sciences, University of Illinois at Chicago; Strong Center for Developmental Disabilities, Golisano Children's Hospital at Strong, University of Rochester School of Medicine and Dentistry, New York; Centre on Intellectual Disabilities, University of Albany,

New York; Centre for Chronic Disease Prevention and Control, Health Canada, Ottawa; Chandler Medical Center and Children's Hospital, Kentucky Children's Hospital, Section of Adolescent Medicine, University of Kentucky, Lexington; Chronic Disease Prevention and Control Research Center, Baylor College of Medicine, Houston, Texas; Division of Neuroscience, Department of Psychiatry, Columbia University, New York; Institute for the Study of Disadvantage and Disability, Atlanta; Center for Autism and Related Disorders, Department Psychiatry, Children's Hospital Boston, Boston; Department of Paediatrics, Child Health and Adolescent Medicine, Children's Hospital at Westmead, Westmead, Australia; International Centre for the Study of Occupational and Mental Health, Düsseldorf, Germany; Centre for Advanced Studies in Nursing, Department of General Practice and Primary Care, University of Aberdeen, Aberdeen, United Kingdom; Quality of Life Research Center, Copenhagen, Denmark; Nordic School of Public Health, Gottenburg, Sweden, Scandinavian Institute of Quality of Working Life, Oslo, Norway; Centre for Quality of Life of the Hong Kong Institute of Asia-Pacific Studies and School of Social Work, Chinese University, Hong Kong.

## **Targets**

Our focus is on research, international collaborations, clinical work, teaching and policy in health, disability and human development and to establish the NICHD as a permanent institute at one of the residential care centers for persons with intellectual disability in Israel in order to conduct model research and together with the four university schools of public health/medicine in Israel establish a national master and doctoral program in disability and human development at the institute to secure the next generation of professionals working in this often non-prestigious/low-status field of work.

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## **Section 4: Index**

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