

## Intercessory prayer

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As a physician with a master's degree in divinity, I read with interest the articles in the April issue of the Journal on intercessory prayer.<sup>1,2</sup> Historically, studies of intercessory prayer have been plagued by methodological problems, which Benson et al seek to redress. The authors are to be lauded for their rigorous approach to a controversial treatment modality. In spite of their rigor, this study, like all studies of intercessory prayer, may lack validity for reasons unrelated to methodology. In essence, if you believe in God, the study of intercessory prayer is flawed.

Proponents of intercessory prayer have long sought quantitative evidence of the power of prayer. Adherents of many different religions believe that God (or gods) answers prayers. Nevertheless, intercessory prayer raises profound theological questions. These questions include whether God is an omnipotent being who regularly intervenes in human affairs, whether the ways of God are a legitimate subject of scientific inquiry, and whether God's will can be influenced by human agents.

In the first case, some modern theologians have questioned the traditional image of God as an omnipotent being who exerts control over human affairs. At least in part, this retrenchment may be seen as a reaction to the assault on religion spawned by the Enlightenment, as well as an attempt to reconcile theodicy with modern evils such as the Holocaust. To some, the omnipotence of God is as much an article of faith as the power of prayer itself. Conversely, the idea of free will must also be taken into account. In any event, the belief that God can and does always intervene in human affairs is an open question.

From the standpoint of scientific inquiry, many religious adherents can point to cases when God intervened that are, in effect, singularities that science cannot effectively study. A subset of these cases represents healing miracles, which are studied by the Consulta Medica, a panel of 5 physicians whose task is to exclude scientific explanations as part of the confirmation process for saints. Aquinas and others believed God cannot be known in any positive cognitive sense. All we can know are the effects of God; and even then, as

Hume suggested, causality is difficult to establish. Seen in this light, any attempt to double blind God appears a little ludicrous, as if the number of pellets God wants can be behaviorally modified.

The ability of human agents to influence God's will may be more problematic. In other words, "Will God give us what we want just because we ask for it?" From a Christian perspective, "Ask, and ye shall receive" (John 16:24) implies that the answer is yes, although what and when something is given are often more ambiguous. Jesus' prayer in the Garden of Gethsemane, "O my Father, if it be possible, let this cup pass from me: nevertheless not as I will, but as thou wilt" (Matthew 26:39) provides evidence of an intercessory prayer that was not answered. To privilege any prayer, no matter how well intentioned, above Jesus' prayer suggests that someone could suffer more than Jesus, and that suffering is not sometimes part of God's plan.

From Galton to Harris to Benson, studies of intercessory prayer have yielded uneven results. Given the theological issues, this variability is not surprising: "For my thoughts are not your thoughts, neither are your ways my ways, says the Lord" (Isaiah 55:8). What was learned at Babel may still apply today: when it comes to God, the best science may be able to do is to ask questions about itself.

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## References

1. Krucoff MW, Crater SW, Lee KL. From efficacy to safety concerns: a STEP forward or a step back for clinical research and intercessory prayer?: The Study of Therapeutic Effects of Intercessory Prayer (STEP). *Am Heart J* 2006;151:762-4.
2. Benson H, Dusek JA, Sherwood JB, et al. Study of the Therapeutic Effects of Intercessory Prayer (STEP) in cardiac bypass patients: a multicenter randomized trial of uncertainty and certainty of receiving intercessory prayer. *Am Heart J* 2006;151:934-42.