enjoyed by family physicians and educators, who live and practice at the intersection of science and faith, and more generally by any readers with an interest in how religion and medicine can be brought into greater dialogue.

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The Soul of Medicine: Spiritual Perspectives and Clinical Practice
John R. Peteet and Michael N. D’Ambra, eds

Are we losing the soul in medicine? The editors of this book address this question by approaching the topic of spirituality from many different perspectives. This beautifully bound book arose out of a course taught by the editors at Harvard called “Spirituality and Healing in Medicine.” The book follows a format similar to their course in that they invited clinicians and other caregivers from within each religious tradition to contribute chapters. At times this worked well but at times left me feeling like being present for one of the discussions in their course would have been far more satisfying.

The book is separated into three sections. The first discusses the historical relationship between spirituality and medicine and then suggests a framework for approaching the topic of spirituality in a general clinical context. The first chapter gives a nice overview of the early melding of medicine with philosophy and religion and when the two began to separate with the development of scientific theory in the 17th and 18th centuries. It is a reminder that our current biomedical model was not always the primary context in which healing occurred.

The second chapter suggests a way of approaching spirituality in the day-to-day practice of medicine. As in other sections of the book, two sides of the argument are presented regarding the merits and pitfalls of addressing spirituality within a medical encounter. I found this chapter very useful as a family physician and see myself referring back to it in the future. What role does spirituality play in each individual patient encounter? In this chapter, the editors suggest that you can address the topic by asking yourself if a need exists within the framework of the clinical encounter where a patient’s spirituality can serve as a resource or an obstacle to your endeavor. They go on to give you ideas on where, when, how, and who can best address these spiritual questions. This chapter is an excellent resource.

The second section of the book is devoted to a review of the major religious traditions in the context of a medical encounter. The book covers the major traditions of Judaism, Hinduism, Islam, Christianity, and Buddhism as well as several minor traditions with relevance to medical practice with a nod to eclectic spirituality and a secular perspective. One or two authors who come from that particular religious tradition wrote each of the chapters in this section. I found the chapters that addressed the topic from the point of view of how a patient from that tradition might interact with the medical system very helpful as a clinician. The author who covered Islam, Areej El-Jawahri, MD, wrote one such chapter brilliantly that was filled with practical information that would help any clinician who sees Islamic patients. I found the chapters that were written from the point of view of the physician and how their faith influenced their practice less informative. While these chapters were interesting to read, the information contained there did not translate easily into the clinical encounter.

The third and last section of the book covered ethical considerations, chaplaincy, and teaching this topic in medical education. This section was practical and contained a wealth of information about the current interface of spirituality and medicine and would be a great resource for the developers of behavioral medicine curricula in residency programs.

This book is a treasure trove of facts and opinions regarding all facets of spirituality in medicine. I would argue along with the editors that the “soul of medicine” is alive and thriving in the practice of medicine today. It is alive in the hearts of physicians and their patients. For me it is found in the long pause as...
I wait for my patient to absorb the diagnosis I just gave them or in the joy on my patient’s face as she asks for an update regarding my young daughter. I would describe myself as a spiritual agnostic who pulls from many different traditions, and I think the problem may be that we are uncertain of the language we should use to describe this “soul” to each other in religiously diverse medical practices. This book is an excellent resource to help us find our voice in this regard. I would recommend this as a resource for anyone with a religiously diverse patient population as a clinical resource but also as a great read for anyone with an interest in where, if anywhere, the soul of medicine has gone.

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