We were aliens: Effects of prayer found to be neutral

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It's a profound, if unanswerable, question for many who ask God to heal the sick: Can prayer actually help another person recover from disease?

A group of prominent scientists recently sought at least part of the answer in the largest and most anticipated study of its kind. They concluded that for the patients included in the study, prayer from strangers had no effect on whether the patients suffered complications from coronary artery bypass surgery.

"The effect of intercessory prayer was neutral. It showed no sign of any benefit," said Charles Bethea, an Oklahoma cardiologist and researcher who participated in the \$2.4 million study financed primarily by the John Templeton Foundation, which explores links between religion and science.

The results appeared in an issue of the *American Heart Journal* in April after it was released online March 30.

Not only were effects of prayer by strangers neutral, the study said, but the selected group of patients who knew with certainty that strangers were praying for them experienced complications at higher rates than did two other groups who were told only that they might receive prayer.

One critic, Harold Koenig, co-director of the Center for Spirituality, Theology and Health at Duke University Medical School, said the study itself was ill-conceived in trying to quantify religious phenomena scientifically. Citing in a *Los Angeles Times* interview "two big studies . . . that show no results," Koenig said, "Let's move on now and direct our money somewhere else."

But the researchers called for more research on the subject. The study randomly divided bypass surgery patients from six hospitals into three groups:

- 604 patients in Group 1 were prayed for by strangers after being told that they might or might not receive prayer.
- 597 patients in Group 2 did not receive strangers' prayers, after being told they might or might not be prayed for.
- 603 patients in Group 3 received intercessory prayer after being told they would receive it.

The strangers doing the praying came from three congregations: St. Paul's Monastery in St. Paul, Minnesota; the Community of Teresian Carmelites in Worcester, Massachusetts; and Silent Unity in Lee's Summit, Missouri. Prayers were offered for two weeks for each patient, starting the night before the surgery.

Patients in Group 2, the only group not to receive the strangers' prayers, fared best, with 51 percent suffering from complications within 30 days of surgery. Patients in Group 1 fared slightly worse, with 52 percent suffering from complications.

To researchers, the biggest surprise was that 59 percent of patients in Group 3—who knew of the strangers' prayers—suffered from complications.

It was conjectured that informing patients that strangers would definitely pray for them may have increased their anxiety levels. "It raises a very interesting question: Did we, by making them aware . . . frighten them more than we needed to?" asked Bethea.

Researchers cautioned against drawing broad conclusions about prayer from the study. The study's scope was narrow, they said, and did not involve personal prayer or prayer by a patient's relatives or friends.

"Personal prayers people perform often break the strain of everyday thought and evoke [an] antistress response," said Herbert Benson, president of the Mind/Body Medical Institute and associate professor of medicine at Harvard Medical School. "Could external prayer do the same thing? . . . In this particular study we did not find that was the case."

Richard Sloan, author of the forthcoming book *Blind Faith*: *The Unholy Alliance of Religion and Medicine*, told the *New York Times*, "The problem with studying religion scientifically is that you do violence to the phenomenon by reducing it to basic elements that can be quantified, and that makes for bad science and bad religion." –

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