

# **Modern Medicine, the New World Religion**

**The hidden influence of beliefs on medical dogmas and  
practices**

*"Médecine, religion et peur: l'influence cachée des croyances",*  
Olivier Clerc.  
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**Essay**

**Olivier Clerc**

Translated from the French by Rachel Stern

**Personhood Press**

*“The study of the evolution of disease patterns provides evidence that during the last century doctors have affected epidemics no more profoundly than did priests during earlier times. Epidemics came and went, imprecated by both but touched by neither. They are not modified any more decisively by the rituals performed in medical clinics than by those customary at religious shrines.”*

– Ivan Illich, in *Limits to Medicine*

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A big thank you to Michael Baumgartner: Your asking me to translate the introduction of this book for Continuum's website was the triggering factor that finally led to this full English edition of my text.

*Last but not least*, as the saying goes, a very warm "*Merci!*" to my friend and publisher, Bradley L. Winch, for having accepted so promptly and enthusiastically to publish this book.

## Author's introduction to the English edition

In 1998, while I was living close to Geneva, the Swiss people were called to the polls on a major issue regarding the extent to which genetic engineering should or shouldn't be allowed. This important issue raised debates of an intensity usually unknown to the Swiss.

Every day, I read the newspaper articles written by the advocates and opponents to genetic engineering, as well as the letters sent by readers of these newspapers. While reading this material, it became obvious to me that both parties were unaware that this upcoming vote was not only a scientific issue, but also – if not mainly – a *religious* one (as hinted by the posters of one political party titled "*A new Creation? We like the old one better*").

That understanding led me to write a long letter to a major Swiss newspaper, which ended up being published in its entirety. Its impact on readers startled me. I started receiving letters and even phone calls from many people: They said that my letter had put words on something they vaguely felt but hadn't quite intellectualized as I had.

I was then asked to lecture on the topic of this religious dimension of life sciences and medicine, both in Switzerland and France. The more I did so, the more I realized that what seemed an obvious matter to me – the superposition of medicine over religion – was not as obvious to most people. This led me to decide to write a small book in French on this issue, which was published in September 1999.

Many physicians, doctors, and even university professors wrote to me after reading this book to share with me how the insights they had found in my writings had helped them take another look at their profession and sometimes better understand what was going on below the surface in their relationships with their patients, or in their research programs.

Then, I was asked to summarize the ideas contained in my book for an AIDS-oriented website (*Continuum*). I translated to English myself the overview of the book and had it "polished" by someone of English mother tongue. As soon as this overview was published on the web, I started receiving numerous e-mails from all over the world. At some point, the important daily amount of e-mails led me to think that they couldn't all be the result of just that one *Continuum* site. After checking with a search engine, I found out that my article had been copied in many other sites and had also been included in some news groups and forums.

I took the enthusiastic feedback from my web readers as a sign that my book could be of interest beyond the French-speaking countries, as also confirmed by the fact that a UCLA student spontaneously – and very kindly – offered to translate the rest of the book (*thanks again, Rachel!*).

Having worked as Foreign Rights Manager for a Franco-Swiss publishing house, I had personal contacts with various English and American publishers. That's how I ended up receiving a positive reply from my amazing friend Bradley L. Winch of Personhood Press, California. I had gotten to know Bradley through his other publishing house, Jalmar Press, which has been doing such a fantastic job for decades to help promote a better and less violent world and a better education for children. So, I am both proud and very thankful to be published by him.

One last thing: I am aware that the religious (and medical) context is quite different in the United States from what it is in France and European countries. But behind these superficial differences, the dynamics I reveal in this book are the same (as suggested by the feedback from my non-French readers on the web). I feel, therefore, confident that my English-speaking readers will be able to adapt to their specific religious and medical context the examples I give, when needed.

*Bonne lecture!*

Olivier F. Clerc

## Overview

When the Christian missionaries of the past three or four centuries were evangelizing so-called primitive people, they believed that they had only to destroy or burn the various cult objects of these people in order to eradicate their religions, superstitions, and customs. Centuries after the conquistadors tried to stamp out the Inca culture, or the Inquisition tried to stamp out the protestant "heresies," including the similar attempts to annihilate the Voodoo or the many African and Asian religions, we know that such arrogant high-handedness does not work. These beliefs still continue today, sometimes under different guises, long after the objects of worship associated with them have been destroyed.

This lesson from history is not only valid for primitive people and their religions. It can equally be applied – if not more so – to aspects of our own modern society. Indeed, even a superficial study of contemporary culture will reveal that the supposed secularization of present-day society is just an illusion. Even though most people do not conform to the outward show of religious custom and practice – mostly Judeo-Christian in Western culture – the beliefs and superstitions remain deeply embedded in their subconscious, influencing many aspects of their daily lives without them realizing it.

And as several sociology studies have shown, the superstitious beliefs that used to be attached to the formal religions have in many cases simply been transferred to other objects, persons, or events. The daily evening television news bulletins, watched by millions worldwide in their respective countries, the stars of show business and sport, humanitarian associations, cults, and all sorts of other things in modern life: These have now become the new gods we venerate or fear, or the shrines at which we worship or curse, and where we still experience those primitive religious urges and feelings, where we can believe without necessarily having to think or rationalize.

However, it is in the field of medicine that this unconscious transposition of the religious experience – and more specifically the Judeo-Christian ideology, myths, beliefs, expectations, and hopes – seems to have had the greatest impact. The facts show clearly – for anyone taking the time to study them – that medicine enjoys today an astonishing degree of undeserved credit that is

out of all proportion to its actual results or promises. Real health keeps regressing, while the great medical “miracles” such as vaccines and antibiotics, are now clearly showing their limitations, which some had foreseen and warned of right from the start. This undeserved credit comes mostly from the fact that medicine and science have replaced religion as the only certain belief in an uncertain world. And the doctors and scientists are seen as the priests of the new religion, delivering through the certainties of science what the old discredited gods were not able to deliver. If we can no longer believe in the miracles, the cures, and the curses of the old religions, we can certainly believe in the miracles, the cures, and the destructive powers of the new science.

Almost imperceptibly, medicine has taken on a saving or messianic role, the characteristics of which we must examine. Medicine can be said to display qualities that have characterized the Roman Catholic Church for many centuries: autocracy, centralization, the control and manipulation of people, censorship, propaganda, total obedience, infallibility, the destruction of heretics, the stamping out of individuality. All this, of course, has been done in the name of public health and the general good, just as the Church acted for mankind’s salvation.

Let me make my position clear. I am not a conspiracy theorist. Even though, obviously, money and power do influence the medical world, I do not believe that the majority of doctors, scientists, and governments are intentionally and corruptly conspiring together, abusing their powers in pursuit of wealth, “Big Brother” just a step away. But rather, I do believe we are faced with a phenomenon that is largely of the unconscious kind.

What I believe is happening is that people, whether within the medico-pharmaceutical industry or outside it, are being subconsciously influenced by their deeply rooted myths, fears, and superstitions which are now being projected onto the new screens of science and medicine. This produces an amazing paradox:

Although medicine sees itself as exclusively scientific and rational, with no room for spiritual or human dimensions (such as psychic healers or shamans, who are dismissed as charlatans), it organizes itself and functions in a way that can be described as intrinsically religious. The paradox is that by rejecting any spiritual dimension, medicine, in fact, becomes the toy of the forces and myths it tries to ignore and cannot control. Mere denial of something’s existence has

never made it disappear, except perhaps in our conscious mind. Instead, it is banished to our subconscious mind, where, beyond our control, it can roam free, wreak havoc, and wield even greater power.

We can see, then, that even though our society considers itself to be secular, it has remained as Christian as it was a century ago, but with two major differences. First, our society is not aware of its religious dimension. It believes itself to be rational, scientific, and free of superstition. It fails to recognize that it is still, in effect, observing the old religious rituals, but under a new guise. Second, our society now lives its religious experiences through secular forms – medical ones, in particular – and has at the same time transferred its hopes and aspirations from the spiritual world to the material.

Medicine, then, has become the new world religion. The specific myths, beliefs, and rites of Christianity have been unconsciously projected into medicine since Pasteur. As I explain in detail in the next chapters, we can establish very close parallels between Christianity and modern medicine. In brief:

- physicians have taken the place of priests;
- vaccination plays the same initiatory role as baptism, and is accompanied by the same threats and fears;
- the search for health has replaced the quest for salvation;
- the fight against disease has replaced the fight against sin;
- eradication of viruses has taken the place of exorcising demons;
- the hope of physical immortality (cloning, genetic engineering) has been substituted for the hope of eternal life;
- pills have replaced hosts;
- donations to cancer research take precedence over donations to the Church;

- a hypothetical universal vaccine could save humanity from all its illnesses, as the Savior has saved the world from all its sins;

- the medical power has become the government's ally, as was the Catholic Church in the past;

- "charlatans" are persecuted today as "heretics" were yesterday, and dogmatism rules out promising alternative medical theories;

- the same absence of individual responsibility is now found in medicine, as previously in the Christian religion;

- patients are alienated from their bodies, as sinners used to be from their souls.

Fears and childish hopes are still manipulating us. We are still told that the source of our problems is outside of us, and that the solution can only come from the outside, as well. We are not allowed to do anything by ourselves and we must have the mediation of physicians-priests, the administration of drugs-hosts, and the protection of vaccines-baptism.

Just as the magnetic field of a magnet placed under a sheet of paper controls the way iron filings fall on its surface, revealing the invisible lines of force between the two poles of the magnet, a "religious field" likewise imperceptibly structures and organizes the development of modern medicine. Invisible, impalpable, this "religious field" is made up of all the beliefs, myths, and values of the Christian – and more specifically Catholic – religion. In other words, the secularization of society happened only on the surface. We took away the "iron filings," the specific religious forms, but we did not change the "current of thoughts," the underlying "religious field" which continued to exert the same influence, but through medicine. That is the reason why behind the different structures of medicine and the Church of Rome we find the same fundamental concepts, the same relationships, the same characteristics, the same fears, the same hopes and expectations.

This substitution of medicine for religion has had many unfortunate consequences. In medical research, it influences what should be looked for and what can be discovered. Any discovery or theory that is at odds with the over-

arching orthodoxy is rejected, and its authors called heretics. Entire areas of research, as well as promising new lines of approach, are thus disqualified.

Furthermore, the unconscious need to bring the medical world into "religious" obedience frequently leads to (involuntary) falsifications of results, as became clear with Louis Pasteur's discoveries. The medical credo takes precedence over reality, which scientists refuse to see when this reality does not correspond with their preconceived ideas.

And lastly, the hidden religious dimension of modern medicine inhibits the free debating of already fixed beliefs, preventing them from being properly re-examined and criticized. Indeed, dogmatism, irrationality, and passions – all characteristic of the religious experience – take precedence over any calm and carefully thought-out argument, even over the most tenuous facts. The same vehemence that led Galileo to be condemned by the Church for his theories, in spite of the scientifically demonstrable facts, is now being used by medicine to reject any thesis that is contrary to its own dogmas. Science has learned its lessons well from the Church, it seems.

My aim in writing and lecturing on this topic has therefore been several:

First, I wanted to bring to the fore this phenomenon of projection and transfer of religious content which takes place in the medical field. In recognizing this phenomenon, we should then dissociate from medical practice the spiritual aspirations that quite logically can only be satisfied in the spiritual dimension. It is dangerous to mistake eternal life with physical immortality, or to think we can achieve collective salvation through science and genetic engineering instead of individual salvation through transformation and personal achievements.

Second, I also hope that by bringing to the fore the influence of religious beliefs in medicine, which is but one example of a very widespread phenomenon today, readers will start thinking about how their beliefs filter their perceptions, biasing and distorting them. Every time an object, a person, a social group, or an event becomes the target of religious projections, there is danger. The real characteristics of these things (and persons) fade in the eyes of those who color them with their beliefs. These targets then become the objects of religious urges, impervious to any rationalization, whether they are expressed through fear, hatred, "devilization" and the search for scapegoats,

or through deification, idealization, and unconditional devotion. From Princess Diana to Waco, and from Mother Teresa to Saddam Hussein, there are numerous examples of the kind of consequences brought about by this transfer of religious expression to real persons or situations.

Beyond this dissociation of medicine and religion, I would like to encourage an increased awareness of the fears found in the depths of our consciousness, which remain the hidden determining factors for most of our actions. These fundamental fears – fear of death, mostly, but also fear of evil, fear of suffering, fear of separation, fear of solitude – have led humanity, at all times throughout history, to make up all kinds of beliefs in an effort to exorcise these fears. Then, with the development of science and the rise of intellectualism, mankind has tried to justify rationally these beliefs, hidden under the cloak of medicine and life sciences.

In other words, there are three levels inside us:

1) **a core of fears**, from which we have learned to protect ourselves by covering it with:

2) **a layer of beliefs**, which make us feel safe (even though those fears have not disappeared), this layer being itself dissimulated under:

3) **an intellectual varnish**, a rational façade which give us the illusion of having transcended superstitions and beliefs, and which shelters us from our fears, keeping us barricaded behind intellectual knowledge.

But in reality, as soon as any unexpected event scratches this varnish, our underlying beliefs and fears reveal their presence and their indirect influence.

As long as they are not acknowledged, accepted, and transformed, these fears will feed on every area of human endeavor. The intellect cannot think freely and the heart may not love fully, as long as both of them are hamstrung by the permanent task of appeasing our deepest anxieties, which keep trying to re-surface in our conscious mind. No technological innovation, no scientific discovery, no external knowledge will ever enable us to avoid this confrontation with ourselves, and – more specifically – with what C.G. Jung called our *shadow*. It is quite instructive to see to what degree the intellectual and technical knowledge of this century – often quite remarkable – remains

captive to the fears that haunt society. We only have to look at the poor ecological state of our planet, at the multiplicity of wars, and at the emergence of new diseases to see how this way of using our inner capacities is unproductive.

Finally, through this increasing awareness and consciousness to which I invite my readers, I hope to encourage greater individual responsibility, be it on the medical or on the spiritual level. It seems inexplicable to me that we should give away our power to whatever external authority (priests, physicians, experts) and then blame them for abusing us with it. Very few people are capable of being totally impartial and disinterested, especially when money and power are at stake. And especially when psychological studies show that the noblest motivations often go hand in hand with more dubious unconscious intentions.

Therefore, taking personal responsibility for our own health, our own inner evolution, and our own life, at every level, without rejecting any available help or advice, remains the safest and most rewarding attitude. The obscurantism that long characterized the Church when it refused the knowledge provided by sciences, is now found in sciences themselves, unaware of how religion still influences them. For this reason, this obscurantism will not so much be fought by the lights of science than by the sparks of our own self-awareness, that each of us may awaken in ourselves.

## Author's note

To avoid any misunderstanding or ambiguity, I would like to add a few words to make it clear what I do *NOT* intend to say:

First of all, I am not putting medicine "on trial." The criticisms I raise, and perhaps even harsher reproaches that I bring up in the course of this book, are solely intended to point out the unconscious religious underpinnings of modern medical practice, and the disastrous consequences that follow from this situation. Thus, for example, my remarks in regard to vaccination are not intended to determine its utility or its dangers, in a medical or epidemiological sense, but merely to highlight the dogmatic and ritualistic aspect that *directs* its use. I therefore encourage readers to go beyond this intellectual sorting process and (if the reader will allow me the metaphor) to go on to dig deeper into the ideas that underlie the book.

By the same token, I am no more putting traditional medicine on trial than I am writing an unconditional apology for alternative medicines, natural therapies, homeopathy, etc. In fact, these forms of medicine can be considered as some of the chameleon-like ways the quasi-religious foundation manages to express itself, a process that occurs more often than we think, in other forms of medicine, as well. The solution is not to simply replace traditional, chemical-based medicines with natural remedies to become apostates from the Church of the Medical Religion. It is *the way in which* health and diseases are approached, in the patient-doctor relationship and in the way in which a treatment is implemented, that one may distinguish which therapeutic techniques are influenced (or not) by unconscious religious elements.

In other words, the point of my discourse is neither to be "for" nor "against" anything, but merely to comment on a situation, with the intent of shedding some light on it. I have no intention of tearing down one kind of medicine or of incensing another, but rather to better understand how and why each has developed as it has, and therefore to better manage how they will develop in the future. This being said, I don't claim to have been entirely successful in avoiding a certain dualism that is inherent in the predominant mode of thought and even in the very structure of our Indo-European languages.

Lastly, and it should be obvious from the above, I am not putting religion on trial, either. My aim in this book is to shed light on how unconscious fears may influence and bias our beliefs and our thoughts, a process – I am suggesting in the last chapter – that may already have affected early Christianity, just as it is presently affecting modern medicine.

A few words on my writing style to bring these comments to a close: Laying claim to no academic affiliation whatsoever, I have opted to write a text devoid of any scholarly jargon. What is more, as my goal is not to "prove" anything, a symbolic interpretation of medical dynamics does not lend itself to proof or disproof. It either seems valid to a given reader or it does not – I have kept to the bare essentials. Thus I have refrained from burdening the text with references and justifications, which, in my opinion, needlessly encumber the reader. I prefer to be concise, laying out certain ideas and principles, illustrated by a few examples, so that readers can develop their application (if these ideas interest them), rather than develop each idea myself at great lengths. I am not attempting in any way to make an exhaustive scholarly study on the various aspects of this fear-based superposition of religion and medicine. I would be satisfied if the reflections on the following pages manage to pique the curiosity of the reader, to awaken his consciousness, and to help him to see beyond the mere appearance of things.