

Foundation of Biomedicine

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Biomedicine: Yes and No

If you have followed the discussions on Wholistic Health Care (WHC) within CHAN (Christian Health Association of Nigeria)...you will have noticed that people concerned with WHC often seem to show a negative bias against biomedicine. For example, in our publication *Wholistic Health Care of, for and by the People*, I myself write about various problems of biomedicine and emphasize various shortcomings.

Before proceeding with the thrust of this present article, however, it should be clearly understood that CHAN's WHC department is not against biomedicine. Both Director and Assistant Director are medical doctors. The above booklet emphasizes time and again that, in spite of the problems associated with biomedicine, we should deeply appreciate it as a gift from God. We must continue to regard it as the result of the Holy Spirit who worked in the minds of the pioneers of science and biomedicine. However, we tend to emphasize some of its negative aspects in order to overcome serious problems in our healthcare programmes. Without being aware of these problems, we will never overcome them. Once we are aware of them, we can place biomedicine in its proper place again and appreciate it even more deeply.

My aim in this article is to expose the basic foundation of biomedicine. The problems we experience with it are no mere accidents. They are inherent in its very foundation. If we truly want to overcome these, we will have to adjust the foundation or, perhaps, construct a new one. A house built on a poor foundation may stand for a long time, but it will continuously cause problems needing expensive repairs. So it is with biomedicine.

A Wholistic Diagnosis of Biomedicine

My assertion here will be that the basic problems identified by CHAN's department of WHC Project are the result of the basic ideas underlying the framework of biomedicine. In other words, its foundation. These basic ideas have gotten lost to most of us, but we have imbibed them unconsciously during our medical training and we work with them unconsciously as our medical "common sense." However, the pioneers of biomedicine were very much aware of them and they consciously chose to adopt them and to use them

¹ *Towards Wholeness—CHAN Wholistic Health Care Newsletter*, December, 1991, pp. 2-3. The Briel part of this article is only part of Briel's entire article, which was published as *Removing Medicine's Cartesian Mask: The Problem of Humanizing Medical Education*. Potchefstroom: Institute for Reformational Studies, 1988. Original publication: Menlo Park, South Africa: Christian Medical Fellowship, 1987 (?). Prof. Kiel was at the time on the faculty of the Medical School of the University of Witwatersrand, Parktown, South Africa.

as the foundation of health care. I want to expose them for you, so that you can understand the resulting problems better and then do something about them.

It is proper that we follow such a procedure, for the basic aim of WHC is to discover the *root* cause of sickness. *If our healthcare programmes themselves are sick, we need to find the solution in a wholistic fashion.* That is to say, we need to find the root cause of this sickness. *Wholistic thinking, to be effective in any one area of life, must be applied to all of life,* including the diagnosis of our healthcare system.

The Faulty Foundation

In many of my publications in other fields of life, I tend to go back to the philosophy of the ancient Greeks. These Greeks, whose civilization flourished before Christ, have contributed tremendously to the development of ideas. However, they were Pagans. They did not have the benefit of the Bible. Thus, though we must appreciate their profound contributions to the history of human development, we must also be critical of them.

One of their contributions is a kind of dualism in human life that I describe more fully in other publications of mine that can be found on this Boeriana page of my website.² In short, this dualism splits human beings into two distinctly identifiable entities, namely, the spiritual and physical parts, a soul and a body. These parts cannot only be identified, but one can deal with the one without touching the other, according to its proponents.

This basic view was adopted by Rene Descartes, a French philosopher, mathematician and scientist (1596-1650). At this point I am going to reproduce the story as Professor J. R. Kriel, a medical doctor, summarized it at a meeting of the Christian Medical Fellowship that met in 1986 around the general theme “Humanizing the Face of Medicine.”

Prof. J. R. Kriel’s Explanation: “Cartesian Dualism and the Mechanistic View of Man.”

It was Rene Descartes who formulated philosophically...the view of man as consisting of a mind and body which are essentially separate entities. He therefore had a *dualistic* concept of man. Apart from his dualism, he also held a *mechanistic* view of life—man’s body is a machine that can be understood completely in terms of the arrangement and functioning of its parts. In this *reductionist* view of man, the body is seen as “nothing but” a machine. Today, this basic mechanistic understanding is formulated more subtly in terms of chemical interactions as a cellular and molecular level, but it is the same Cartesian mechanistic view.

Descartes’ dualism was of extreme importance in the development of modern medicine. It took the human body out of the sphere of “the holy” where it could not be investigated,

² See especially *Missions: Heralds of Capitalism or Christ?* and *Christians and Mobilization*.

and put it in the sphere of “things.” This made a scientific study of the body possible. Without Descartes, Harvey would not have been possible. Descartes himself considered Harvey’s discovery of the purely mechanical function of the heart and the circulation, to be the vindication of his philosophical stance.

At the same time, however, this philosophical stance defines the limits of the investigation of the body and of health and disease. The investigation will take place within the parameters of viewing the body as a machine and as distinct from the mind. All other phenomena are thus excluded from consideration. Today we are experiencing the consequences of that reductionist view.

This philosophical paradigm is a tremendously powerful and successful one—after all, it built many of the world’s great hospitals. It is the basis of the technological success of medicine. *The only problem is that it has blinded or prevented us from seeing its limitations and from considering alternatives* (italics mine).

Whereas the originators of this view often knew exactly what they were doing philosophically, in that they knew they were taking philosophical decisions that had methodological implications, we have declared this philosophical stance to be the only one possible and thus anything that does not fit into this paradigm is rejected as nonsense.

This view of the body as a machine has led to the situation where medical science now limits itself to understanding the biological mechanisms underlying disease. *Thus illness has become equated with malfunctioning of the machine at a biological level. From the large network of phenomena involved in illness, medicine has elected to study only a few and has, e.g., neglected the social, psychological and environmental dimensions, the total ecology of health and illness* (italics mine). In spite of a lot of lip service to these concepts, medicine is therefore unable to deal with the concept of *illness* as distinct from *disease*, and of *healing* as distinct from *curing*.

In this reductionist framework, medical problems are analysed by proceeding to smaller and smaller fragments—from organs and tissues to cells and finally to the molecular level. It should be clear that in this reduction, the wholistic phenomenon of illness, the person who is ill, must inevitably get lost. But the history of modern medicine, and especially its inability to deal with the life-style disease and with third world health problems, has shown that this reduction of disease to molecular phenomena is not sufficient for understanding the human condition of health and illness.

It is this incomplete understanding, I believe, which is at the basis of the world-wide dissatisfaction with scientific medicine amongst patients (italics mine)—a disenchantment which is reaching crisis proportions as evidence in some countries by the ever increasing litigation rate (Boer adds: and in Africa by the ever increasing rise of “healing” churches.).