

REGARDING FUTURE STUDIES

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The problem of unorthodox healing has two aspects: (1) as a study of parapsychological events alleged to occur in medical, including psychoanalytical, practice, and (2) as a study of those who, without medical qualifications, set themselves up as "healers."

To deal with the latter aspect first, I do not think we should have to do with such self-appointed "healers." If it is intended to study alleged paranormal events as far as they may occur in healing, the obvious place to do this is in orthodox medical practice, including psychoanalysis. Should paranormal events, including alleged healing, ever occur in the hands of "healers" this would give no cause to study them here. They could be expected to occur as often in the hands of those medical men who are sympathetic to the idea of paranormal events—such as the Fodor-Ehrenwald group. Scientific conditions would be adequate in such groups, and a knowledge of general medicine is essential in view of the known extraordinarily wide-spread effects of psychosomatic disorders. Nothing should be done to encourage activities of unorthodox healers.

Any approach to psychological medicine needs firm grounding in neurology and psychiatry. For example, brain tumors often accompany personality disorders, and if treated by unorthodox healers, only disaster can result. True, many cases of hysteria (in the true psychological sense) have been cured by faith healers. But there now exist organizations within orthodox medicine which use religious methods or are in sympathy with the religious

approach. The efforts of psychiatrists should be devoted to furthering these organizations. Cases of reported healings should be investigated by the local S. P. R. They would have little evidential value unless supported by the strictest medical evidence. Such cases coming from unorthodox "healers" would be therefore quite valueless.

I do not think that paranormal cognition can play any part in medical diagnosis. Its fleeting and uncertain nature makes all forms of paranormal cognition quite useless for medical diagnosis. Anyone attempting it should not be practicing medicine. I would possibly except use of such methods in the hands of highly skilled psychoanalysts of the Jungian and Freudian schools, but with the reservation that they have no place in physical medicine at all.

Nor do I think that anyone should set out to be a "paranormal healer" at all, except insofar as very skillful psychoanalysts may wish to effect the trial of such methods in the course of their analysis. If it be argued that some paranormal healers have had great followings and that therefore "there must be something to it," there is no doubt that highly sympathetic and empathetic individuals succeed in psychotherapy where cold and distant personalities fail. But possession of such warm personalities is no substitute for medical training. If such a person feels drawn to the practice of healing, he should undergo the discipline and training of medicine, or at least become a lay analyst in one of the various schools. If he is not prepared to do this, his faith in himself cannot be genuine or he lacks ordinary common sense, so that he should not be in this profession anyway. Anyone not undergoing these disciplines should be prevented by law from practicing healing of any kind.

I therefore suggest a study,¹ undertaken by interested psychoanalysts, into alleged paranormal events occurring during psychoanalysis and analytical psychotherapy. Careful factual records should be kept in any apparent cases of telepathy and clairvoyance. Correlation with the course of treatment, and any causative factors, should be noted.

ESP tests should be conducted. Impartial investigation of alleged paranormal healings should be left to the medical divisions of local societies for psychical research (subject always to rules laid down by the General Medical Council on permitted dealings between doctors and unqualified healers). No contact should be made with unorthodox or unqualified persons or groups.