

## Editor's Note

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While still in graduate school, I decided to apply for medical school. Fellow graduate students deprecated medical school as "trade school" wherein one was "trained" but not "educated." Simple snobbery, I thought, and perhaps it was. I discovered later, however, some truth in their comments.

We physicians are a decidedly pragmatic group. The public expectation that we attend to short-term outcome probabilities and immediate, material causes urges our attention toward them. Appreciation of spiritual etiologies is more difficult to muster if one is going to administer a poison such as digoxin or actually cut into the patient's body. As early as medical school a habit may develop of pushing aside any "philosophical" issues. Internships usually provide little inducement to reflection on the whole being of our patients. The pressures of practice may seal habits of dismissing the nonmaterial (spiritual) features of patients' problems as "metaphysical." How do you see 20 patients in a morning if you try to explore the spiritual origins of their overeating, fornication or fist fighting?

My American College Dictionary defines pragmatism as a "more or less definite system of thought in which stress is placed upon practical consequences and values as standards ... and as tests for determining their value and truth." Is that not how medicine is practiced now, even by

Christians? By habit do we not narrow our focus to the material aspects of patients? We haven't taken time to discover an overall theology of medicine. After all, how practical could that be?

If I do not prescribe birth control pills to a 20-year-old unmarried woman, for example, she may become pregnant and face serious spin-off problems. Pragmatically then, the pill is indicated. If I don't "play the game" with third party insurers, I won't get paid or my patients won't get full reimbursement. I can't practice optimally if I don't have money for a good staff and equipment or if I'm distracted by money shortages in my own household. Pragmatically, therefore, I will code things as they may not quite be. I'll sign on and pretend to provide patients with all the medical attention they need and want, when really I'm providing only what their insurer and my tried conscience will allow.

Not long into practice I found myself tripping over practical ethical issues littering the office floor. I became dissatisfied with the pragmatic "solutions" offered by others or tried by myself in ignorance or willful disregard of the Spirit's voice in the Word. The Bible is neither impractical nor silent on the practice of medicine. What is truly impractical is a philosophy of pragmatism. What is true is not deter mined by observing that it serves our purposes over a span of a few years. Conclusions

opposed to Scripture drawn from a "longitudinal" study over 5-15 years appear ludicrous to God

(Ps. 2:4) from His perspective of eternity. A recent OB/GYN newsletter informs me that no evidence exists that distribution of contraceptives prompts adolescents to begin having sexual intercourse. Malarkey! How inadequate a is 25 years to make such a statement! What is the "sexual revolution" other than a composite of implicit permission; enticements, and the removal of immediate material consequences and sanctions? The prevailing attitude of the nation has been changed by a myriad of such ludicrous beliefs.

Does a parent fulfill Deut. 6:6,7 by having his teenage instructed in contraceptive techniques? What is the message` "Don't have sexual intercourse outside of marriage. However, pragmatically speaking, the temporal consequences of raising a child out of wedlock are so bad that I'm going to teach you how to circumvent them. It may help you if you slip and disobey God and, incidentally, it may lower m5 health insurance rate and taxes. The spiritual consequences` To Hell with your spirit! I don't want you having a baby."

It is a hard thing to deal with the physical consequence; of sin, after the fact. Our local neonatal intensive care unit is largely **filled** with the tragic, expensive consequences of illicit procreation by teenagers. It is also a hard thing to assist a

patient in planning to break or to continue to break God's laws on sexual intercourse, before the fact. For which would you rather be responsible before God? Are you pragmatically rating the bitter, lifetime consequences more highly than bitter, eternal consequences on issues like this?

We hope in this Journal to see "practical" issues ad dressed. The chains of pragmatic thinking need to be broken. Development of logical reasoning from Scripture can break them. Metaphysical issues will be recurring, enough to try the patience of anyone accustomed to getting as quickly as possible to an indicated physical treatment with a professionally acceptable short-term outcome. We may find that being "trained" is okay: "... solid food is for the mature who by constant use have trained themselves to distinguish good from evil" (Hebrews 5:14).