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FROM HERE TO MATURITY

By Howard H. Hamlin

The Interaction of Spirit, Soul, and Body in Achieving Maturity

Five Lectures Given at The Aycock Lectures

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At Bethany-Peniel College

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INTRODUCTION

Howard Hamlin is a medical surgeon and, as such, he shares the lives of many people. He knows their troubles, their pains, their ills; he does his best for them. I have seen him happy and thankful when he has succeeded at his profession.

Howard Hamlin is a Christian, a servant of God, and, as such, he follows His Master every day and his Christian faith works as he labors in his chosen profession. I have seen him testify and I know he knows God.

Howard Hamlin is a speaker -- interesting, helpful, and forceful. I have seen him speaking in an effort to get others to live happier, richer lives by accepting his Saviour.

Howard Hamlin takes time to live and knows how to keep the balance of life through laughter. I have seen him lift tensions by just such a way of life. And, now, Howard Hamlin has put into print some of his faith, some of his thoughts, some of his living.

I am glad he has written *From Here To Maturity*, and I hope it will be as helpful to you who read it as it was to a group of us who heard him repeat these lectures not long ago at a Ministers' Retreat in the Canadian Rockies.

Edward Lawlor
Calgary, Canada
January, 1955

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FOREWORD

The lectures reproduced on the following pages are not designed for use in a college textbook. There is no attempt at profundity. Except for minor corrections in the script the material is, by and large, identical with that given in the chapel at Bethany-Peniel College, November 9 to 13, 1953.

If a message is to be meaningful, it must arrest the attention of those in the audience. I am afraid that this is not always remembered by lecturers. I do not recall specific utterances or individual speakers who courted my numbed attention when I was in college; but I have retained certain general impressions of them as a group. For the most part:

1. They masqueraded the Virgin Truth in such ornate trappings of profundity that she was completely unrecognizable.
2. Their presentations were so dry and uninteresting that the message, if important, never stirred a cell in my cerebral cortex.
3. They spoke in such sweeping generalities that specific and personal application was impossible.

In these lectures I tried to avoid the three pitfalls just mentioned. With a few jokes and stories, I tried to impale the attention of even the freshmen in the audience. By illustrations plucked largely from my own experience, I attempted specific application of basic truths. With simple directness I endeavored to deal with some basic practical and ethical problems.

The subject matter treated during the week is intrinsically controversial. Furthermore, in speaking before a nonmedical audience, there is the danger of over-simplification of a technical problem, which may lead to confusion. However, the pertinence of the problem seemed to justify the risk involved.

To have shorn this manuscript of these somewhat homey characteristics would have been a bit hypocritical; for it would have resulted in the printing of a group of lectures which actually would have been only remotely related to those given in the chapel. Consequently, if you are tempted to raise your ecclesiastical or scholastic eyebrows at the somewhat informal manner of presentation of this manuscript, please remember the circumstances surrounding its inception.

* * *

I am deeply indebted to Dr. Jarrette E. Aycock, sponsor of these lectures, and Dr. Roy E. Cantrell, president of Bethany-Peniel College, for their gracious invitation to give the 1953 series. I wish also to acknowledge with gratitude the willingness of Dr. M. Lunn and his staff to publish these addresses in spite of their heavy obligations to more important tasks.

And, while we are tossing out a few well-deserved bouquets, may I toss a bulky one toward the faculty and student body of Bethany-Peniel College. Never have I spoken before a more attentive and courteous audience. Their brimming hospitality and spontaneous friendliness exceeded even the traditional standards of the Southland. But most of all, the vibrant atmosphere of genuine Christianity which permeates the campus made me tingle with pride that I too am a member of the same church which produced and reared Bethany-Peniel College.

Howard H. Hamlin

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Lecture 1

I suppose you are wondering just what a surgeon can tell you in a chapel service. Actually, this is quite the opposite situation from that which I face in my office; while there, I listen to you; here you listen to me.

What shall we talk about? Certainly not anything very profoundly theological; for theology was strangely enough left out of our curriculum at medical school.

Medicine? Well, only vaguely! We might touch a little on "Psychosomatics." (Incidentally, that is a "jaw-breaker" which I shall possibly define a bit later.) Certainly, these lectures will not be treatises on psychiatry!

By the way, speaking of psychiatry, did you hear the story of the young wife who consulted the psychiatrist because, she stated ruefully, her husband was obsessed with the idea that he was an electric refrigerator?

The psychiatrist looked a little startled, then reassured her by observing sagely, "Surely this doesn't seem to be a very serious or dangerous delusion. why don't you just humor him by agreeing with him instead of making an issue of the problem?"

To which suggestion she countered in a frustrated tone, "I would, but he sleeps with his mouth open, and the light keeps me awake."

While we're on the subject of psychiatry, I am tempted to tell you the story of the man who was running frantically down the street when he met one of his friends. He would have rushed past if the friend had not grabbed him by the arm in a gesture of friendship, and queried boisterously, "I say, old sock, where you headin' In such a lather?" To which came the agitated reply, "I have an appointment with my psychiatrist, and I'm late."

"So what? You're a few minutes late, that's no crime; after all, he's not your top sergeant!"

"I know," whimpered the Freudian victim, "but if I'm late he'll go on with the interview without me."

I don't know why I keep interrupting myself; I started out to tell you what we would talk about this week. Let's just drop the whole matter by stating generally that we hope to cover a few practical problems of human behavior which are common to all of us -- that is, if we're human. Any of you not wishing to be so categorized may use this period to study for your next class.

Suppose we introduce the theme of today by a word's-eye view of an Old Testament experience.

Joseph, prince of Egypt, died at the crest of his power. However, before his demise, he extracted a promise from his heirs that they would transport his bones to Canaan when they returned to their God-ordained homeland. To this deathbed request they eagerly agreed. But years lengthened into centuries and the mummy of their benefactor and forebear rested in its kingly tomb on foreign soil; while his descendants found themselves on the slow Descalator of Time moving inexorably from the valley of the kings to the flesh-pots of slavery and the ghettos of despair.

Four centuries of deterioration passed during which their overlords beat with lashes and starvation the last glimmer of humanity and decency from them. Then a faint glow in the Stygian night -- the promise of deliverance! In a few short months that faint glow began to spread and brighten the hearthstones of a million despairing wretches.

Then the command, "March! D-day is here! Carry only the essentials! Time is of the essence! We must be out of reach before Pharaoh repents and gives chase!"

They were allowed to take only the bare necessities with them; yet "Moses took the bones of Joseph with him." Not just a sack of dry bones, but the coffin of a king -- surely a tremendous weight to hinder a nation fleeing for its life! But why should Moses risk the success of this pilgrimage by such impediment?

He did it because of certain intangible assets represented by the bones of Joseph. Dr. Wharton calls it invisible baggage."

As students rushing frantically through the wilderness of preparation to the promised land of personal achievement, you also should carry away with you more than a few unrelated bits of information. You should carry a bit of "invisible baggage." Some of it should be in the too unfamiliar form of "rational, objective thinking."

It is this attribute called "objectivity" which I should like to discuss. May we examine one facet of this problem today.

There are three dominant theories concerning "human behavior":

A. Goodness-Badness Theory:

We who live by an authoritarian code believe that much of human behavior can be catalogued as sinful or righteous, right or wrong (e.g., "Thou shalt not kill"; "Thou shalt have no other gods before me").

B. Knowledge-Ignorance Theory:

Socrates believed that "knowledge is virtue." Many institutions of higher learning say, "Seek ye first the kingdom of knowledge and all the rest will be added unto you." Worshipers at the shrine of knowledge mouth the platitude: "Wars would cease if we only knew each other better"; "The millennium could be ushered in if we all spoke one language"; "Problems of human relations would vanish if we could establish more synaptic channels in our collective gray matter."

C. Maturity-Immaturity Theory:

"Misbehaviors are immature ways of solving problems which should be solved in ways that are mature," says Overstreet in *The Mature Mind*. [1]

Undoubtedly most of us, after a little reflection, will realize that all three theories find illustrative defense in the numberless situations of life. In fact, each forms an integral part of human existence.

"Right and Wrong" projects sharp lines of demarcation morally.

"Knowledge-Ignorance" involves the accrual of facts in any given situation.

"Maturity-Immaturity" is exemplified by new concepts, new methods, and integration of the total personality.

In fact, some complex situations may involve elements of all three. For example: Some months ago I was the fortunate recipient of a magnanimous invitation to give these lectures here. I was flattered, thrilled, and frightened by the prospect. Before a final decision to accept the invitation many questions had to be faced and answered:

1. With the meager amount of time which I have to devote to my family, was I justified in taking five days away from them?

2. Could I afford financially to come? A week out of my practice could be expensive, especially with the continuing overhead of two full-time and two part-time employees.

3. Could I leave my patients safely with another doctor?

4. Would the trip be too much of a physical strain with two nights spent in a sitting position?

5. Could I say anything of enough importance to justify my occupation of a chapel lectern for five days?

6. Do I have a responsibility as a layman (and as a member of our General Board) which transcends that to my family and my local church?

7. If I do have such a responsibility, does it include such a task as this?

8. Am I spiritually prepared to place myself before a student body of one thousand earnest young people and to guide their thinking?

Certainly all these questions cannot be answered on the basis of moral integrity; nor completely on factual accrual; some of the decision must rest upon my relative maturity of analysis.

During a majority of your chapel sessions, your speakers undoubtedly deal, in the main, with problems primarily of right and wrong. During your classes you are concerned largely with accumulation of fact. Consequently, I should like to jump to proposition number three and spend the week on the general subject of "Achieving Maturity."

Relative maturity has many facets or components. Today we shall consider the first, namely, the ability to deal in basic issues or principles. The immature mind wanders peripherally; the mature mind bores directly to the center. The immature mind becomes completely in-undated by minutiae; the mature mind climbs on top of the heap and surveys the whole. The immature mind is exemplified by the army private who condemns the entire army and its "high brass" because his foxhole is wet; the mature mind is represented by the soldier who realizes that his is a microcosmal existence with little general application.

In his book *The Mature Mind*, Overstreet discusses this problem when he says: "His shortcomings in relationship to this great insight do not so much mark him as a creature of evil, or of factual ignorance, as they suggest his being a creature who has habitually grown into adult stature and status without becoming mentally, emotionally, and socially mature." Overstreet continues: "Man is a creature of moral law. The picture of Moses descending from Mt. Sinai bearing the tablets of the law is a symbol of the revelation to man of his own uniquely human nature. Animals know no moral law. For ages, man himself knew no moral law. His relations with his fellows were instinctual, not moral." [2]

The law of the fang prevailed. But, as Overstreet observes, the principles delineated by Moses "came not as the whimsical and arbitrary dictates of a tyrant, but rather as the voice of moral reason itself."

Here in the Decalogue was the first set of moral principles by which all men could live together in peace and justice and confidence. Again Overstreet continues, "The Decalogue was the first statement of the oneness of all who are human: oneness in rights and oneness in obligations."

What happened to these magnificent and basic laws when they were exposed during ensuing centuries to the onslaught of immature minds?

Perhaps we can find the answer if we open the curtain of history just a trifle and glimpse separately some of these basic ethical laws.

Remember the sabbath day, to keep it holy. Six days shalt thou labour, and do all thy work: but the seventh day is the sabbath of the Lord thy God: in it thou shalt not do any work, thou, nor thy son, nor thy daughter, thy manservant, nor thy maidservant, nor thy cattle, nor thy stranger that is within thy gates.

What happened to this universal basic principle which was originally voiced for a twofold purpose: a given period in which to worship God, and a period of physical, mental, and spiritual rest so needed for the recreation of the individual? This was God's intent!

By the time Christ had come to walk the dusty roads of Judea, that bright principle had been smudged and tarnished by the immature priesthood until only a series of relatively insignificant taboos remained.

Yes, the Pharisee would not light a fire on which to cook during the Sabbath day; but he would upbraid Christ for healing the sick on the Sabbath. So deeply was the true sabbatical law submerged that Christ again was forced to ask, "Is it lawful on the sabbath days to do good, or to do evil? to save life, or to destroy it?"

The answer should have represented a part of their moral armament, but it did not. Instead, "They were filled with madness."

But may I quickly interrupt your somewhat smug reflections by again quoting the words of the Galilean, "For I say unto you, That except your righteousness shall exceed the righteousness of the scribes and Pharisees, ye shall in no case enter the kingdom of heaven."

Lest we fail to grasp the significance of personal application here because of the vastness of the law, may I state that I completed four years in a state university and never "cracked" a book on the Sabbath. During most of that four years I not only carried a full load scholastically, but also worked part-time to balance the exchequer. Nor did I use those Sabbath days to "catch up" on my sleep at the expense of attendance to the means of grace (Sunday school, morning worship,

N.Y.P.S., and evening evangelistic services). I will admit, however, that there were many Monday mornings which found me crawling out of bed at four o'clock to prepare for a class or quiz.

Why do I mention this? To parade my outward righteousness before you? God forbid! No, I mention this only as proof-positive that an ordinary student (not a quiz-kid) can complete a college course in a demanding school, and do it without breaking God's law; and further-more, without losing the Shekinah of God's glory from his life because of absentia from the temple.

Adherence to this principle during these years as a surgeon has helped me to evade the treadmill of professional slavery which has entrapped so many of my colleagues. Recently, I made myself rather unpopular with my conferees at a hospital where I am an attending surgeon. They asked me to participate in the teaching "Grand Rounds" at ten o'clock each Sunday morning when the staff meets to discuss interesting cases -- all this is part of the residents' and interns' training program. These weekly sessions were placed on Sunday simply so that the doctors would not find the period conflicting with their office hours, their golf, or their poker. My answer to them was something like this: "Gentlemen, I give my Sundays to church attendance and worship. In fact, I teach a Sunday-school class at the same hour you wish to use for these sessions. I try to limit my professional duties to those which are necessary to the well-being of my patients; but I cannot enter into an extra teaching session which is not of vital significance to the health and welfare of those under my care. I shall be happy to come at any other time during the week, even if I must rearrange my office hours to do so."

"Remember the sabbath day, to keep it holy" is still a basic law of behavior.

* * *

Thou shalt not bear false witness.

Today, we have largely discarded truth as an absolute virtue. The gospel of expediency, that which seems best for the moment, has supplanted the virtue of honesty. All graduations of lying have emerged. Virgin Truth has been soiled and besmirched until today her clothes have taken on a chameleon tint which makes her difficult to distinguish in a mendacious [lying, untruthful -- DVM] environment.

"Every man has his price," glibly parrots the average man in an attempt to rationalize his aberrations from the straight path of rectitude.

I have a very fine Christian attorney who cares for all my legal matters, including my income tax. I recommended him to one of my Christian [?] brothers recently as not only an excellent income tax specialist but also as a Christian. His reply startled me: "I can't afford to use him, Howard; he's too honest."

This was a problem in ethical development [?? sounds more like a problem in moral character -- DVM]. I would have trusted this man with any account of my personal money without note security or collateral and I would have found my trust justified. Yet this same man would have

signed his name to an income tax report -- declaring its honesty in spite of questionable items included therein.

Even the courts have adopted a somewhat ridiculous and superstitious ceremony in their attempt to obtain honest testimony. A witness must place his hand on a Bible and swear an oath that he "will tell the truth, so help me God." The inference is that if you lie after having taken an oath with your hand on a Bible something dreadful may happen to you. By logical deduction, inference can also be drawn that you are not obligated to tell the truth if you have not sworn by the Almighty to do so. Under those circumstances you could perjure yourself with impunity.

Recently, the popular press has had a field day airing the ethics of some large segment of the medical profession, especially as it relates itself to "fee splitting." The American Medical Association, the American College of Surgeons, and other similar groups are implacable enemies of these unethical practices; but little has been generally known about them until the lay press began to crusade.

The evils of fee splitting are basically three:

(1) Sub-rosa, "under the table" rebates are given to the referring agency without knowledge of the patient. Usually these are monies paid by specialists to referring doctors. Referring agencies may be not only other doctors but may be extended to include insurance agents, union officials, etc. In reality, this practice places the patient on the auction block, where he is sold to the highest bidder. Actually, he is operated upon by the surgeon who is willing to make the largest kickback to the referring agent. Technical skill is of secondary importance and the patient finds his fate decided on an economic basis rather than one of professional excellence.

(2) The fee is usually raised high enough so that the gross fee which the patient pays will represent the usual fee to the surgeon plus enough additional to satisfy the referring agent (usually an equal amount). Thus the patient pays double the fee which he should.

One medical acquaintance of mine volunteered a while back: "Why should I repair a hernia? I could collect \$200.00 doing it myself. Instead, I send the patient to Dr. _____ [a very influential Chicago surgeon], who charges the patient \$600.00 and sends me half of it. I can make \$100.00 more by not even touching the case."

(3) Practically all hospitals approved by the American Hospital Association require that the medical doctors sign a pledge before they are granted staff privileges at that hospital. One clause within these staff application blanks deals with fee splitting. When signing it the doctor pledges himself not to indulge either directly or indirectly in such practices. The American College of Surgeons, the American Boards of Surgery, and boards of the other specialties require similar pledges. In spite of these pledges which must be signed by nearly all physicians at one time or another, there are many who indulge in varying degrees in this unethical practice. Among them are even found professing Christians.

Many of these men attempt to justify their ambiguous position by rationalizing:

- (a) That the referring doctor deserves some remuneration.
- (b) That those sitting in authority in these specialty groups indulge in the same practices.
- (c) That the patient is not interested in the distribution of his fee.
- (d) Etc.

In answering these men, I attempt to make them understand that there are inequities in the rule as it stands today and that some attempt should be made to formulate a workable plan whereby the patient, the specialist, and the referring agent are all protected, equitably. However, I tell them I cannot sign a pledge and then break it for the expediency of economic pressure. As long as the rule stands, I must obey it. I dare not bear false witness.

This is no small matter; this is a problem which faces businessmen in all walks of life. A Christian businessman may find his competitor, who is less ethical than himself, prospering far more by misrepresenting merchandise. There is often an economic cross to be borne by a Christian. I have every reason to believe that I could double my net income within the next twelve months if I were willing to compromise my ethics.

But with Paul I can say: "But what things were gain to me, those I counted loss for Christ. Yea, doubtless, and I count all things but loss for the excellency of the knowledge of Christ Jesus my Lord: for whom I have suffered the loss of all things, and do count them but dung, that I may win Christ, and be found in him, not having mine own righteousness, which is of the law, but that which is through the faith of Christ, the righteousness which is of God by faith: that I may know him, and the power of his resurrection, and the fellowship of his sufferings, being made conformable unto his death; if by any means I might attain unto the resurrection of the dead" (Phil. 3:7-11).

* * *

Thou shalt not steal.

Here is a third basic moral law dealing with the sacred right of ownership and possession. This commandment usually conjures a mental picture of a burglar, a sneak thief, an armed robber, or other criminal. Often, however, more subtle forms of stealing are practiced by respectable

instruments purloined from the army and navy. There are housewives (professing Christians) whose linen closets bulge with towels bearing the word "Pullman" or the insignia of various hotels. I know others who borrow across the back fence with little or no intention of paying it back.

While attached to SCAP headquarters in Tokyo, I was called to the office of the Army Chief of Chaplains one day. After a cup of coffee, the Colonel made known the reason for my summons.

"Doctor, you have been associated somewhat with the 'GI Gospel Hour' work in this area, haven't you?" he queried.

"Yes," I answered a bit hesitantly; for I was not sure how sympathetic he was toward this evangelical activity in the various centers. Actually these meetings were about the only attempt at a truly evangelistic emphasis in that theater of operation. It had been started by a group of godly chaplains from the evangelical churches.

"Well, Doctor, I am up against a real problem with the Yokohama group, and I want your advice as to the best solution."

I breathed a bit easier since at least his charges were not personal.

He continued: "I received a tip that I should go down to the Yokohama base chapel because of purported activities there which were not exactly conscionable. Upon entering the chapel I found a stockpile of army material: blankets, drugs, food, sweaters, and other personal items. I questioned the enlisted man on duty as to why these things were there. He stammered a bit and then told me that some of the boys had become quite distressed over the austere existence of certain missionaries in the area. These poor people were living without proper food, clothing, shelter, or medical care. Stirred to activity by this sight, several of these boys had decided to help alleviate the rigorous environment by donating necessary items to the cause.

"But, you see, Doctor, this was all very fine except for the small technicality -- this equipment belongs to the army, not to them. I do not want to court-martial them, for I have no desire to make it appear that my office is persecuting any group engaged in good works."

"I feel that your attitude is most magnanimous," I told him; "and I suggest that it might be well for some of us to talk seriously to them about their ethics."

With these boys, the problem was not so much one of moral delinquency as it was one of ethical immaturity. If we are epistles "known and read of all men," then our ethics must keep pace with our testimony. If our ethics are to be unimpeachable, then we must learn to think in terms of basic moral issues. We must live "centrally," not "peripherally."

* * * * *

Lecture 2

Dr. Cantrell's introduction made me think of the old saying, "A young man should be sure that the gleam in his girl friend's eyes isn't the sun shining through the back of her head."

Which also reminds me of the bashful young fellow who came to the old cowpuncher and asked, "Pete, what's the right way to ask a girl for a date?"

The old cowpuncher scratched his head and answered, "Well, Son, there ain't no wrong way."

Every time I find myself saddled with tasks such as giving these lectures, I declare fervently that I'll stick to medicine. But it seems as if I'll never learn. My predicament reminds me of another story. Seems as if a vacationer in a small town was loafing one day leaning on a fence post languidly watching a beautiful, calm pastoral scene just where country and town met: a babbling brook, a herd of cows, a few sheep knee-deep in clover. As he watched this scene of tranquillity he noticed the local mailman toss his bag over the fence, climb after it, and begin to trudge across the pasture rather than to walk the extra distance around by the road. The stranger watched his progress leisurely. Then all of a sudden he saw a "gentleman cow" detach himself from the herd, look over toward the mailman, paw the earth a couple of times, and with a bellow start toward him, intent upon some sort of meeting. The postman heard the bellow and started to sprint. From then on it was the postman and the bull all the way across the pasture just as fast as they could run. Finally with a mighty lunge he cleared the fence in a shower of magazines and postal cards, just as the bull hit the other side in a great cloud of dust. He lay there in the grass for a little while, then shook himself, and finally painfully arose.

The onlooker rushed over, brushed off the dirt and leaves, and queried excitedly, "Are you hurt?"

"No."

"Boy, he nearly got you, didn't he?"

In a discouraged tone the postman sighed, "Yep, he nearly gets me every day."

I see they have a tape recorder out here this morning to preserve this chatter. There was a busy psychiatrist in Chicago who used to take down his case histories on tape. One day he had a patient lying on his couch ready for an interview. As they started the conference the medic droned in a hypnotic tone: "Now you just tell me your story. I am taking it down on tape so that tonight after everything is finished I can sit, listen, think about your problem, and come to a diagnosis in an unhurried fashion."

So, lying prone on his couch, scanning the ceiling, the poor neurotic began his story.

After about five minutes the psychiatrist gently slipped out of his chair and noiselessly out the door, leaving his tape recorder running. He glanced at his watch and decided it was time for a cup of coffee. He was down the elevator, into the corner drugstore, and up on the stool before he could have been missed in the office. He was just stirring in the sugar when a famished voice beside him said, "Waiter, I'll have a cup."

Startled, the doctor turned to meet the innocent gaze of his patient. "I thought I left you up there telling your story," he stammered.

In a frustrated tone the patient explained, "Well, I will tell you, Doc, it's like this; I have been to a half a dozen psychiatrists and I have told this story so often I'm tired of it. So I had a tape recording made of it. My tape recorder is up there talking to your tape recorder right now."

* * *

Yesterday, we talked a bit about one phase of maturity. You will remember we talked a bit about Moses and the Decalogue. In fact, I am tempted to read a poem to you this morning. This early in the day you might even say it is like going from "bed to verse" -- and I think I am!

All joking aside, this is a serious poem. It is a tribute to the man who delineated to us the first bill of rights by which men could live in security together. I want to read Cecil Francis Alexander's poem "The Burial of Moses."

The Burial of Moses

By Nebo's lonely mountain
On this side Jordan's wave,
In the vale of the land of Moab,
There lies a lonely grave.
But no man dug that sepulchre,
And no man saw it e'er;
For the angels of God upturned the sod,
And laid the dead man there.

That was the grandest funeral
That ever passed on earth;
But no man heard the trampling,
Or saw the train go forth,
Noiselessly as the daylight
Comes, when the night is done,
Or the crimson streak on Ocean's cheek
Fades in the setting sun.

Noiselessly as the springtime
Her crest of verdure waves,
And all the trees on all the hills
Open their thousand leaves;
So without sound of music,
Or voice of them that wept,
Silently down from the mountain's crown
That grand procession swept.

Perchance some bald old eagle
On gray Beth-peor's height,
Out of his rocky eyrie,
Looked on the wondrous sight;
Perchance some lion, stalking,
Still shuns the hallowed spot;

For beast and bird have seen and heard
That which man knoweth not.

But when the warrior dieth,
His comrades in the war,
With arms reversed and muffled drums,
Follow the funeral car;
They show the banners taken,
They tell his battles won,
And after him lead his matchless steed
While peals the minute gun.

And the noblest of the land,
They lay the sage to rest;
And give the bard an honored place,
With a costly marble drest,
In the great minister's transept height,
Where lights like glory fall
While the sweet choir sings, and the organ rings
Along the emblazoned wall.

This was the bravest warrior
That ever buckled sword;
This the most gifted poet
That ever breathed a word;
And never earth's philosopher
Traced with his golden pen,
On the deathless page, words half so sage
As he wrote down for men.

And had he not high honor?
The hillside for his pall,
To lie in state while angels wait,
With stars for tapers tall;
The dark rock-pines like tossing plumes
Over his bier to wave,
And God's own hand in that lonely land
To lay him in the grave:

In that deep grave without a name,
Whence his uncoffined clay
Shall break again -- most wondrous thought!
Before the judgment day;
And stand, with glory wrapt around,
On the hills he never trod,
And speak of the strife that won our life

Thro' Christ, the Incarnate God.

O lonely tomb in Moab's land!
O dark Beth-peor's hill!
Speak to these curious hearts of ours,
And teach them to be still.
God hath His mysteries of grace,
Ways that we cannot tell.
He hides them deep, like the secret sleep
Of him He loved so well.

This morning we should pursue just a little farther our thoughts concerning maturity. First let us make a quick resume of what we said yesterday. Someone has said, "Maturity is the integration of personality, the balance of all of the components of human existence."

Yesterday we considered two or three of its integral parts. We saw that:

1. Maturity involves ability to deal in basic issues, in analytical methods that are central, not peripheral.

2. Maturity embraces the consciousness that man is a creature of moral law, that moral development is a "liberating revelation of the means by which men may live together with mutual confidence," [3] with controlled behavior that unites each individual in a common security.

3. Maturity is gained, not purely by factual knowledge, but by insight. This "insight" we commonly call "wisdom." Cooper's oft-quoted lines are illustrative of this:

"Knowledge and wisdom, far from being one, have oftentimes no connection.

"Knowledge dwells in heads replete with thoughts of other men.

"Wisdom, in minds attentive to their own.

"Knowledge is proud that he has learned so much.

"Wisdom is humble that he knows no more."

Today let us think for a few moments upon the fourth component of maturity, that which relates itself to what I shall call "the human equation."

"To mature," says Overstreet in brief, "is progressively to accept the fact that the human experience is a shared experience. The human predicament is a shared predicament. A person remains immature whatever his age as long as he thinks of himself as an exception to the human race. No man lives unto himself."

"Psychologists tell us that we mature as we move from egocentricity with I as a center, to sociocentricity ... Then we begin to include others in our individual orbits." Overstreet emphasizes this fact when he says, "The human being is born in a world of isolated particulars. He has to mature into a world of wholes."

A baby's own little world involves only himself. When he is fed and comfortable he is happy and coos. When he is hungry he squalls! His environment is composed of pleasurable and unpleasurable sensory stimuli relating purely to his own anatomy. Then one day Daddy shouts excitedly, "The baby cooed at me this morning; he noticed me." Thus the baby is beginning to develop sufficiently to notice that there is someone else beside himself in the world.

"As adults, we begin to mature when we realize that we are expanding from a world of simple particulars which involve only ourselves to one which involves others. Life is a shared experience. The immature see with eyes focused only on their own limited world, their own wishes, their own pride, moods, preoccupations, irritations, ignorances, prejudices, privileges, ambitions and conditionings." [4] Then as they enlarge their vision a bit they become provincial. At this stage they are willing not only to include their own egocentric world but also their immediate geographical locale. At this developmental level they remind me of the dowager from Boston who had never ventured any farther from Beacon Street than Cambridge. One day she decided to take the tremendous excursion trip 'way out west to Hartford, Connecticut.' She had always sturdily maintained that the banks of the Charles separated the intelligentsia from the Indians. Thus it was with great forebodings that she took the train that day. As the train wound out through the suburbs she saw a sign along the track which proclaimed: "I-M from Boston," meaning "one mile." But she misinterpreted it as the colloquial contraction for "I am." She settled back into her seat and sighed contentedly as she murmured, "I'm from Boston; how simple, yet how sufficient!" Her little world had matured to the place where she had at least become provincial.

Then there are those whose maturity makes them citizens of the world. Their brotherhood transcends national boundaries, races, and creeds. At this juncture the words of Edward Arlington Robinson are very apropos, "The man who goes too far alone goes mad in one way or another."

Nietzsche, the mad philosopher, (the adjective is correct!) "spoke witheringly of mercy and pity; mocked the 'slave morality' which the meek Jew of Nazareth had recommended; proclaimed the doctrine of the Superman -- the individual who was 'beyond good and evil.' To be hard, heroic, fearless, disregardful of the 'many too many,' who cluttered the earth." [5]

This was the "good news" for which these Nazi braggarts thanked their prophet. He advised them to build an exalted nation, a race of supermen, splendid in solitary pride.

"But their royal road was paved with human skulls that led to Beukenwald."

They followed eagerly, blindly, a philosophy which branded them as immoral and immature.

Provincialism can extend, as we have seen, from the camphor and old lace innocence of the correct Bostonian to the murderous frenzy of the Nazi elite.

My wife and I were amused again and again by the provincial immaturity displayed by our Americans in the occupation in Japan. In their letters home one could read such profound utterances as, "These Japanese are certainly stupid; they drive on the wrong side of the road."

Has some interplanetary tribunal handed down a decision that the side of the road on which we drive is the proper side and all others improper? Are left and right synonymous with "proper" and "improper" when applied to driving habits? Actually I know a lot of women drivers who much prefer the left side of the road.

I still shudder to remember the home of an American colonel in which I was being entertained. It had been the estate of a very wealthy Japanese businessman but was temporarily being used to house occupation personnel. One of the first gestures of international good will on the part of the colonel was to smear with GI paint the magnificent Oriental hardwood paneling and decorative trim. To his undisciplined, crude, inartistic, provincial soul, American rubber paint was far more beautiful than ebony and mahogany even though it be in another man's home. And we wonder sometimes why our international good will is at the low ebb it is today. We have never conceived within our own minds the fact that other races are qualitatively equal with us, though often underprivileged. Even mission boards have many times forgotten that their prime objective is to preach the gospel of Christ. Instead they attempt to sell Western civilization and culture to people whose culture, though different, often surpasses our own in many facets. Often in Japan I was made to feel like a country bumpkin as I met the courteous, dignified, educated, genteel Japanese.

We are immature when we say, "They drive on the wrong side." We begin to mature when we say, "These people drive on the left side of the road." At that juncture we are beginning to realize that their side of the road is just as correct as ours. Dextra and sinistra are not synonymous with "correct" and "incorrect" in spite of their semantic corruption.

Provincialism often creeps into the church. The man is immature who says, "I will give to our local budget, but I will not send a dime overseas to convert the heathen."

He may be a Christian; he may eventually reach heaven; but he will stand before God as an adult who "has never grown up." This is probably not basically a moral issue; but actually may become one if he persists in such a state. He lives an egocentric life, which is basically selfish. We often look at such an individual, shake our heads solemnly, and chant in a recriminating voice: "Brother, what you need is an altar of prayer!"

At times our diagnosis may be right if his reactions are born of selfishness. But, more often we need instead to proclaim with conviction, "Brother, you need to grow up!"

Man can be mighty immature, you know, in his reactions and be a Christian. I must believe this or grovel beneath the terrible load of personal condemnation.

Again may I reiterate that ours is a shared experience, shared with the entire world in which we live. Isolation is an idle dream of those who would withdraw themselves from life.

Many of us have dreamed of a tropical island where we might live an effortless existence, removed from traffic, telephones, hustle, work, and worry. Others have dreamed of a chicken farm in a prairie paradise. Every time I fight my way across Chicago from one hospital to another I declare that sometime in this life I am going to get away. Sometimes when the phone rings, I say to myself, Someday I shall procure a portable phone and start walking. When I reach the place where someone says to me, "What is that?" I am going to settle down and stay the rest of my life. Yes, there is always within our hearts the dream of "getting away" to return again to that state of immature bliss. Yet, how many of us would stay there if we found it! We might stay about a month but no longer. I know from experience, for I "get away" once a year. I head back into the hills and fish. At the end of two weeks I am getting a little anxious to return home. I begin to wonder how Chicago is making it without me. I get the nostalgic desire for a nauseating whiff of ether and the sight of an operating room. Why do our dreams of paradise pale so soon? Because such an existence is not satisfying to the inner man. As we mature, our orbit of activity and association enlarges. Then we know that life is meaningful as we share it. Never again can we be happy to be hermits.

* * *

Maturity has one more component which I wish to discuss briefly, and that is "perspective." First let me define it. Perspective involves that ability to place things in their proper relationship. Someone has said the process of education is that process by which we learn to differentiate the important from the unimportant. Any of you who have had youngsters or even little brothers and sisters around the house must remember the first time that the four-year-old came running to you saying, "Hey, look what I just drew."

The crude crayon caricature may have had a flower and a cow both the same size. Little tots have no conception of size or distance. Perspective is something beyond them. In a very real sense the ability to differentiate the important from the unimportant enters into our process of maturity. Again I think that we must realize that this enters into all phases of life and I am especially thinking of our relationship with one another. For if we are going to have a shared relationship and live with people we must be able to differentiate between those things that are important and those things that are not. I am faced with this problem every day in my consultation room. A medical doctor should be able to make a diagnosis nine times out of ten by the history alone before he ever makes a laboratory or physical examination of the patient. Taking a clinical history from a patient, however, is not the easiest procedure I have ever tried. Usually I start the history by asking, "Mrs. X, what is your specific problem today? Just what is bothering you?"

"Well, Dr. Fleecum says I have ulcers."

Then with as much courtesy as I can muster, I reply, "But, Mrs. X, I am not interested in what Dr. Fleecum said you have. I am interested in what is troubling you.

"Do you have pains?"

"Do you see things that aren't there?"

"Do you hear voices?"

"Do you itch?"

"What is wrong with you?"

Then for the next thirty minutes I try to pry a direct answer out of her. Most people have developed unconsciously the ability to start at the periphery and talk in ever decreasing circles until finally, by consistent probing, they may give you an answer. You ask them a direct question, "Do you have pain?" and before you get an answer you have learned that Aunt Tilley, fourth removed, on Mother's side, died of asthma; that Uncle Abner on Father's side had ingrown toenails; and that Cousin Jethro has fits. By now you have four pages of unrelated fact and fancy, hearsay, and folklore. Now comes the task of reviewing this hodgepodge. You must pick out a fact here and a fact there, discard the extraneous material, disregard the minutiae, and try to fit the relevant facts into a diagnostic picture.

Your relative ability to perform this last procedure will determine your career as a successful diagnostician. If you don't do it well you won't be long troubled with patients. If they persist in your care, they will probably die. If they wish to survive, they will go to someone else. You can chart and graph your success on your ability to differentiate between the important and the non-important.

Diagnosis, however, is only the first step in successful care of a patient. The doctor must also plan and conduct a successful course of treatment. Let me illustrate. Less than a month ago a woman came to my office complaining that for nine years she had had a lump behind her left knee. Recently it had grown to such size that she could not completely straighten her leg. She had consulted doctors throughout the years, but had been advised consistently to disregard it as unimportant. Finally she couldn't walk up and down the stairs. Then she was advised to see me. That is usually the last resort!

The answer at this stage was fairly obvious. It should be removed surgically. In a somewhat extensive operation, it was removed without impairing the function of the limb. The pathologists' report of the tissue was distressing. Portions of the tumor had turned malignant. Sections of the tumor were sent to various large medical centers. Each returned the verdict, "Cancerous." I presented her case to a tumor clinic at the University. The answer was still the same; and the recommended treatment always identical. I had known the answer, but I wished confirmation.

Yes, the woman must have her leg amputated high in the thigh, and all the adjacent glands removed from the groin. Then came the battle in my own heart -- the reluctance to tell her what I knew I must.

I berated myself, "What a horrible thing to do to an attractive, middle-aged woman! Should I do it? Do I have the right to mutilate a woman in this fashion? What if she dies during this rather dangerous procedure?" (In any major surgical procedure there is always a certain risk.) I thought of her youngsters at home who might be embarrassed by a one-legged mother. I contemplated her

social contacts and the stigma of deformity. Yet, as I weighed these factors, I had to face the gruesome reality that this attractive, vivacious wife and mother had a cancer which would kill her in less than two years unless it was surgically extirpated. I had to decide which was the more important, to live two years with two legs, and die; or bid for a longer span of earthly existence with only one. Obviously in an extreme case of this sort there was but one answer; I had to recommend amputation and subsequently had to do the job.

I was forced to differentiate between that which was important and unimportant. In a very definite sense we face the same basic problem in even the less dramatic facets of living. You may never have the necessity of deciding whether or not you should amputate someone's leg; but again and again you must analyze situations on the same basic criteria.

Someone has said, "Education is the process whereby you learn to differentiate between the important and the non-important."

Someone else has said, "The caliber of a man can be determined by the size of the matter which annoys him."

Chicago First Church just last Sunday celebrated the most glorious day in her history. On that memorable day, November 8, 1953, we dedicated our new church sanctuary and educational unit. To some of us who had wrestled with the prodigious task of uprooting a congregation and moving it to a new location, it was a day of great rejoicing and satisfaction -- a day of thankfulness to Almighty God for His guidance and approval of our exodus from the old and establishment of the new. It was also a day of reminiscence; of remembering the progression of events, the aids and the impedimenta. Most interesting was the retrospective glance at the personalities involved and their reactions to the whole problem.

First Church started in an atmosphere of revival fire just after the turn of the century. Dr. Bresee organized it with 100 charter members. They built their permanent sanctuary in 1913 and it served them well for forty years. However, forty years ago, congregations gave no thought to the need for educational facilities. The Sunday-school classes met in general bedlam in make-believe rooms the walls of which were only the warm, reverberating atmosphere.

As the years passed, the members began to move from the neighborhood to more suburban quiet, until First Church was left surrounded by strangers and an unfriendly and unsafe community. The Sunday school dwindled. The night services were shorn of many attendants because of the danger lurking between transit lines and the chapel.

Finally, as an official board we were faced with an intolerable situation which could not remain static. We asked ourselves frankly:

1. Should we spend \$150,000.00 on a new educational unit in a locale which had ceased to be our parish?
2. Should we continue to improvise while our Sunday school dwindled?

3. Could we move a congregation from their traditional Bethel without dissemination?
4. Could our people objectively face the necessity of leaving "hallowed ground"?

In three years the transition was complete. The bulletin board recorded 239 in Sunday school on that last Sabbath in the old location. The new bulletin proudly displayed the numbers 552 at the first service in the new. With the exception of less than a half dozen, the congregation had weighed the evidence, had acted maturely, and a church was saved.

Most of us, however, at times react very immaturely. I come from good Scotch ancestry and have inherited enough of their frugality to respond with vehement resentment when I am faced with the facts of the present high cost of living. It was in such a mood that I decided a few autumns ago that I would paint and install my own storm sash. The office and operating room had had me shackled day and night, but I saw Thanksgiving Day as a moment of freedom when I could protest visibly against the payment of \$2.00 per hour to have my storm sash hung.

So, early on Turkey day I rolled dutifully and crusadingly out of bed, donned a pair of army coveralls, a pair of rubber-coated gloves (to protect my surgeon hands), and began to paint. The first hour was emollient to my martyr spirit -- then in the distance I heard the ominous rrrrrring! Then my wife's voice calling down the stairs, "Honey, it's Mrs. Gottrocks on the phone! Something about the baby."

I grumped and mumbled as I gruffly picked up the white man's burden and growled into its mouthpiece.

"Doctor, my baby has a fever of 104 degrees and I'm terribly worried; can you come right over?"

"I'm sorry, Mrs. G., but I'm tied up today; however, I'll call Doctor Takapil and have him come immediately."

Yes, I saved two dollars, but lost ten -- and a patient. A bit ridiculous, wasn't it? My prejudices had completely stifled my clarity of analysis. My sense of values and responsibility had become distorted to a dangerous point.

Our evaluation of others is often unfair because we have placed some inconsequential trait in a position of overwhelming importance; or we have misinterpreted some act or characteristic in another individual until it has eclipsed all else.

I have a ministerial friend who was sorely criticized during depression days because he had a bellhop carry his bags at a railroad station. The fact that his critic did not know was that he had suffered a back injury during the first world war and was physically unable to carry his own bags.

I have a wonderful friend who was sorely tried by the fact that his pastor did not mow his own lawn. His innate loyalty and devotion, however, helped him to maintain his equilibrium until he found out that the pastor's physician would not allow him to indulge in such physical exertion.

In Paul Carroll's play "Shadow and Substance," the servant girl for Canon Skerritt reveals the canon's contradictory character to the local schoolmaster, who hates him. "Oh, I know," says Brigid, "you have a dagger for him because he can hurt and say killin' words. . . . you see him when he's proud, but I see him when he's prayin' in his little place and the tears on his cheeks; you see him when he dines, but I see him when he fasts; you see him when his head is up and fiery like a lion, but I see his head when it's down low and his words won't come -- It's because of that, that you can hate him and I love him. . . If we could all see each other all the time in the big hangin' mirrors, the whole hate of the world would turn into dust." [6]

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Lecture 3

The last advice that my district superintendent, Mark Moore, gave me before I came down here was, "Howard, if you don't strike oil in twenty minutes, quit boring."

Another has said, "Some speakers have a tendency to electrify an audience, others just gas it."

I thought it might be interesting for us to review a few things that medical science has discovered recently. First, we have found that women must quit rinsing their hair in vinegar and lemon juice because it may ooze into their ears and give them "pickled hearing."

Another disturbing note came from the fellow who wrote to the Karo company and said, "Gentlemen, I have taken six cans of your corn syrup and my corns hurt as badly as they ever did."

Some testimonials for Hadicol are more encouraging. One man wrote, "I have been completely deaf for twenty-six years. I took three bottles of Hadicol and heard from my brother in Dallas."

I don't think we should start the morning without another psychiatric story. There is one about the demure young lady who came to the psychiatrist leading a full-grown kangaroo on a leash. They hopped in together and stood quietly before the great savant. He looked up, blinked in bewilderment, and queried with as much dignity as he could muster, "My dear lady, what can I do for you?"

"Oh," she answered sweetly, "I'm not the patient; it is my brother here. He thinks he is a kangaroo."

Yesterday we talked a bit about the necessity for gaining perspective while in the middle of a problem. Someone asked me later, "How do you gain perspective when you are in the center of a problem? How do you know how to handle it?"

In answer, I might say that I have two single rules which you may use:

1. Marshal all the facts in the case. Don't allow misunderstandings or half truths to cloud your decision. Determine the basic issues which are involved. Solve your problem as you would an "unknown" in the chemistry laboratory. There the professor hands you a sample of ore with the instructions, "Analyze this quantitatively and qualitatively."

Your task then is to separate into distinct entities each component part and to record the amount of each. No superficial examination will give you the answer. Instead, a definite analytical procedure must be completed before an answer is attempted.

2. The second rule is: Do not allow yourself to be rushed into an answer. Don't act too hastily. Stand back and survey the problem as a whole. Someone has said, "Never make a decision on an empty stomach." Eat first, think your problem through, then act.

The medical doctors in the audience will agree that hurried decisions in the practice of medicine are usually unwise and often embarrassing and even dangerous. The surgeon who makes snap decision to operate will soon find himself pegged as "knife happy."

When confronted with a patient who may have appendicitis, I usually say: "Mrs. Kenesaw, you may have appendicitis. I cannot be sure at this stage. However, there is one characteristic of appendicitis which is helpful: it will either become worse or better -- it does not remain static. Consequently, I feel that we should admit you to the hospital for observation. If the symptoms and signs become more severe and specific, then we shall operate; if they lessen and subside, then we shall allow you to return home after a safe interval."

I have found that such a conservative approach instills confidence in the patient, cuts down the errors and regrets which I have, and keeps my "margin of safety" high!

I have a nine-year-old, typical, all-American son. He is the same sort of gremlin that most healthy youngsters are at that age. About two years ago we went through a period when matches held an irresistible fascination for him. In fact, fear of corporal punishment was not sufficient to deter him from striking matches wherever and whenever he could find them.

We tried the old "patriotic" method; we furnished the stripes while he saw stars. Or to couch the description in a different symbol, we made a "board of education" out of a lath -- and it made him smart!

However, such deterrent ceased to be effective coincidentally with the recession of the smarting of his legs.

One day my wife called me in mid-morning at the hospital to tell me in a discouraged and frustrated tone that Kimmie had been caught again. This time it was in my clothes closet where a stray spark could have ignited the nylon shirts hanging there with resulting disaster.

I said to her, "Well, what have you done about it?"

"Nothing," was the distraught reply; "I'm at my wit's end."

"Well," I said reluctantly, "don't do anything about it until I've had opportunity to think a little."

All day long as I commuted between the hospitals, I fretted over a plan of attack. Should I give him away, or cut off his fingers, or handcuff him to a pipe in the basement, or let him burn the house down? Every ridiculous and sensible plan I could think of seemed ineffective or illegal. Finally I hit upon a scheme which seemed a bit diabolical, yet one which might solve this very serious problem...

Yes, the plan might work, I mused.

I opened the door that night ... I dared not let his angelic expression of exuberance weaken me from my purpose -- he had to be punished! The survival of the household might depend on the success of my plan. To bolster my waning courage I said in a commanding tone, "Kimmie, I'd like to see you back in my room."

The exuberance, the bravado, the fun were gone from his face when he slowly entered. My tone had told him that the jig was up and he was "in for a tanning."

"Kimmie," I began in a voice like the crack of doom, "your mother tells me you were playing with matches again!"

His facial expression was that of a stricken soul from which all hope had fled.

"I want you to come here to the closet. Do you see all these nylon shirts, these suits of clothes? A single spark could have started a fire which could have been completely out of control before anything could have been done. You might even have burned your little sister to death. All of our films and slides of our stay in Japan are in this closet. They could never be replaced.

"Now, since you are so anxious to play with matches, I'm going to give you an opportunity to indulge in this pastime."

With that I produced a sheaf of safety matches from my pocket and handed them to him.

He took them from me with the same enthusiasm he would have used had they been a hand grenade with the pin already drawn.

"Come on in to the fireplace," I commanded, and led the way.

"Take off your shirt!" [A favorite shirt -- DVM] This he did with alacrity and laid it tenderly on the lounge.

"No, hang it on the andirons."

Incredulity and terror were now mingled on his face as he began to suspect the punishment I had conceived. After a moment of hesitation he tremblingly and lovingly hung those bright tassels over the andiron.

"Now, take these matches and set fire to it!"

With this came his first agonized outcry, "Oh, no, Daddy!"

"Yes, you nearly burned up all my clothing today; now you can see what it is like to have fire destroy something. When it is burned, it is gone forever and can never be returned."

He was visibly shaking as he took the matches; his face was ashen. His hands trembled so that he could hardly strike the match against the pad. As it flared he held it under ... until the shirt was aflame...

He seated himself on a coffee table in front of the fireplace in numbed absorption and fixed a glazed expression on the conflagration.

I had had all I could take; I headed out for the solitude of my den where I could weep alone -- as befits a man.

All was quiet for several minutes, then I heard the screen being replaced. As he started for the stairs an involuntary wail broke the silence and then sobs -- as he stumbled to the sanctity of his bedroom. In a few minutes he was back, sniffing and wiping unbidden tears on his pajama sleeve. Wordlessly he crawled up on my lap... I kissed him and talked to him gently about the whole affair; and suddenly the ordeal was over. Kimmie has never played with matches again.

In retrospect, successful solution to the problem was found because I was not on the premises when he did the deed. If I had been, I would probably have resorted to the belt or switch again instead of thinking through the problem in a more objective fashion.

Unless you find mature ways of solving your problems and of meeting life situations, conflicts and tensions within yourself will develop. Today this problem is more acute than at any period of man's existence. It is in the exploration of this realm that I wish to spend the remaining chapel periods allotted to me.

Gotthard Booth in *The Church and Mental Health* says: "This harmony between an individual and his environment is a primary issue in modern civilization ... 'In the materialistic era of the sciences [nineteenth century] the fostering of health was conceived to be simply a problem of engineering. Health required that the body be provided with the proper physical conditions and chemical materials and that all harmful conditions and agents be kept away from it.' . . . The scientists of that era thought that 'if [it was] properly serviced, [just like any automobile] the human machine was expected to develop spontaneously into a creature physically and psychologically adjusted to the tasks of living. This type of thinking expressed life in quantitative terms, ordered it

in cause-effect sequences, and assumed that ideally all human beings should display the same "normal behaviour" in an environment engineered to fit the requirements of [what has been called a] "basic human nature." ' ' [7]

This theory has illustrative support in the labors of those heroes of science who have won the conquest over dread diseases such as typhoid, diphtheria, smallpox, pneumonia, typhus, and a host of others. It is they who have given us vitamins, sanitation, vaccines, antibiotics, proper diets, and housing; and have thus increased the average life span of an American from forty to sixty-seven years in a single generation.

The entire nineteenth century and the first quarter of the twentieth century were devoted solely to the problem of curing our physical ills and vanquishing the dread scourges which killed their millions annually. Theirs was a magnificent achievement. But theirs was a completely mechanistic philosophy -- a cause-and-effect theory of health in which all problems could be solved in the test tube or beneath the microscope.

Unfortunately, however, added life span, better physical health, and more comfortable surroundings have not solved all of the problems of mankind.

Illustrative of this fallacy of reasoning is the problem which was given to a famous French mechanical engineer. He had been asked to design a roller coaster for a popular Paris amusement park. The owner had said, "I want you to design the fastest, most thrilling roller coaster in the world. Don't spare the expense; but make it safe and fast."

So the old man began the project. He plotted the curves, the grades, the counterbalances, and the weight of the cars. Finally it was built -- a perfectly engineered creation. Then came the time for the first trial run. The engineer loaded the cars with sandbags that weighed the same as his passengers would. It was off with a flash, up and down, around the curves, hugging the rails until finally it stopped again at the starting place, a tremendous triumph of engineering skill. The opening day came with all of its attendant excitement. Celebrities clambered for the first ride. In the rush, the engineer was pushed aside and the train was off on its maiden run without him. Stifling his disappointment, he watched with rapt attention as his coaster flashed with dizzy speed around the trestle. At last it was back. The crowd cheered; but the passengers just sat in unresponsive silence.

"How did you like it? Was it thrilling?" But not a passenger spoke.

"Well, get out, so we can have our turn!" But no one moved.

The starter unbuckled the strap from the nearest man in the first car and tried to help him out; but the passenger sagged to the floor, obviously dead. Then came the awful realization that every individual in the roller coaster was dead. Their necks had been broken by the impact of the curves and the terrific speeds. The coaster had manipulated the track according to engineering laws. It had returned to its base with its load -- dead!

What had happened? The engineer had tried to fit human beings into the same law of deterministic engineering as sandbags. Human beings do not follow and respond to the same laws of cause and effect that a sandbag or other inanimate object does.

In the same manner the medical men and scientists of the nineteenth century tried to apply their deterministic philosophy to usher in a physical millennium on earth. They argued that men like laboratory animals would respond in a predetermined way to any given stimulus. But just as the sandbag data are not valid for human beings, neither can a mechanistic philosophy with its gadgets and potions answer the problem of the sum total ills of man.

In increasing numbers in the last thirty years medical men are beginning to realize that all phases of health cannot be encompassed by deterministic laws. The development of physics in the twentieth century destroyed the flattering fiction of a purposeless mechanical world waiting to be mastered more and more by the intelligent planning of man. There is a philosophy which states that man molds his environment; that we have a tremendously wonderful world inanimately waiting for us to mold it to our own good and thus achieve physical immortality. This philosophy fails to state, however, that at the same time man is molded by his environment.

These unhuman forces had no transcendent meaning in the nineteenth century science.

But since that time they have found cognizance and recognition in the cultures, religion, and philosophy of mankind. Mechanistic medicine cannot explain:

1. Why our mental institutions are overflowing today and the rate of mental aberration is increasing at such a pace that we cannot build institutions rapidly enough to care for those individuals who have become bad risks for society if left to mingle unhampered in that society.

2. It cannot explain, for instance, why some women have a gall bladder attack every time they quarrel with their husbands. Now don't go out and quote me as saying that all gall bladder disease is precipitated by a quarrelsome disposition. I did not say that. However, some acute attacks are precipitated by mental stress.

3. Why unbending attitudes and stubbornness are associated with certain types of arthritis.

4. Why mother dependency among younger people is one of the basic, fundamental causes for alcoholism.

5. Why stomach ulcers flare during fits of anger, or times of extreme stress.

6. Why 70 per cent of the patients that come to Mr. Macrory's, Dr. Gilbert's, and Dr. Hamlin's offices have no demonstrable organic disease, and yet they are ill.

7. Why the use of narcotics has become a national scandal and our collective existence a drunken brawl.

The old song that we used to sing, "Who Put the Overalls in Mrs. Murphy's Chowder?" has been changed to "Who Put the Benzedrine in Mrs. Murphy's Ovaltine?"

The gentlemen of the Hippocratic oath who are in the audience today will admit to you that they as well as I are constantly bombarded with this: "Doctor, I can't sleep. What is wrong with me? Give me something!"

So we wend our weary way from Nembutal in the evening to put us to sleep, to Benzedrine in the morning to wake us up. What has happened to us?

I have a poem I found by Margaret Widdemer, entitled "Hymn for Grief." [8] May I quote it to you?

Luminol is what you take
For heartbreak.
That is all,
Except sometimes allonal
Or veronal.

Prayer was used, so we hear say,
In a sentimental day;
You arose from kneeling, sure
God and you'd somehow endure.

But such gestures are for us,
One would say, ridiculous;
Out of date
For the young sophisticate.

(If we were Victorians
We could weep into a pillow,
And Elizabeth's or Anne's
Maids might wail, "Oh willow, willow!"
Shrieks and prayers to God and crying
Kept such costumed girls from dying.)

Ladies were allowed their faints
Far back as the early saints,
And might pine for grief a little,
But we can't --
It would not be nonchalant,
Arrogant,
Cool or brittle.

Psychoanalysts are out,
But of coal-tar there's no doubt.

It can dull your pain and pride
To a far-off prick inside . .
"Take it with a little water,"
Says the specialist, "my daughter,
One at night and three a day;
They will wash your griefs away."

Where ancestresses could pray,
Slipping down a rosary,
"Pity, Jesu! Help, Marie!
Saints who suffered long, help me!
Soon is Heaven shining bright,
Worth my agony tonight .

Now we have a drugstore god
With glass tubelets for his rod

Three along your business day,
One the hour girls used to pray,
Count them for a rosary,
Three and one: one and three:
Luminol. Allonal. Veronal.
That is all.

What is the reason for these psychosomatic difficulties? Perhaps I would do well to define the term psychosomatic for you. Psychosomatic medicine is that medical science which attempts to correlate the problems of organic disease with psychological and spiritual reactions. For example, psychosomatic medicine tries to answer why it is that stomach ulcers flare when a patient becomes angry.

What are the causes of psychosomatic difficulties? I have time to cover only one of these today. It is this: Tensions exist as a basic cause of human ills today because of "nervous exhaustion." I use the term loosely today in deference to a lay audience. The speed with which we live, the failure to relax, all are basic causes for tension.

The Russian regime has been using this physiological fact to "break" their prisoners. They have shifted more and more from the use of old, outmoded methods depending upon physical pain for torture. They are now depending upon a psychological type of "brain washing." To achieve this, they reduce their victims to a state of complete nervous exhaustion. Incarceration in tiny cubicles, bright lights shining upon them unceasingly for days upon end, relay teams of interrogators hammering ceaselessly at them with repetitory questions are a few of the refinements of torture used on the poor wretches.

To a lesser degree insatiable, relentless pressures on each of us day after day reduce us to the state of exhaustion which is similar in kind but different in degree only from that used on the poor wretch who falls victim to the Cominform.

There was a time when people had opportunity to catch up with their souls, to sit and think, sit and whittle, or just sit. Not any more! But since there is little possibility of a return to the quieter bliss of a previous era, perhaps we would do well to think of methods for survival in this age of speed.

I would like to suggest to you four or five simple rules which may help you to live more serenely in the midst of tension. Ours is a constant battle against time. I told the biology class last night that it doesn't take a superman to graduate from medical school (I am living proof of that statement). It does, however, necessitate adherence to certain rules of behavior in the fight against time.

For example: Anyone can graduate from a medical school if he or she is given enough time. The problem resides in the necessity of assimilation of prodigious quantities of material in a given period of time.

These are the five simple rules which have helped me weather the storm:

1. Reduce to habit everything that you possibly can. Budget and schedule your time.

Habit, of course, as you realize, is the great saving factor for all of us. Did you ever stop to think how long you took to dress yourself the first time you tried it? You don't remember, but your mother does. It probably took hours of practicing to learn to tie your shoes. What if you took as much time each morning to tie your shoes as you did the first time you tried it? You wouldn't get anything else done, would you? Do you consciously think about each step involved when you tie your shoes? No! You can do it half asleep and in the dark. It makes no difference. Which shoe do you put on first? I guarantee that it is the same one every morning. I always put the left shoe on first -- there is no reason for it except that it is habitual. I doubt if I could get my shoes on if I had to put the right one on first.

Any minister here this morning will remember the first Sabbath he had to make the announcements. He probably had all the poise of a bag of wet cement by the time he was through. It had not become a habitual thing.

I remember the first stitch job I ever did. At that time I was a junior medical student at the University of Colorado. Part of our first clinical training was on the emergency service at the Denver General Hospital. The patients were, in the main, people with minor cuts, bruises, and lacerations. One night a tough waitress came in from a lower Denver cafe. She was a hard-boiled "biddy" who had cut her finger on a water glass while at work.

The intern on duty glanced at it and said, "Hamlin, sew that up!"

Naturally, I was very anxious to keep her from knowing that I was just a junior medical student, and that this was my first assignment; so I walked in with all of the dignity that I could muster and sat down on a stool beside the table on which she was lying. She gave me a baleful glare and then turned her head the other direction. I injected a little novocaine and began to stitch.

The first stitch I tried to tie by throwing a loop over the needle holder (in the prescribed fashion); but for some reason it wouldn't tie. Perspiration began to bead my brow and trickle down over my cheeks as I tried over and over to complete this simple maneuver. I breathed a prayer of thanksgiving that she was looking the other direction. Finally after an eternity of this bumbling she turned her head to look; then with a grimace she sneered out of the corner of her mouth, "Well, how're you getting along, amateur?"

That finished me! I hurriedly left her for the intern to complete. Now, after a period of years it doesn't bother me nearly so much when someone calls me "amateur"! But if it took the same amount of nervous energy each time I do a simple little medical task as it took that first night, I should be forced to quit the practice of medicine; however, I have through years of doing reduced these maneuvers to habit. The unusual has become the commonplace.

2. Make use of even your small fragments of time. Don't wait for a long period of time to accomplish something.

Our tendency is to wait and say, "I have only a half hour before dinner; I'll just listen to the radio or kill the time."

Again I learned in medical school that small fragments of time are very important. Commuting across Denver by streetcar meant a potential loss of one and one-half hours per day. How could I utilize the time?

The streetcar swayed and swung so much that reading was impossible. To solve this problem, I began to carry a piece of string in my pocket (such as I have here today). I would slip it through a buttonhole on my coat and practice tying my surgical knots. It was excellent gymnastics to keep my fingers agile and increase my technical skill. Sometimes, I am sure, the people in my end of the car as well as the driver thought I should be locked up; but no one filed charges against me. I dared not waste the time that I used to go across town.

Closely allied to this phase of discipline is the proper budgeting of our entire twenty-four-hour period, day by day, week by week. Our own household is a fair example of organized confusion. The only consistent thing about our schedule is its inconsistency. I suppose a doctor must expect that. Betty Harding, who lived with us for a few months, characterized our existence fairly accurately when she said, "One doesn't need to be crazy to live with the Hamlins-but it helps."

Long and uncertain hours have made normal living impossible. I believe, though, we are making some progress.

While I was finishing my surgical residency at Presbyterian Hospital I had the privilege of getting my shirts done at the hospital laundry, with the stipulation that I bring them in by eight o'clock each Tuesday morning. But, come Tuesday, we could never remember until the last minute. I would rush like Dagwood to dress, gulp down a little coffee, and dash to the front door. Then I would bend over to kiss Maxine good-by. At that moment she would clutch my arm and cry, "O Honey, I forgot your laundry!"

Back through the house she would go, grab the shirts out of the corners, from under the beds, and other places where I might have dropped them and stuff them frantically into the laundry bag. All this time I was standing frantically at the door chewing my fingernails and talking under my breath. I was five minutes late, so I tore down through traffic, dodging buses, streetcars, and trucks, and arrived tired and nervous.

Maxine dropped in a chair exhausted as soon as I was gone and needed an hour to recuperate.

Finally in desperation I said, "Honey, there must be a saner way to get the laundry done than this!"

She assented, but suggested I devise a better plan. Her expression of smug skepticism galvanized me into corrective action. I secured a "daily log" book and proudly presented it to her with the suggestion: "Sweetheart, I want you to go through this book and write two words on the 'Monday' pages. Those words are, 'Howard's laundry.' Then I want you on Monday evening to pick up the laundry in a leisurely fashion and set it by the door. Just think of how rewarding it will be to enjoy a wonderful old age together alive instead of side by side in a cemetery prematurely killed by 'laundritis'!"

Again may I repeat for emphasis: Learn to make use of your small fragments of time. While in medical school if I had thirty minutes before dinner in the evening I didn't submerge myself in some deep philosophical theory. Instead, I used that interval to type my notes or retouch my drawings.

3. Get regular periods of recreation. Two weeks of vacation in the summer will not suffice to keep you psychologically or physically fit. The human machine needs regular weekly periods of re-creation.

Many times youngsters come into my office with the request, "Doctor, I have sinus trouble. Would you please write my teacher a note saying that I can't go to gym or I can't swim at school?"

My answer is usually: "Now, listen, Jimmie, that is not the reason you wish to be excused from swimming. Actually you just don't want the inconvenience of undressing and the shock of jumping into a cold pool. I'm sorry, Jim, but that swim is valuable to you and I shall not write that note."

Mix some recreational reading with your serious literary pursuits. I am a devotee of James Thurber. In fact, there was a time when my wife threatened to throw me out of the house if I didn't quit reading James Thurber after I went to bed. She complained that I shook the bed so much when I laughed that it kept her awake.

4. Learn to co-operate with the inevitable.

I suppose most of you have ridden in an airplane. I well remember the first ride I ever had in one. That plane was helped off the ground and kept flying by my sheer will power. I held onto the arms of my seat until my knuckles were white. I "sat light" until we were safely on the ground again. But the second ride was different. I began to realize that there was really nothing I could do to help that plane fly or keep it from falling. Why should I sit there tense and apprehensive? Why not relax? I was in a situation that I could not alter.

Recently I missed, by three or four minutes, a plane to Minneapolis; and consequently had a two-hour wait. My first inclination was to pace up and down the air terminal lobby and bite my nails. I would be late to a board meeting and something might transpire which I didn't like. Then, I said, "Now, that is silly! I can't recall that plane. I'm here for two hours whether I like it or not. I might as well co-operate with the inevitable."

I pulled a book out of my brief case, effectively salvaged the period of waiting, slept all the way to Minneapolis, and arrived refreshed. Flying down here last Sunday evening, I said to the stewardess, "I shall keep my safety belt fastened; I have no trouble with my ears; so I should like to sleep until I get to Oklahoma City!"

I have learned to co-operate with the inevitable.

5. Maintain your sense of humor.

Life becomes rather grim at times. A laugh may save your sanity. Abraham Lincoln learned this secret early in life. Even during the darkest days of the War between the States when even his cabinet had forsaken him, he could still crack a joke.

One day he was asked how it feels to be President. Abe's answer was: "Well, I'm like the man they rode out of town on a rail. He said, 'If it wasn't for the honor of the thing I'd just as soon walk.'"

* * * * *

Lecture 4

After hearing Dean Ripper's introduction I have decided upon a title for the lecture course I am offering. We shall call it "Psycho-ceramics." It is primarily for crackpots. You may obtain credit simply by leaving your name on our special roster. Your strait jacket will be presented upon graduation. All notes will be taken in crayon, since sharp objects are not allowed.

I have tried to develop a little Southern drawl, so that my clipped Yankee will not be so noticeable down here in the Southland -- which reminds me of one of the boys from Arkansas who said to his brother,

"Zeke, how do you spell rat?"

Zeke drawled, "R-A-T!"

To which his brother rejoined in a disgusted voice, "Naw, I don't mean the mousy kind, I mean 'rat now'!"

Incidentally, two cats were watching a tennis match. One of them seemed so intent that the other one volunteered,

"Say, you seem really interested in this match."

"Yeah," rejoined the other, "my old man is in that racket."

* * *

Yesterday we were discussing tensions. No one can completely escape from them. I remember vividly the five months I spent as admitting surgeon in the accident room at the great Baltimore City Hospital. There the "unusual" really became "the commonplace" as the drama of crime, pain, and want filed in an endless cyclorama. Occasionally the switchboard operator would page me with the news that a "DOA" (dead on arrival) was there. Someone had died on the way to the hospital. However, I always rushed down to the accident room in hope that he might have a breath or two of life left in him and resuscitation would be possible.

One day the operator frantically paged me with the grim announcement of a DOA in the accident room. I was in another part of the hospital; but with the aid of gum rubber soles I covered the space in record time. As I rushed into the accident room, one glance imprinted on my memory the sheeted form lying on the table, the telltale splotches of red on the floor and seeping through the sheet. I called for the nurse, but she had disappeared out another door just as I entered. There was no time to retrieve her. Instead, I grabbed my stethoscope out of my hip pocket as I darted toward the examining table and the wretch it held. The thoughts I had about nurses and their capricious performances during those seconds are best kept locked within my memory. With a single motion I swept the sheet from the face and chest of the patient and reached to put my stethoscope on the heart.

But in the same instant the "corpse" came off the table with both arms flailing and a scream like the voice of doom. My next recollection is that of hitting the radiator on the other side of the room. When I could gain a semblance of composure, my eyes came to focus upon this grinning "corpus delicti" sitting on the edge of the table. Then I saw that he was one of the other interns who had been bloodied with generous amounts of catsup for my benefit. The nurse had left, for she wasn't sure just what might happen.

* * *

Now for a little more serious consideration, not of psycho-ceramics, but of psychosomatics. Yesterday we suggested five simple rules of conduct which might help us to live in a world that is moving much too fast to accomplish in a twenty-four-hour day all the things that seem necessary.

Health is a relative quality. We are only relatively hale and hearty. We are only ill to a degree. No one is completely ill or completely whole. May we reiterate again that this problem of healthfulness embodies spiritual, psychic, and physical adjustment to our environment. The young lady who swoons when she is jilted is ill just as truly as if she were stricken with pneumonia.

Peter Marshall, the great Senate chaplain who died an untimely death at forty-three years, was reported to have once prayed before the Senate, "Lord, forgive us the sin of worrying, lest stomach ulcers become the badge of our guilty consciences."

And in answer Senator Vandenburg was supposed to have quipped, "I never was quite sure whether Peter Marshall was praying for me or at me."

Peter Marshall was voicing a little understood truth in this prayer; but it does not give the entire causative answer for stomach ulcers, for Christians also have ulcers which can be the badge of inner tensions, conflicts, and inward disharmony.

Even the above statement is a dangerous oversimplification. Please don't leave today with the idea that all illness is due to maladjustment.

Yesterday we noted that:

(1) Man molds his environment.

(2) Man is molded by his environment.

(3) Deterministic, mechanistic philosophy of the nineteenth century cannot answer the problem of human illness; nor could it usher in a utopia or millennium by the conquest of a few diseases.

Ernest Renan, who wrote about eighty years ago, made a very picturesque prophecy when he said, "I predict that the twentieth century will spend a great deal of time picking out of the wastebasket things which the nineteenth century threw into it." [9]

Halford Luccock in writing of this prediction says: "This prediction has been fulfilled in many ways. In one particular way it is being abundantly fulfilled in these present years. One thing which a part, at least, of the nineteenth century, and a very articulate part at that, threw into the wastebasket was faith in God, and the spiritual world, as being of little use for a confident and expanding industrial civilization. But there has been much rummaging in the wastebasket for spiritual values disregarded. There have been many noises in our turbulent world since the first guns of World War II boomed out. But even above the guns of the war, and the turmoil of the postwar world, there can be heard the noise of hands, groping in the wastebasket for faith." [10]

"I see on every hand," wrote Van Ed Brooks in 1941, "a hunger for affirmations, for a world without confusion, waste or groping." [11]

Then Herbert Agar was equally emphatic when he said, "We have learned in brief what happens to a world that strays too far from its moral purpose." [12]

May Thorton in her poem "Santos" says, "Return to the deep sources, nothing else will nourish the torn spirit, the bewildered heart, the angry mind and from the ultimate duress pierced with the breath of anguish seek for love." [13]

T. S. Eliot, (and I hope some of you have read his works) in his poem "Wasteland," protests against the loss of spiritual values caused by the invasion of a machine age into man's world. Man is crushed by the machine, the dreariness of life from which human dignity and worth have been exhausted. His cry is summated in his one line where he says, "Voices singing out of empty cisterns and exhausted wells." [14]

One positive accomplishment which World War I made was to clear forever from the world the sad illusion of automatic and inevitable progress, a view which would slowly undermine Christianity. Herbert Spencer, the Priest of Progress (so called), was the great proponent of godless, mechanistic philosophy. I think that someone has said, "But yesteryear the word of Herbert Spencer might have stood against the world; now lies he so low and few so poor to do him reverence."

If man could have been saved by diagnosis of disease he should have been saved by 1940, for during the last twenty years an attempt for realistic appraisal of the plight man finds himself in today has been made. Really the first adequate attempt to look at man's basic place in society is to take a good look at what we can call "evil." If we read any contemporary literature we will realize that this has been a double exploration. It has not been an exploration only by religious thinkers, philosophers, and medical scientists; but it has also been an exploration by men like O'Neil, Faulkner, Don Hessop, and Hemingway. The last group, exposing the evils of our world in a nearly pornographic type of prose, have seen men from both sides of the fence (if we want to call it that). These are they who deal in the gutter in their attempt to be realistic about life.

On the other side are the deep philosophical thinkers of our age. They are individuals who realize that man is a spiritual being. Among them are psychiatrists and medical specialists in other fields. Not all of them subscribe to the same religious dogma which characterizes our own Zion. But they are men who with one accord are cognizant of the need for a faith in God and are militant in their support of such a thesis.

George Bernard Shaw's play "Too Good to Be True" [15] was written before the outbreak of World War II. In one scene his character, a clergyman burglar, cries: "I stand mid-way between youth and age like a man who has missed his train, too late for the last and too early for the next. I have no Bible, no creed; the war has shot both out of my hands. I am ignorant. I have lost my nerve and am intimidated. All I know is that I must find the way of life for myself or for all of us or we shall surely perish."

With this analysis and diagnosis we come to the second reason for the psychosomatic state of disease which has infected nearly all of our lives in some degree. Yesterday we examined the first and found it to be due to tensions which are the result of nervous exhaustion caused by our

frenzied pace of living. Today we dissect this second reason for the tragedy. Tensions thrive in an environment of insecurity; and woefully insecure is the person who has experienced the disillusion of his basic spiritual foundations. In other words, completely without psychic support is the man who has lost God.

This is not the idle phrasing of the mystic. This is a pronouncement echoed in some form by a large majority of medical men dealing with psychosomatic ills. Psychiatrist Frankel writing of his experiences in the concentration camps (when he himself was a prisoner) found that even physical health of the prisoners was supported unmistakably by a religious faith. The material deprivations in the camp affected most particularly the health of those whose lives had been devoted to a pursuit of material satisfaction. If you want something really contemporary, read in this month's copy of the Reader's Digest the book supplement which is entitled "The Man Who Wouldn't Talk." [16] It is the fictional story of an ordinary Canadian citizen who was one of a group of counterintelligence men working for the British Army in the very important "French Underground." Their task was to man the "Rat-Run" by which downed British airmen were spirited back to friendly territory. After his indoctrination course he asked the colonel: "Why have you chosen men like me for this task? We are all just ordinary citizens; all of us have lived very quiet, unassuming lives. We have never killed anyone; we have never fought before."

The colonel's answer was this: "We don't want professional killers. They don't have any guts. They kill out of cowardice. We want God-fearing men; for you can't have much guts without God." Only a story, classed as fiction; but a basic truth! We can't have real courage without God!

Norman Corwin, in his poem "On a Note of Triumph," [17] says:

Lord God of trajectory and blast,
Whose terrible sword has laid open the serpent
So it withers in the sun for the just to see,
Sheathe now the swift avenging blade
with the names of nations writ on it,
And assist in the preparation of the ploughshare.

Lord God of fresh bread and tranquil mornings,
Who walks in the circuit of heaven among the worthy,
Deliver notice to the fallen young men
That tokens of orange juice and a whole egg appear now
before the hungry children;
That night again falls cooling on the earth as quietly as
when it leaves your hand;
That freedom has withstood the tyrant like a Malta in a
hostile sea,
And that the soul of man is surely a Sevastopol that goes
down hard and leaps from ruin quickly.

Lord God of the topcoat and the living wage,
Who has furred the fox against the time of winter

And stored provender of bees in summer's brightest
places,
Do bring sweet influences to bear upon the assembly line.
Accept the smoke of the milltown among the accredited
clouds of the sky.
Fend from the wind with a house and a hedge, him whom
you made in your image.
And permit him to pick of the tree and the flock
That he may eat today without fear of tomorrow
And clothe himself with dignity in December.

Lord God of test-tube and blueprint,
Who jointed molecules of dust and shook them till their
name was Adam,
Who taught worms and stars how they could live together,
Appear now among the parliaments of conquerors and
give instruction to their schemes.
Measure out new liberties so none shall suffer for his
father's color or the credo of his choice.
Post proofs that brotherhood is not so wild a dream as
those who profit by postponing it pretend.
Sit at the treaty table and convoy the hopes of little
peoples through expected straits,
And press into the final seal a sign that peace will come
for longer than posterities can see ahead,
That man unto his fellow man shall be a friend forever.

* * *

Here we find the outcry of a man who in the twentieth century addresses his supplication to God and not to human agencies.

What should be our personal attitude toward the insecurity of our environment? First, we must face it objectively! For to hide our head in the sand like the proverbial ostrich and ignore it would be ridiculous. Such an attitude is unrealistic. Secondly, after having looked the monster squarely in the face, we must not allow the frightening visage to overwhelm us. It isn't pleasant for me to realize today that communism has spread like a poison gas throughout the world, that it has seeped into every nook and cranny of our globe and threatens our very existence. It is sobering to realize that the man sitting next to me on the train may be an avowed Communist who is just waiting his opportunity to liquidate those who block his path to world conquest. This was first crystallized in my thinking when I was in Tokyo in General Headquarters. Several of us who were consultants in various fields of medicine had our desks in one large office. One of these men sat adjacent to me, his desk so close to mine that I could stand between them and touch them both. We worked together side by side for months. An official inspection trip took both of us into the northern part of Japan for a few days. We were sitting together one evening with a group of officers in the officers' club eating a sandwich and chatting. My friend had had a little too much

"premedication" earlier in the evening and the liquor had made him garrulous. In fact, he was feeling no pain! As he talked I became horrified to realize that this man was saying things that no honest, upright, loyal American should say. Here was a man who sat next to me in an office, a field grade officer in General Headquarters, a man who was writing reports for the top brass, whose orders, like my own, were signed by General MacArthur. I kept telling myself, "This can't be true; this is only a bad dream!" Yet I knew that it was true. I made a verbal report to the Intelligence Department when I returned. Within two or three weeks he was removed from the Army of Occupation, because of proven relationship to the Communist Party. I often thanked God for a forthright, honest, God-fearing commanding general who ferreted out of his ranks any subversives which he could find. Political pressure did not deter him.

Several groups of medical doctors came over from universities for special research projects. They were all top-ranking professors in big medical schools. For some of these I was the SCAP co-ordinating officer. It was my task to facilitate the establishment of their laboratories, to arrange necessary conferences with Japanese officials, and to expedite their work wherever possible. We lived in the same hotel, swam, ate, traveled, and played tennis together. I managed to obtain tickets for them to various events of interest, such as the war crime trials, etc.

Toward the end of the summer one of the men sought me out on Sunday evening with the shocking news: "Howard, I thought that I should tell you before we get to the office tomorrow morning. The FBI closed in on Frank today and sent him back to the States. They didn't even give him a chance to pack his bags. They found that he is an active member of the Communist Party."

Relatively recently a woman walked into my office weeping, and handed me a letter to read. The letter was from her eighteen-year-old son who had left home to try his fortunes in Philadelphia. It was the most vitriolic, diabolical two pages of written material I have even seen in my life. He cursed his mother, his father, their way of life, and their country. He told her that he had joined the Communist Party and was a leader in one of the cells. "I shall be a leader in the Communist Youth Organization, and in a position of trust when we take over the United States. Then we'll show the world how to treat capitalists who are stupid enough to believe the things that you and Father preach." Such was the gist of his drivel.

These things are not reassuring to know! It is not pleasant to have reports filter back to us that three of our Nazarene local pastors were murdered in China a short while ago. They were made prisoners when Communists swept over our field in China. They were called from their stinking prison hole to stand trial before a military tribunal. The officer in charge snarled, "What is the crime with which these men are charged?"

"They are Christian preachers," answered the other.

"How should they be killed?" again snarled the beast who sat "in judgment"! No attempt to prove guilt or innocence; their task was simply to decide the type of torture most fitted to their sadism. He pondered a moment, then his countenance lighted with a sardonic leer. "Seems that somewhere I have heard that the Founder of their religion was nailed to a cross. Let's nail these fellows to crosses."

He dispatched some of his enlisted men to find planks and spikes. These they nailed together to form crosses, then flung these three Chinese pastors on crude roods and spiked them there. The barbarians didn't know enough about the story of the cross of Christ to realize that they should raise the crosses upright. Instead they dragged them into the main thoroughfare of the town and left them there. There they lay, with the multitudes passing by, and the dust and the vermin and the flies and the ants tortured them. Yet in their horrible agony these prostrate boys preached to the throngs who passed by, impotent to help. Though their tongues were swollen out of their mouths, they urged the people to accept the Christ for whom they were gladly dying. On the third day of this horrible debacle they went home to meet the Christ whom they had served even unto death.

May I repeat, these are not pleasant facts to face; but face them we must. We can take one of two attitudes toward them. We can allow them to overwhelm us, until we become panicky. We can brood over them until we are depressed and discouraged. We say, "There is no use trying. Better we bring all our missionaries home than to subject them or their converts to such beastiality." No, this is not the answer, for the seed of the Church has always been in the blood of the martyrs. T. S. Eliot has said, "If we are going to have the blood of martyrs running down temple steps again, we first must build the temples." [18] No, such an answer can only lead to a state of mental, spiritual, and physical unhealthiness. Instead, we must grasp our second alternative. We must achieve the same perspective which Isaiah demonstrated in a similar situation.

Isaiah lived in a period of international unrest which was very much akin to our own era. Geographically, Israel actually lay as sort of a no man's land between two powerful kingdoms which were perpetual enemies. The conquering armies of Egypt and Assyria periodically swept in bloody destruction across Israel just as the modern armies have swept across the Balkans. When Israel was not involved in internal strife, it was repeatedly wasted from without. But in the interim between those periods of carnage there were interludes of peace, both internal and external. At those times Israel was in a very strategic spot, for the caravans from the East and West prodded their complaining camels laden with riches across the highways of Canaan. Then the revenue collected filled the Israelitish coffers and the sons of Jacob became a very wealthy nation. It was thus in the days of Solomon, when his wealth exceeded that of anyone in the known world. It was also true of the time in which Isaiah lived.

Then was there an era of comparative peace and prosperity. In this tranquillity Isaiah preached. But it was a fragile peace which could be broken without warning. In addition, Isaiah had something else in his favor; he was a royal prophet, the nephew of the king, Uzziah. What more could a prophet of God desire than the privilege of proclaiming God's message in a prosperous, peaceful land under the protection of his kinsman, the king?

Suddenly in the midst of this scene of spiritual tranquillity, Uzziah died! Then, what happened to Isaiah? He was shocked, bewildered, distraught, discouraged. In this state of grief and despair he staggered to the Temple to prostrate himself and cry out to Jehovah. Uzziah was dead, the king was dead. Everything was ended. In fact, later when he described the epoch, his description pinpointed the importance of the event, for he began with the telling phrase, "In the year that king Uzziah died." The importance to him of this event is forever recorded in this masterful documentary.

I think God must have felt that Isaiah's spirit had plummeted to an unexplored pit of discouragement. He must have said, "I shall pull the curtain just a little and give Isaiah a glimpse of Divinity."

Then to Isaiah's spirit He must have said: "Your earthly king may be dead, Isaiah; but I want you to know that the King of Kings is still on the throne. I am still calling the signals. If I am still ruling, don't be discouraged, don't feel that all is lost because your earthly king lies there in a coffin! Actually, he was only one of many subjects. Things haven't changed much; I am still here."

You may ask where I found such a scene in Holy Writ. Isaiah starts that magnificent scene recorded in the sixth chapter of his book with the words, "In the year that king Uzziah died" . . . he even dated the year by this momentous event. But his glimpse of Divinity allowed him to finish this funeral epitaph with a glorious ending, a triumphant contrast.

"I saw also the Lord . . . high and lifted up." From the sepulchral abyss of despair he was rocketed to the constellations of ecstasy in that moment of discernment. His perspective was now proper, his spiritual sight focused clearly, and his integration again complete. Gone was the feeling of futility and insecurity. Uzziah was still lying cold and lifeless. Isaiah's hurt and sorrow over the loss of his kinsman was still sharp; but he was not defeated; his soul was not overwhelmed. In fact, his answer to the questing tone of Divinity was, without hesitation, "Here am I, Lord; send me."

In a very real sense our perspective must be the same today. I stand here today as a medical doctor, not as a minister; and as such may I cry out again to emphasize the need for proper perspective if we expect to achieve integration of personality. We must paraphrase Isaiah's inspired passage with the twentieth century application. We must say, "In the year that the Kremlin stooges overran Korea, I saw also the Lord!" "In the year when crime and wantonness spread a stench over the earth, I saw also the Lord!" "In the year of terrible insecurity when communism seeped like a poisonous gas into every nook and cranny of our existence, I still saw the Lord!"

Yes, Isaiah, the king is dead; but -- long live the King of Kings! Hallelujah! Blessed be God, whose reign is forever and forever, and His power omnipotent!

* * *

In retrospect we have seen that tensions develop:

First, because of nervous exhaustion;

Second, because of an improper perspective.

In addition, a state of unhealthiness may actually exist as a result of an improper relationship to God and spiritual values. May I illustrate with a recent incident from my medical practice.

I have a very close friend in Chicago who is a member of another denomination, but one of the finest Christian gentlemen I have ever met. Frank has had difficulty for years with his physical health and has sought help from many physicians, including myself, with uniformly poor results. He is susceptible to severe asthmatic attacks which come with vicious regularity and severity. All nostrums and miracle drugs have failed. Three months in Arizona gave a little relief temporarily. I sent him to an otolaryngologist to have the polyps removed from his nose. I had him to top-flight allergists, who scratched him and "stuck" him; but his problem continued. A few weeks ago, the telephone bell shattered my sleep. On the other end was Frank's wife. With attempted calmness she said, "Frank can hardly breathe; I don't know what has happened."

"I'll order an ambulance immediately and we'll admit him to the hospital," I answered.

I then telephoned a friend of mine who is a specialist in internal medicine and a professor at the University of Illinois School of Medicine. He promised to meet me at the hospital immediately. When we entered Frank's room, we could see (even by the dim light) that his face was nearly purple. He was pulling frantically for air. He looked as if he might die. We used all the heroic measures that modern medicine has devised: but it was nearly two hours before we could get him even temporary relief. Finally Frank began to breathe a little easier. When we felt it was safe, Dr. X and I slipped down to the hospital dining room for a cup of coffee. As we sipped, Dr. X began to question me about the patient.

"Howard, what kind of a guy is this fellow?"

"Oh, he is a very stolid, phlegmatic Dutchman, and a wonderful fellow."

"How is his home life?"

"He's well adjusted," I replied. "I don't know of any particular conflict maritaly; he has a wonderful wife and a fine daughter."

"But," persisted my medical friend, "is he under any particular tension?"

"No, I don't think so; Frank's not the kind of a guy to develop tensions; he takes everything with equanimity."

"Well, I'm not so sure about that," X rejoined. "The latest research on many of these allergic conditions shows that there is an amazing correlation between them and mental health, tensions, and nervousness. Of course, all allergies cannot be classified thusly; but even cases of ragweed hay fever can be increased in severity by psychosomatic factors. If you dig, you'll probably find some underlying stress or maladjustment rearing its ugly head."

"I'm afraid you are wrong this time, Doe; for once you're barking up the wrong tree," I answered with conviction.

It was there the conversation stopped; but not the seed which my friend had sown in my mind. It haunted me so much I decided to prove him wrong by doing a little questioning of Frank

myself. By the following day Frank was relatively comfortable. I began the casual questioning with, "Frank, do you have a dog at home?"

"Yeah."

"Have you ever been tested against sensitivity of dog hair?"

"No"

"I wonder if it might be that dog," I mused.

"I doubt it," Frank answered, "I get these attacks even away from home."

It looked as if I was digging in a dry hole and not getting anywhere, so I dropped the dog and changed my approach.

"How have things been going lately, Frank? Any particular troubles?"

"No, I'm having a wonderful time."

"Your boy was married recently, wasn't he?"

"Yes!"

"Did he marry a good girl?"

"Yes, a fine Christian girl."

"Are you worried about him?"

"No! Furthermore, why are you asking me all these things?"

"Well, Dr. X has the idea that asthma is sometimes precipitated by tensions and maladjustment of some sort. I told him that you were the last guy in the world I'd classify as maladjusted. Instead you are one person who takes everything in stride. I told him I thought he was off his base; however, since I'm a surgeon, I probably shouldn't express such an opinion to one who is a specialist in that field."

Frank agreed. "I suppose he's wrong, for I don't know of anything bothering me now!"

Having buried Dr. X and the subject with that, we chatted on more cheerful subjects for a few minutes. Then I left.

The next day was Sunday; I went to church in the morning and made my rounds about noon. When I stopped by to see Frank, his eyes were red-rimmed and his voice trembled a little and he said, "Doc, you got a minute? I'd like to talk with you."

"Frank, the afternoon is yours if you wish it."

His voice began to break a little and come haltingly as he started. "You know, Doc, I haven't been able to dismiss from my mind what you said yesterday about tensions. In fact, I never closed my eyes all night. I talked to the Chief all night last night. Actually it's the first time I have done any serious talking to God for a long time. As I prayed it seemed that letters of fire appeared on the ceiling, 'Seek ye first the kingdom of God.' I shifted my gaze to the darkened walls only to see the same blazoned proclamation, 'Seek ye first the kingdom of God,' 'Seek ye first the kingdom of God!' I turned my face to the floor . . . 'Seek ye first the kingdom of God!' During those midnight hours life began to roll in panorama before me. I began to realize that I had been a selfish, ego-centered individual. I had been fighting my way up in the business world for years to the place where I am now making \$25,000.00 a year; but I have had to fight to keep this place. It caused me trouble with the president of the company. But the struggle has been so all-consuming that I have pushed God's kingdom into a secondary place. My responsibility as a Christian layman has been submerged in a morass of business relationships. My life has been actually selfish. But I promised the Chief this morning in the early hours that from now on Frank Derfer was going to be different. I am going to quit worrying about the kingdom of Frank Derfer and think first about the kingdom of God. Christ shall be first in my life. I shall ask for a position of lesser importance in the company so that I can spend more time working for God. I don't know whether it will cure my asthma or not; I'm not doing it for that reason; but I do know God has had to bring me to a bed of affliction where I nearly died to make me realize that I have been essentially selfish."

I left weeping that day. I prayed, "O God, burn deeply into my spirit the reality that anything but a Christo-centric existence is one of disharmony and defeat." Christ said, "For whosoever will save his life shall lose it; but whosoever shall lose his life for my sake and the gospel's, the same shall save it" (Mark 8:35).

* * * * *

Lecture 5

After Dr. Cantrell's most gracious and flattering introduction, I am reminded that perfume is to be whiffed, not swallowed. In spite of the wonderful, wonderful way which you have received me here, one incident yesterday caused me to suffer a keen disappointment. At the close of my message Dean Ripper said to me, "Howard, I am going to recommend you to the board this year for an honorary degree."

Naturally, I lighted up like a Christmas tree! I tried to visualize the scene.

Then in an instant he blacked out the vision with his next words, "The degree will be D.P.C.-Doctor of Psycho-Ceramics!"

I told you yesterday we would open such a course here if there were any crackpots who would apply. If any do apply, I shall accept the dean's kind offer with alacrity.

Incidentally, it is a pleasure to see Rev. Jonathan Gassett and Rev. Darrel Slack in the audience today. I have had the pleasure of their attendance in my classes back in the mid thirties in Bresee College. I had my first formal introduction to a Nazarene college that year, not as a student, but as a fledgling instructor. I always wince a little as I remember my first class.

It was a hot Kansas afternoon in mid-September. Classroom windows were wide open and the motivation to teach and learn was at a dangerous low. I was just a neophyte fresh out of college, stewing about the possibility of impressing students (near my age) with the dignity of my position. My initial entrance into the room must be impressive, I kept reminding myself. I shall wait for the class to assemble; then I shall walk briskly in, seat myself at the desk with a patronizing smile -- and begin.

With firm resolve I pulled this particular bit of strategy. But the effect was far from that anticipated. As I sat down at the desk I heard a twitter go through the room. Matching the twitter were furtive smiles and sidelong glances. I quickly took inventory of my attire to see if I had forgotten anything vital; but inspection failed to reveal anything too startlingly wrong. In this atmosphere of clandestine mirth, I began my lecture. That was too much; the classroom broke into unrestrained merriment. By that time I was reduced to a bowl of quivering jelly. My dignity was gone, my hope for future greatness blasted. What a revelation! I merely walk into a classroom and the students collapse in hysterics. I finished the class with the enthusiasm of a political prisoner "confessing" to Vishinsky.

The class filed out; but one boy loitered a moment until all were gone, then haltingly said, "Prof, I guess we should apologize to you a little; at least we should tell you why we were laughing today."

"Yeah, it would help a little," I countered in a hurt tone.

"We decided to see when you came to school whether or not you had a sense of humor. So we carefully lined up a whole row of sandburs on your chair today just to see your reactions when you sat on them. But when you came into the room with the flourish you did, the opened door created a draft which swept all of the sandburs off onto the floor; and you sat down unharmed."

Thus I was officially introduced to a Nazarene school. I must say a word of praise for the consistency of the pattern. It wasn't sandburs again, but it was thumbtacks in the seats, cayenne pepper in the chili, wastebaskets over the door to crown me, and garter snakes in my lap.

I just couldn't end these lectures without another story about a psychiatrist. The story is told of the psychiatrist who took a special project for the summer. He was supposed to study the habit patterns of some of the natives down in the hills of Kentucky, around a little town named Dogpatch. One day he wandered up to an old shack on the mountainside. Much to his surprise, one of the old-timers was sitting on the front porch playing checkers with his dog. The psychiatrist watched in amazement as they played. Finally, he could be quiet no longer. He blurted out, "Pap, that's a pretty smart dog you have there."

The old man twitched a little, recrossed his legs, and drawled, "Nope! Not very! I've beat him two games today already."

But animal wisdom is not a subject I want to discuss today, though I am reminded of the baby elephant out in the forest eating with the herd. He stopped all of a sudden, lumbered over to a big redwood tree, put his head against it, stuck one leg straight out behind him, and trumpeted, "Look, Maw, I'm a book end!"

Well, I hope I have at least kept you awake this week. I was speaker at a banquet a while back. The toastmaster, a deacon in one of the Covenant churches, was making a few introductions. In the introduction of his pastor, he quoted a little poem:

I seldom see my preacher's eyes,
Which shine with light sublime;
For when he prays he closes them
And when he preaches, mine.

The recipient pastor arose solemnly and replied, "I don't know whether you people realize that there is a second verse to that poem. It goes as follows:

"Please tell my deacons when I am dead
O'er me to shed no tears;
For when I'm gone I'll be no more dead
Than they have been for years."

He had his revenge!

I want to discuss today a subject which is controversial, but extremely relevant. I shall hide behind the bulwark of laymanship, for laymen are not supposed to know much theology. Rather than to risk the danger of misquotation, I shall read my remarks today from a manuscript.

We are all aware of the reawakening of America to moral and spiritual issues during the last two decades. Evangelical effort has been rescued from the small print on the back page of the newspapers, and is often boldly acclaimed in headlines on the front sheet. This metamorphosis has, for the most part, been healthy. But with the rise to prominence of legitimate, God-fearing evangelists, there has been a corresponding epidemic of religious racketeers who are parading under the guise of Spirit-filled evangelism to prey upon indiscriminating, honest souls with their religious rackets and their camouflaged cults. These are filling their personal coffers with wealth sucked from the life streams of honest, but gullible, Christians.

Today we need to choose carefully the people to whom we listen and the causes we support. The airways are filled with convincing pleas and our auditoriums throughout the nation filled with those who would "deceive the very elect."

At times I nearly weep when I see some of the poor wrecks of humanity that file through my office. They have fallen into the clutches of unscrupulous religious racketeers who have upset them

spiritually and left them in confusion and darkness. Most vicious are the so-called "divine healers" who sweep into town with great noise of advance publicity, empty the purses of God-fearing people, and leave again in a few weeks a trail of heartache, disappointment, and bewilderment. Because of this unsavory situation and because of the pertinence of the entire problem, I would like to devote this final lecture to the subject of "divine healing."

In dealing with this most delicate, but important, subject, may I begin by stating very clearly and unequivocally my own theological and experiential concept of "divine healing." It can be stated very simply I believe that God, who created this body of mine, can heal it. I do not believe His power is limited to psychological suggestion or mesmerism. I believe that He can heal organic disease. Furthermore, I believe that His power works today; and that the same divine touch which made the leper whole can today heal those affected with Hansen's disease (leprosy) or any other disease.

During this week we have talked at some length about mental health and the psychosomatic aspect of medicine. We have seen that tensions, mental attitudes, and pressures of life have much to do with our relative healthiness or unhealthiness. In discussion of the problem of divine healing, I realize that I speak on a subject which is especially controversial. Furthermore, it is a topic which can plunge an honest, believing individual into deep spiritual darkness and mental confusion if not understood properly. Let us approach the problem by use of pertinent example.

Case Number 1. During one of our camp meetings a middle-aged woman was anointed for bodily healing. A week later she testified publicly that God had healed her of diabetes, that she had discarded her insulin, and that for one week she had been eating regular campmeeting fare.. Any of you who have attended camp meetings know that the diet usually consists of a superabundance of macaroni, potatoes, bread, and other starches plus many pastries. My first startled reaction to her testimony was, I sure would like to check her blood sugar. Then my second reaction was, No, that might be proof that I was doubting God's ability to heal.

I voiced my feelings to her pastor. With his urgent reassurance I proceeded with the analysis. Her blood sugar had been 390 milligrams. for 100 cc's of blood. at the last analysis. Such a blood sugar does represent a very serious diabetic. I knew that forty-eight hours away from insulin with a blood sugar of that level would have plunged her into a diabetic coma probably terminating in death within a few days. I checked her blood sugar on the day following her second testimony and was thrilled and awed to find my analysis showed a low normal of 90. I had to realize that here before me was a genuine case of God's ability to heal the human body.

Case Number 2. About eighteen months ago a young woman consulted me about a lump in her breast. A cursory examination was sufficient to convince me of its cancerous nature. I suggested hospitalization with a biopsy (that is, taking a small piece of it) for confirmation in the laboratory, and then subsequent appropriate therapy.

As she listened to me outline the diagnostic and therapeutic steps, her eyes belied her terror. But she told me she had been reading A. B. Simpson's book on divine healing and she would rather trust God to heal her than to have surgical treatment. I spent nearly two futile hours in an attempt to give her what I considered a rational approach to her problem. Her ensuing months

were spent in frenzied calling upon God and attendance at numerous, so called, "healing" meetings. These months were filled with terror as she saw the malignancy advance. Finally in desperation after a year she went to the Mayo Clinic in hopes that their answer would be different from mine. It was not; they only added, "You are a year too late!"

She accepted palliative surgery then (it was too late for curative intervention). She will probably die within the next six months.

Case Number 3. A young missionary, three years ago, was told that she had a similar situation. She, like the second, refused surgery, went to Africa, stayed two years, and returned in a dying condition riddled with cancer. I was asked to see her and arrange some palliative treatment (that is, a little X-ray therapy) to make her a little more comfortable, to take away some of the pain and make her last months of life a little more bearable. I arranged for a hospital bed and treatment. She, however, refused even this, saying that she had trusted God for her healing and was still willing to do so. Unlike the first, she was composed and calm with a magnificent degree of spiritual equanimity. She thanked me warmly for my efforts and enplaned for Detroit for a large, so-called "healing meeting" which was in progress. In less than two months she was dead, having trusted for bodily healing unto the end.

Case Number 4. Dr. Stanley Olson, dean of Baylor University School of Medicine, is a very staunch evangelical Christian and a friend of mine. I asked him one day to speak to our graduates at the Christian Medical Society. At this meeting he emphasized the fact that our Christian testimony is sometimes hurt because we claim certain immunities from natural law simply because we are Christians. He cited the fact that he had made a statistical study of the death rate among servicemen in World War II, who had gone out from his own denomination, the Swedish Evangelical Free Church.

He was amazed to find that the loss of life was higher among their own boys than it was for the armed forces as a whole.

Now let's draw some conclusions from these incidents.

The first case history proved to me indubitably that the same divine touch which gave sight to blind Bartimaeus can heal a hopeless diabetic. Yes, I believe in divine healing as a direct answer to prayer. Nor do I relegate God's power to psychological suggestion or mesmerism. I believe God can heal organic disease!

The second case was a lucid example of an individual whose motive was that of terror, not of faith. She turned to divine healing, so called, as an escape from surgeons. Justification for such a spirit has no place in this discussion this morning, for some of you may be potential candidates for my scalpel. Consequently, we won't argue whether or not she was right in her attitude.

The third case was that of a devout individual who stoutly believed in healing of the body and placed it in the atonement in the same relationship as spiritual healing of the soul.

The fourth relates itself to the question of the Christian and natural law.

The four together bring us to the place where we can ask two questions. First, may a Christian have anything he wants from God simply by asking for it? Second, why is this problem important?

To answer the second question first, may I state that there are at least three reasons:

1. It relates itself directly to the spiritual health of every child of God. Esme Wakefield Stratford says this: "Faith which evades the facts or silences the critical faculties is no faith for strong minds. It is beneath the dignity of health to use vain repetitions as the neurotics do. The true heroic faith is that of him who, conscious of having calmly taken stock of the situation and done everything that is humanly possible to insure success, leaves the event to God. . ."

I want to read that line once more. "The true heroic faith is that of him who, conscious of having calmly taken stock of the situation and done everything that is humanly possible to insure success, leaves the event to God . . .After all, none of us, even the wisest, can say with certainty that any defeat is not a victory in the long run. A victory, perhaps, for some cause that is nobler than the one for which we have consciously striven."

I think Tennyson's immortal lines also are apropos here, for he said:

He fought his doubts and gathered strength;
He would not make his judgment blind.
He faced the spectres of the mind
And laid them. Thus he came at length
To find a stronger faith his own.

It is this type of faith which allows me to enter an operating room as a surgeon, after having paused by the bedside of my patient to ask God to give me judgment and skill, to guide my hands as I become a tool of His to replace suffering with balm.

Those who place healing of the body in the atonement on the same basis as healing of the soul must answer this: "Why did God allow the young lady missionary to die of cancer?" It surely was not because of lack of faith. She believed even unto death.

Furthermore, they must answer: "Why does any saint ever die?"

My pastor, Dr. C. B. Strang, did a very heroic thing one Wednesday night at prayer meeting. He was literally put on the spot by a direct question from one of those who holds this extreme position. His answer was classic, "I have seen God heal on numerous occasions, but I have also stood beside a thousand graves."

We maintain that there are only two spiritual conditions, Christian or unchristian. There is no halfway between ground. With this attitude I agree one hundred per cent. But the superficial investigator also attempts to draw a physical line of demarcation which is just as definite and

classifies people as either healthy or diseased. This is a fallacy of deduction. The state of health and unhealthiness is purely a matter of degree. We are only relatively healthy and relatively ill.

For example, you look at me today. You decide that I look healthy. Comparatively I am. But if you could look at a segment of one of my arteries under a microscope you would see that already the process of aging has begun to take place. You would see that the arterial walls are beginning to harden a little -- that arteriosclerosis is taking its toll. In short, it is the scientific fact that we begin to die as soon as we begin to live. At the moment we are born we begin to die -- the aging process begins. The body and the mind are under constant process of deterioration. Arteriosclerosis, or the process of hardening of the arteries, is a disease entity just the same as cancer -- only its speed and method of killing are different.

This is one basic fact which I wish to hammer home to you today; for it alone forever invalidates the argument of those who attempt to place healing of the body in the same relationship in the atonement as healing of the soul from sin. For if you carry that fallacious argument to its ultimate conclusion then you claim that you can achieve bodily immortality by your faith. If this were true no one would ever get sick, no one would ever die, no one would ever get old. There is a time, thanks be to God, when this will happen, when our bodies will be raised in resurrection glory, immortal, incorruptible, perfect. But until that time "it is appointed unto man once to die."

For you to take this very extreme position which I have just delineated is to put yourself out on a theological limb that will break with you and let you down mighty hard, especially if you try to be more than a superficial thinker. Tragically enough, some fine men have been misguided at this point.

2. Secondly, this problem is pertinent because confusion at this point can wreck the faith of sincere believers. For when calamity strikes and God does not see fit to answer prayer in the affirmative, then the individual must either lose faith in God or admit the fallacy of his position.

3. The third reason why I believe the problem is important is this. An intelligent approach to the problem rescues Christians from the charlatans and the exhibitionists who are bringing shame upon God today with their quasi-religious circuses.

Recently, Chicago and its surrounding cities have been scourged with a rash of so-called divine healers. To these meetings have flocked huge numbers of people: the curious, the ill, the spectacle lovers, the neurotics -- but among them many of the more stable Christians, and not a few of them Nazarenes; some of them patients of mine, some just close friends. The most credulous come back with stories of miracles, of crutches thrown away and deafness cured, cancers melting, etc.

To these honest hearts we owe some sort of sane advice. But before we can advise them we must try to analyze the situation.

A. Are their methods scriptural? Does God dole out this power of healing to those who make a spectacle out of it, to those who use it for an advertising stunt?

B. What place in their program is reserved for the preaching of the gospel? Is it included only as a thinly veiled attempt toward religious respectability?

C. Are any cures effected?

There are well-documented examples of blatant fraud. This is, as I say, well documented. Healthy stooges have been paid to cripple to the platform just to put on their act. But this by no means is the entire story. Let us again dig a little below the surface. Not all of it is done by fraud; there are other factors. Sometimes fear and superstition are used. For instance, one of our closest friends in Chicago is a fine, well-oriented, well adjusted Nazarene woman. She attended one of these meetings. She told how the assembly line of seekers filed past and paused for only a cursory pat on the head by the preacher. Suddenly the chief prestidigitator raised his hands in awesome fashion and in a portentous voice cried: "Now everybody bow your heads and close your eyes; I am going to cast out some devils. Last night some woman peeked while I was doing it, and the devils entered into her and she ran screaming out of the building!"

I said to my friend, "Min, did you look?"

With conviction she answered, "I'll say I didn't; I was scared to death."

Under the guise of religion -- witch doctors.

Again let us dig a little under the surface and see some psychosomatic manifestations, for this discussion has brought into focus the ancient problem of ills without organic basis. Medical statisticians estimate that 70 per cent of human ills fall in this category; some even place it as high as 85 per cent. These ills are exemplified by the anxiety states, psychoneurosis, hypochondriacal state, and hysteria. I saw some very interesting phases of true hysteria while I was in the army. These conditions as a group cannot be shrugged off as unimportant, for they are important.

I remember one young man, a sergeant, who was a patient of mine at Mayo General Hospital. He had been overseas in combat. He was a big, double-fisted, open-faced Swede. He had been a terrific soldier -- a sergeant who had been afraid of nothing. He had been a medical corpsman and had crawled on his stomach under machine gun fire across no man's land with a stretcher to drag back wounded buddies. There is no doubt about his being a "soldier." He was no gold brick. One night while he was making a foray out into no man's land a piece of shrapnel hit him in the back and paralyzed him from the waist down. He was rushed back to a field hospital and there a surgeon took out a piece of shrapnel which was fortunately just pressing on his spinal cord. The pressure had caused him a temporary paralysis, but the surgeon felt that the spinal cord was not injured, and that within a few weeks he would probably be as good as new. He was evacuated back to a base hospital and thence to our general hospital in the States. By the time he arrived through the echelons of command to our hospital, several months had elapsed; and yet the sergeant couldn't walk. He was completely crippled from the waist down. The personnel in my department began to evaluate him diagnostically with all the modern devices at our command. We quantitatively tested his muscle strength and his peripheral nerve function. I was amazed to find that there was no evidence of any organic paralytic disorder of his lower extremities. His leg muscles were not atrophied; his reflexes were normal; his sensory acuity was unimpaired. In spite

of all this, he couldn't walk. I dissected his history very thoroughly and convinced myself that this man was not malingering; he was not a gold brick. He was not a man who was trying to get an army pension for the rest of his life by dishonest means. And yet here was a man who was totally paralyzed. What could be done?

I felt that here we had a case of what we call true "hysteria." If this diagnosis were correct, then his residual paralysis was on the basis of some physiological or psychological block in the higher cortical centers. The exact basis for hysteria is not too well understood medically. We only know that often a very severe shock will cause some sort of physiological or mental block without any organic injury. Blindness may result from an auto accident without any organic basis. However, the patient is completely innocent of any faking or collusion. Cures are effected by hypnotic suggestion and drugs such as sodium pentothal (truth serum). We decided to use the latter on the sergeant by injection into his veins.

We achieved a state of near unconsciousness, a point where he would protest a bit if stuck with a pin. Then another medical officer and I supported him between us with his arms around our necks. We started down the hall with his feet dragging. We had pressed an available 2nd lieutenant into the task of walking ahead calling, "Hut 2, 3, 4." The familiar command penetrated the drugged sensorium of the sergeant and he began clumsily to try to march. As he tried, his movements became less athetoid and more controlled. Within five minutes he was marching without our aid. He was so excited that he stopped in each ward to tell buddies that he could walk. At every ward he shouted, "Hey! Fellows! Look! I can walk!" He walked to the PX that night and went on a "Coke binge." I never found how many Coca-Colas he drank in celebration.

The same result can be accomplished by hypnotic suggestion. I had another patient who was paralyzed in one hand. As in the first case, I could find no reason why he should continue to be paralyzed. This time I decided we would try hypnotic suggestion. Our psychiatrist was adept at this type of therapy. Again let me emphasize this was not a malingerer; this was a boy who was actually paralyzed. The psychiatrist by hypnotic suggestion alone was able to cure his paralysis.

These are actual cases. At the University of Illinois, women are being delivered of their babies, painlessly, by hypnosis. It is undoubtedly within this group that the so-called "faith healers" have a great percentage of their successes.

The other functional disorders we shall not discuss this morning. We shall only mention that they include environmental maladjustments, chronic low motivation, internal tensions, feelings of guilt, etc. These people need spiritual guidance, and a rational solution to their problem.

The next point I want to make as we hurry on is this: Cures for cancer, tuberculosis, etc., must be evaluated in a critical, scientific analysis. Before accepting such a claim we must ask ourselves this question, Was the diagnosis established in the first place? It would be well to remember this, that no diagnosis of cancer can be made until a piece of it is taken out and examined under a microscope. This is a fact which is scientifically undeniable.

A prominent woman in the Church of the Nazarene recently had a cancer diagnosed clinically. Instead of submitting to surgery she drove to a distant city to be anointed by one of these

men. She was supposed to have been healed. However, her husband, a devout Christian and staunch Nazarene, insisted that she should proceed with the surgery recommended and leave the result to God. This was done. The surgical specimen was examined by a pathologist and the large cancer was found to be still present. Doubtless, her name will be added to the healer's private roster of miracles.

Now, in summation: What basic rules should govern my attitude toward divine healing or my participation, either as patient or supporter, in any "divine healing" effort. I have tabulated six simple rules which have helped me chart my course:

1. Number one is this: Have faith in God's ability to heal!

I believe that the power which once made a leper whole can and does still work. We cannot limit God's ability and maintain our faith in His omnipotence.

2. Refrain in your thinking from any attempt to put God under obligations to give you whatever you wish simply because you have asked for it. Answers to prayer can sometimes be, "NO!" I suppose you know that? God can answer your prayers but He may answer, "NO." The same thing is true of healing the body. A good father isn't one who always gives his children everything they wish. Sometimes he says, "No, that wouldn't be best for you."

3. Maintain an attitude of prayer in all of your life. As is said of Brother Lawrence, a monk of the seventeenth century, "He practiced the presence of God." I thrill with that concept. Sometimes I have become convicted because I don't have great segments of my days that I can spend on my knees. I do, however, a great deal of my praying going across town -- not only praying that I will arrive safely but praying about the things I know I must do that day. Many times I have spent intercessory hours as I wheeled through traffic praying about a particular crisis which I knew was facing me. We need to practice and maintain an attitude of prayer.

4. Don't get yourself out on a theological limb by maintaining a doctrine that doesn't work. May I reiterate again that our attitudes and thinking toward health and disease must not be superficial. Just remember, no one ever dies of "old age"; he always dies of disease, of the disintegration or deterioration of the body. You cannot achieve physical immortality by your faith. "It is appointed unto men once to die"

5. Don't expect a miracle where natural means are available. God has placed natural laws here by which He expects us to live. When the weather turns cold you put on an overcoat, don't you? You don't expect God to miraculously infuse you with heat; no, you use the intelligent approach; you put on a coat and a hat. I firmly, however, believe that God could keep you alive if it were necessary. If you were down in the North Atlantic on a raft without proper protection I think God could perfuse your body with warmth. I am convinced that He could if He had to, if there were no natural means to do it. But don't expect Him to make up for your foolishness by performing a miracle. If you expose yourself to the wintry blasts without proper clothing, you'll probably get pneumonia whether you are a Christian or not.

When you are hungry you eat, don't you? You don't expect God to suffuse your body with food artificially. No, you take it in the normal way. But, there have been times in history when God has kept people alive, miraculously. I think it is interesting to remember that Elijah was fed by the ravens. That was a divine miracle, wasn't it? However, only the method of transportation was miraculous.

The raven brought natural food and Elijah ate it in the natural way. God performed the first "air drop" of supplies. He had no helicopters, so He used a raven. And the miracle was performed in only the realm in which it was needed. Christ walked on the water; He needed miraculous means of reaching the boat; but He entered into the boat and rode to land with the disciples. Christ was not a sensationalist; He used His divine power when necessary.

6. Don't cater to the sensational. Don't be mesmerized by the cheap barking of religious racketeers who use the gospel of Christ as a secondary, thinly veiled attempt at respectability. Decide whether or not their methods are scriptural. Make more than a superficial investigation concerning their purported cures. Know something about them. How do they live? How do they spend their money?

Many a time I have called my pastor and said, "Dr. Strang, I am operating on Miss So-and-So tomorrow; I would like to have you go to the hospital today and have prayer and anoint her with oil." I covet God's help. And if He sees fit to heal her organically before I operate, fine. If He doesn't, I have at least asked God to use my knife as a tool of His to bring balm to a suffering body.

My resident surgeon last year was a devoted medical missionary in Ethiopia who had returned for a year of sabbatical leave to pursue graduate work in surgery. About two weeks ago he took violently ill with fulminating hepatitis. During his first day in bed he called me in to see him, and requested, "Howard, what do you think about asking someone to come out and pray for me?"

"I think it would be wonderful," I rejoined.

I called his pastor, Dr. A. W. Tozer, and suggested that he bring his bottle of oil along. Dr. Tozer is pastor of the great Christian and Missionary Alliance church in Chicago, and a true saint of God. He and his assistant pastor came out and the three of us had prayer in Bob's room. Dr. Tozer anointed him with oil and prayed fervently. God's presence could be felt in the room. There was no great spectacle, no beating of superstitious tom-toms. God didn't see fit to heal him; and four days later he was dead. I don't know why; but I'll find out someday when the books are opened. But we took the scriptural way. I am interested in having Dr. Tozer or Dr. Strang do my anointing. I know how they live all week. I don't want anybody anointing my head with oil unless I know how he walks the rest of the week. I want to know how he spends his money. One of these racketeers is reported to have spent \$65,000.00 for a pedigreed bull at a stock sale. Where did he get the money? Oh, from poor people that he had fleeced at his meetings -- washerwomen; unhappy, ill people who had already spent all they had in the quest for health. It is reminiscent of the idolatry of the Israelites when they were unwilling to serve Jehovah. May God have mercy on him!

Remember, we are stewards of God and of the resources He gives to us. These religious racketeers are not only promoting evil, but they are promoting the downfall of honest, God-fearing people. Racketeers like this would cease to flourish if Christians were more discriminating.

7. My seventh and last is this: Use the scriptural methods. Get your pastor to come; call in the elders of the church and have them anoint you with oil That is simple enough, isn't it? And it is God's method.

Let's think objectively. You are college students; you should not be moved and pushed from place to place by superstitions and whims. As I leave you today may I urge again that you maintain an open, honest, and critical approach toward life. Without any superficiality of thinking, but with mature concepts, build your lives upon a deep faith in God.

May you with William Osler, that dean of American surgeons, be able to testify:

I have loved no darkness,
Sophisticated no truth,
Nursed no delusion,
Allowed no fear.

* * * * *

ENDNOTES

1 From *The Mature Mind*, Harry A. Overstreet, 1949. Printed by W. W. Norton & Company, Inc., New York, New York.

2 Ibid.

3 Overstreet, *The Mature Mind*.

4 Ibid.

5. Ibid.

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10 Ibid.

11 Ibid.

12 Ibid.

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16 The Man Who Wouldn't Talk, by Quentin Reynolds. Used by permission of the Reader's Digest, Pleasantville, New York.

17 From The Questing Spirit, by Halford E. Luccock and Frances Brentano. Copyright, 1947, by Frances Brentano. Reprinted by permission of Coward-McCann, Inc.

18 T. S. Eliot, The Rock, from The Questing Spirit, by Halford E. Luccock and Frances Brentano. Copyright, 1947, by Frances Brentano. Reprinted by permission of Coward-McCann, Inc.

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THE END