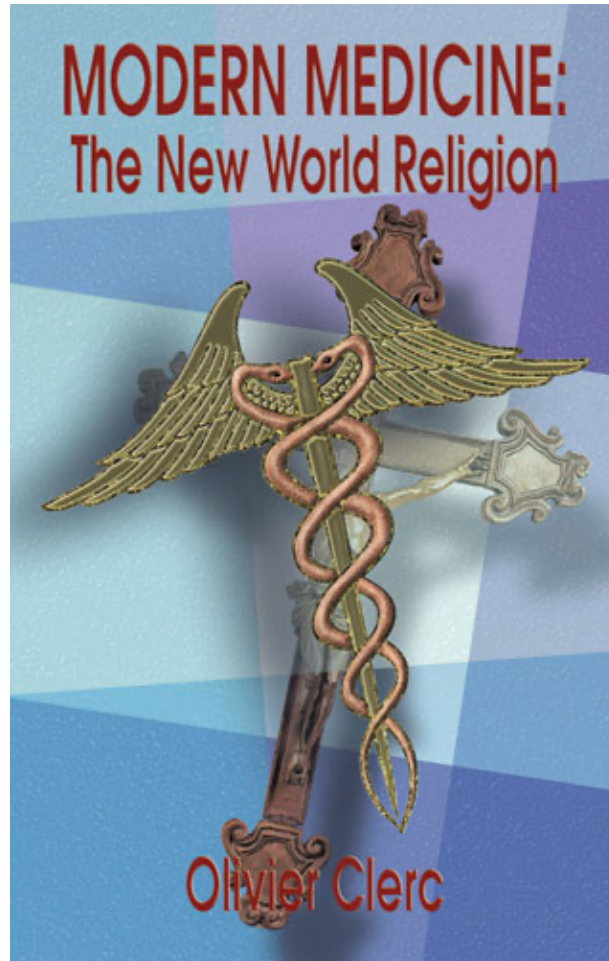


**Published by PersonHood Press,  
California, 2004.**



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

The hidden influence of beliefs on medical dogmas and practices

**Essay**

**Olivier Clerc**

Translated from the French by Rachel Stern

**Personhood Press**

Original title:

*“Médecine, religion et peur: l’influence cachée des croyances”*,  
Olivier Clerc.

© Editions Jouvence, 1999, for the French edition.

ISBN: 2-88353-178-1

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

— Ivan Illich, in *Limits to Medicine*

## Table of contents

ACKNOWLEDGMENTS	5
WARNING	6
AUTHOR'S INTRODUCTION TO THE ENGLISH EDITION	7
FOREWORD BY MICHAEL MISITA	9
OVERVIEW	10
AUTHOR'S NOTE	15
CHAPTER 1: PASTEUR: THE GOOD SHEPHERD, THE NEW SAVIOR	17
CHAPTER 2: THE TRANSPOSITION OF THE IDEAS AND PRACTICES OF CHRISTIANITY INTO MEDICAL TERMS	21
<i>ORIGINAL SIN/MAN'S NATURAL WEAKNESS</i>	21
<i>EVIL / SICKNESS; GOOD / HEALTH: EVERYTHING COMES FROM THE OUTSIDE</i>	23
<i>BAPTISM / VACCINATION</i>	25
<i>THE PRIEST / THE DOCTOR</i>	26
<i>THE CHURCH AND ITS VOWS / THE MEDICAL ASSOCIATION AND THE HIPPOCRATIC OATH</i>	28
<i>HERESY / CHARLATANISM</i>	28
<i>SALVATION AND LIFE EVERLASTING / HEALTH AND PHYSICAL IMMORTALITY</i>	30
<i>SINS, CONFESSION, REPENTANCE / BAD HEALTH HABITS, CONSULTATION, TREATMENT</i>	31
CHAPTER 3: MEDICINE MESSIANIC AND FAUSTIAN	33
CHAPTER 4: THE ETERNAL RECURRENCE OF ATAVISTIC FEARS	37
CONCLUSION	40
POSTSCRIPT	41

## Acknowledgments

My special gratitude to Rachel Stern for having spontaneously offered to translate this book and for her excellent and patient work in doing so.

Many thanks, also, to Emma Holister and her mom, for the final revision of the English text.

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

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

**Warning**

To avoid the awkward use of “he or she” and “him or her,” I chose to use only the masculine gender when referring to both men and women.

## Author's introduction to the English edition

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

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

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

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

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

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

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

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

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

*Bonne lecture!*

Olivier F. Clerc  
[olivierclerc@fr.st](mailto:olivierclerc@fr.st)  
[www.olivierclerc.fr.st](http://www.olivierclerc.fr.st)



## Foreword by Michael Misita

There is a general consensus nowadays that mankind has progressed and is continually progressing toward some sort of greater enlightenment. But has this progression merely been an intellectual and technological development, while man's character remains primitive? Is mankind, as a whole, destined to – at some point – achieve this lofty condition of enlightenment, or is enlightenment a state of being that is to be realized by each individual personally? Intellect is only a tool in man's search for the reality of things. To one who takes the time to see clearly, it is obvious that man looks at his own incredible achievements and misses what is directly before him. In spite of science, man no more knows what the world is really like than does a caterpillar wrapped in its cocoon that has yet to become a butterfly.

Man's spirit of inquiry is perhaps more alive in this 21st century than at any other time in known history. Countless books, television, movies, radios, and computers feed us a steady flow of information, merely reinforcing the same time-worn systems of beliefs, disguised in more modern and therefore more acceptable garb. When viewed from the time period in which a man is currently living, the so-called changes in ideas appear to be new. But if a person's mind is alert and if he is able to view the world around him in a more generally detached way, he will see that essentially nothing of real importance has changed. Simply put, wars are fought for the same old reasons. The same political manipulations of the masses continue to occur, more sweeping in their influence through the media of television and computers (and therefore potentially more insidious). And in our own small lives we continue to be imprisoned by the familiar and safe habitats of our personal beliefs about ourselves, others, and the world.

Adaptation and survival go hand in hand, and as Olivier Clerc so skillfully points out, basic belief structures do not change, they only adapt to present circumstances. He shows us one aspect of this adaptation of beliefs with his comparison of religion and modern medicine. Although he addresses these two symbols in particular, an alert person will immediately see that Olivier Clerc's observation doesn't end with medical science and religion: It can be applied to all forms of beliefs.

How amazing it is that an intelligent person can go through his whole life without being aware of that which is so simply apparent. Modern medicine's role as the new world religion has been staring all of us in the face for decades. Olivier Clerc manages, in the following pages, to open our eyes to this fact. His observations encourage us to get a sense of what he has observed, in the hope of grasping the significance and potential enormity of that observation. He puts forth his valuable commentary while encouraging us to remain approachable and positive, as he explains that it is not "the system which needs to be changed, but our own internal dynamics."

– Michael Misita  
Author of *"How to believe in nothing, and set yourself free"*  
Valley of the Sun Publ.

## Overview

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

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

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

However, it is in the field of medicine that this unconscious transposition of the religious experience – and more specifically the Judeo-Christian ideology, myths, beliefs, expectations, and hopes – seems to have had the greatest impact. The facts show clearly – for anyone taking the time to study them – that medicine enjoys today an astonishing degree of undeserved credit that is out of all proportion to its actual results or promises. Real health keeps regressing, while the great medical “miracles” such as vaccines and antibiotics, are now clearly showing their limitations, which some had foreseen and warned of right from the start. This undeserved credit comes mostly from the fact that medicine and science have replaced religion as the only certain belief in an uncertain world. And the doctors and scientists are seen as the priests of the new religion, delivering through the certainties of science what the old discredited gods were not able to deliver. If we can no longer believe in the miracles, the cures, and the curses of the old religions, we can certainly believe in the miracles, the cures, and the destructive powers of the new science.

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

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

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

Although medicine sees itself as exclusively scientific and rational, with no room for spiritual or human dimensions (such as psychic healers or shamans, who are dismissed as charlatans), it organizes itself and functions in a way that can be described as intrinsically religious. The paradox is that by rejecting any spiritual dimension, medicine, in fact, becomes the toy of the forces and myths it tries to ignore and cannot control. Mere denial of something’s existence has never made it disappear,

except perhaps in our conscious mind. Instead, it is banished to our subconscious mind, where, beyond our control, it can roam free, wreak havoc, and wield even greater power.

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

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

- physicians have taken the place of priests;
- vaccination plays the same initiatory role as baptism, and is accompanied by the same threats and fears;
- the search for health has replaced the quest for salvation;
- the fight against disease has replaced the fight against sin;
- eradication of viruses has taken the place of exorcising demons;
- the hope of physical immortality (cloning, genetic engineering) has been substituted for the hope of eternal life;
- pills have replaced hosts;
- donations to cancer research take precedence over donations to the Church;
- a hypothetical universal vaccine could save humanity from all its illnesses, as the Savior has saved the world from all its sins;
- the medical power has become the government's ally, as was the Catholic Church in the past;
- "charlatans" are persecuted today as "heretics" were yesterday, and dogmatism rules out promising alternative medical theories;
- the same absence of individual responsibility is now found in medicine, as previously in the Christian religion;
- patients are alienated from their bodies, as sinners used to be from their souls.

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

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

This substitution of medicine for religion has had many unfortunate consequences. In medical research, it influences what should be looked for and what can be discovered. Any discovery or theory

that is at odds with the over-arching orthodoxy is rejected, and its authors called heretics. Entire areas of research, as well as promising new lines of approach, are thus disqualified.

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

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

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

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

Second, I also hope that by bringing to the fore the influence of religious beliefs in medicine, which is but one example of a very widespread phenomenon today, readers will start thinking about how their beliefs filter their perceptions, biasing and distorting them. Every time an object, a person, a social group, or an event becomes the target of religious projections, there is danger. The real characteristics of these things (and persons) fade in the eyes of those who color them with their beliefs. These targets then become the objects of religious urges, impervious to any rationalization, whether they are expressed through fear, hatred, “devilization” and the search for scapegoats, or through deification, idealization, and unconditional devotion. From Princess Diana to Waco, and from Mother Teresa to Saddam Hussein, there are numerous examples of the kind of consequences brought about by this transfer of religious expression to real persons or situations.

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

In other words, there are three levels inside us:

- 1) **a core of fears**, from which we have learned to protect ourselves by covering it with:
- 2) **a layer of beliefs**, which make us feel safe (even though those fears have not disappeared), this layer being itself dissimulated under:
- 3) **an intellectual varnish**, a rational façade which give us the illusion of having transcended superstitions and beliefs, and which shelters us from our fears, keeping us barricaded behind intellectual knowledge.

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

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

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

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

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

## Author's note

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

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

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

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

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

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

## Chapter 1

### Pasteur: The Good Shepherd, the New Savior

We traditionally associate the birth of modern medicine with the publication of the work of French biologist Louis Pasteur<sup>1</sup> (1822-1895), the father of vaccines. This choice fits perfectly with my thesis, as it was with Pasteur that the progressive and systematic transference of Christian symbolism to medicine began.

Even today, few people realize that Pasteur himself, like most men of his time, was a fervent Catholic. So fervent, in fact, that he worked all his life to reconcile his scientific discoveries with the dictates of his faith, even if that meant at times denying the facts and tweaking experimental results. I wish here to reiterate: Given that the “Pasteurian Myth” is in the process of being revised, and in some cases the man himself quite openly attacked as culpable on various fronts, I want to make clear that I am not of the opinion that Pasteur the man lacked intellectual probity or scientific rigor – only that he was laboring under the imperative need of having to keep his discoveries in accord with his deepest beliefs. At that time few people had the intellectual courage of, say, a Nietzsche.

Right up until his death, Pasteur contended that the human body was naturally devoid of any and all microbial taint and that its organs, fluids, and tissues, in their normal state, like those of other animals, would contain no traces of germs or microscopic organisms whatsoever. With an obstinacy so stunning that it can truly only be described as religious, he defended the idea of “the quasi-virginal state of the human body, created in the image of God.”<sup>2</sup> By placing the cause of illness outside the human body, in the atmospheric environment, Pasteur was reaffirming man’s original purity, in the Garden of Eden. God has created man pure, without contamination of any kind; thus “evil” – which, in this conception, takes the form of sickness – can only come from without. In this world-view, both health and sickness come from outside of man and are exterior and alien to him.

As early as 1946, Dr. J. Tissot, general professor of physiology at the Natural History Museum in Paris, demonstrated the inexactitude of the four Pasteurian principles (or dogmas)<sup>3</sup> on which modern medicine is founded. The book, which was blocked from publication, and finally printed at the author’s own cost, was titled *Constitution of Animal and Vegetable Organisms: Their Illnesses and the Causes Thereof*, and included these notable lines:

*“Our premise is that Pasteur, whether for religious or other motives, introduced into science false dogmas and principles which, from the outset, stifled the truth which had been on a forward march since the beginning of the last century, and furthermore made it impossible for researchers to find that truth by orienting their work in wrong directions – a most nefarious enterprise which is actively continued by the Pasteurian school, opposing all new ideas which contradict these false dogmas, dogmas which this school wants to remain sacrosanct.”*

In one of his publications, Professor Rappin, former director of the Pasteur Institute in Nantes, had also commented on how the pronounced religious tendencies of Pasteur interfered with his medical practice:

*“Pasteur himself, with his fervor and his natural impetuosity, feared not, in defending both his experiments and the implications of his findings, to join the fray, not only from the point of view of relationship of the works to the scientific discoveries, but also in the consequences that he attempted to draw out of them in relation to his own religious ideas. During a conference at the Sorbonne, he went so far as to attack the partisans of heterogeneity on the basis of their pretended materialism. ‘What a conquest it would be, Messieurs, for materialism, if it could protest that it relies on the fact that matter organizes itself, coming to life by itself. What could be more natural than to defy such a matter? What use is there to fall back on the idea of a primordial Creation before the mystery of which one ought to bend the knee and bow?’ And, in appreciation of this conference, the Abbot Moignon wrote, ‘The aim was to re-conquer the incredulous, to bring them back to the Spirit, and Monsieur Pasteur had confidence in his vocation. He felt himself to have had souls entrusted to him. Reverend Father Felix praised him in Notre-Dame’s pulpit for the orthodoxy of his chemical doctrine...’”*

---

<sup>1</sup> In French, the word *Pasteur* means “shepherd.”

<sup>2</sup> *Pasteur: le socle se lézarde*, J.-J. Rocca, in *Médecines nouvelles*, vol. 2, N° 4, 1991.

<sup>3</sup> These four principles are *atmospheric panspermia*, the *asepsis of living organisms*, the *phenomena of putrefaction* and the *bacterial monomorphism*.

From the start, then, Pasteur founded modern medicine on a basis that was more religious than scientific, even if that meant amputating essential parts of the theories of his contemporaries he had made his own<sup>4</sup>, so as to better express his own medical principles, which future medicine proved to be wrong... without, for all that, rejecting the religious influence that the good shepherd of medicine had breathed in it.

We note, in his defense, that Pasteur was in no sense an isolated case: From Newton to Einstein, including Mendel, Darwin, and numerous others along the way, scientific geniuses in many different disciplines have worked seemingly with the secret desire that their discoveries might confirm their deepest convictions, whether religious, social, or political. Furthermore, this desire at times proved so strong that it overcame their objectivity and led them to take liberties – large and small – in the interpretation of their experiments and indiscretions with the facts they observed in the course of them. There is, of course, nothing surprising in this; the *reverse* would rather be surprising. Only someone who had consciously taken stock of and questioned the collection of beliefs, values, and ideologies to which his education has exposed him – the greater part of which is never objective – would be in a position to embark upon the study of what actually *is*, without any preconceived ideas. But is this even possible? All of us can and therefore should, at least, learn to multiply our available points of view, i.e. the angles from which we can approach any particular piece of information. At the very least, we can accept the presence of different “perceptual filters” in such a way as to minimize the importance of any single one of them in our acts of perception. Unfortunately, scientists receive no more instruction than the rest of us in this skill, so that their research and work are influenced by many surrounding factors (education, religion, beliefs, etc.), without these scientists being aware of it.

In Pasteur’s case, this infusion of religious doctrine into reality had an effect of considerable magnitude, in terms of biasing both reality and research. This effect is still being felt today, owing to the following factors:

- To begin with, even though medicine relies on various fundamental sciences, it must be remembered that medicine itself is not a science but an art. Living beings – to say nothing of that “living being endowed with a psyche” which man is – do not react in a predictable, mechanistic way, like an experimental object in physics or electronics. The falseness of Pasteurian dogmas was therefore more difficult to establish than, for instance, the supposed flatness of the earth.
- Second, Pasteur, as much by his personality as by his theories, was updating and reactivating Christian symbolism, in particular with regard to the external origin of Evil and the Coming of the Savior, the Redeemer. Equally, in this sense, it should be noted that the very name “Pasteur” (*shepherd*, in French) probably played a rather non-trivial role in the collective unconscious. Just as Jesus, the “Good Shepherd” who came to save his “lost sheep,” Pasteur became the incarnation of the new Savior who, instead of bringing redemption for the sins of the world, would bring the ultimate salvation from the ills of mankind (by vaccination). As a result, questioning Pasteur and his work became a form of heresy, an unconscious rejection of the Christian doctrine.
- Finally, Pasteur was the first to make use of his access to power (he was a friend of the Emperor) and to the press (through his own brother, who owned a newspaper) to impose and disseminate his ideas as widely as possible, as his media-savvy heirs continue to do in their splendid efficiency.

Scientific criticisms of Pasteur and his ideas have been numerous, from his own time down through to our own. Scores of scientists and medical men have attacked his ideas and his methodologies, and have pointed out the errors spread by the mythical wizard of modern medicine that Pasteur came to be considered. The amazing persistence of Pasteurian dogmas, in spite of all these attacks, is usually explained by the financial strength of the medico-pharmacological lobby which protects and supports it, and by (as in Pasteur’s time) the press which sustains its power. Without wishing to minimize the importance of these factors, there are solid reasons to believe that they represent nevertheless a secondary factor. The essential element that has ensured the durability of the Pasteurian myth is precisely the very fact that... *it is a myth!* The continuing pull of Pasteur’s doctrines and of the man himself as a medical celebrity are due to the strength of the religious elements that are unconsciously

---

<sup>4</sup> For instance, the idea of “bacterial polymorphism,” discovered by Antoine Béchamp, from whom Pasteur “borrowed” his *mycrozymas* to make his own *microbes*, was totally eliminated by Pasteur, with disastrous consequences for the evolution of medical research.



associated with them, in the public opinion as well as in the world of medicine. One of the beauties of this arrangement is that rational arguments make no inroads into disturbing the beliefs of those who put their faith into the pastoral myth, as we all do without knowing it. In fact, since rational ideas have little (or no) impact on irrational beliefs, the pertinent critiques that can be made from a rational point of view against the myth of pastoral medicine do not even manage to scratch the surface. Often, they actually reinforce the evangelical aspect of this doctrine by making the arguments of detractors appear as dangerously heretical.

It is therefore a real halo that Pasteur offered modern medicine, a saintly corona which proffers protection against profane attacks and guarantees the faithfulness of its flock (its patients, that is), in spite of its errors and victims, just as the Catholic Church managed to keep most of its own flock, in spite of an impressive list of extortion throughout the centuries.

This religious foundation helps to explain the extremely passionate attitude with which most medical debates on crucial issues are undertaken, such as vaccination, contraception, *in vitro* fertilization, abortion, genetic engineering, and cloning. Indeed, religion is an affair of the heart, not an issue of reason. It has more to do with feelings than with reflection. And in the same way that Catholicism refers to canon law, modern medicine shields itself with all sorts of newly discovered “rights”: the right to have an abortion, the right to health, the right to have children, etc., all of which cannot be questioned without the questioner being immediately cursed. What we are left with, then, is a kind of a medicine of divine right.

A reader might object that, in proposing this thesis, I am merely imposing my own religious ideas onto medicine, a noble and useful science which, after all, purports to nothing else than to cure people and to continuously discover the best ways suited to this end. If such were in fact simply the case, why would medicine’s discoveries, methods, and results be subject to so many interdictions, obligations, taboos, rites, and irrational behaviors, more characteristic of religion than of science, as is now the case? A non-religious medicine would neither try to defend dogmas that are contrary to observation, nor suppress research and theories that might pose a threat to its foundations.

As I have just begun to explain with Pasteur above, and as we shall further develop with the various dogmas and rites of modern medicine, an impartial observer cannot miss taking note of the religious perfume that permeates the entire medical world, even to its tiniest recesses.

## Chapter 2

### The Transposition of the Ideas and Practices of Christianity into Medical Terms

As Pasteur was promoted to the rank of the new savior of humanity, and society became progressively more secularized, the transposition of the Christian myth developed methodically, affecting not only theories and practices (the dogmas and rites of the new religion), but also the research. As I said before, but the metaphor is worth repeating, just as a magnetic field organizes the landscape of iron filings scattered on a sheet of paper, making visible the otherwise hidden forces that connect the two poles, there exists a “religious field” which structures and organizes the development of modern medicine, without anyone knowing it<sup>5</sup>. Invisible and impalpable, this religious field is made up of all the beliefs, myths, and values transported by the Christian religion, in particular the Catholic religion. In other words, the secularization of society has only been accomplished on the surface: We have removed the “filings,” the religious forms, but we haven’t changed the train of thought that guides them. The unacknowledged religious “force field” continues to exert the same influence as before, only in new forms. That is why behind the structural differences that exist between the world of medicine and traditional Christianity, we find ultimately the same fundamental concepts, the same kind of relationships and behaviors among their various members, the same fears, hopes and expectations.

#### *Original Sin / Man’s Natural Weakness*

According to traditional Christianity, man is born with the weight of original sin already upon him. Therefore, from the moment of his birth, he requires the aid and protection of the Church, without which he is lost. In this way, man arrives on earth with a major handicap that causes him to be dependent on the clerical institution for his salvation.

Similarly, in the Pasteurian conception which modern medicine has adopted, we are born with a natural weakness that leaves us vulnerable to all kinds of illnesses, viruses, and microbes. These malign forces will almost certainly kill us, should we reject the protection offered by medicine. Therefore, from the first days of our life, we are put under medical supervision and our dependence thereon most often will simply grow and reinforce itself, with each new illness, for the duration of our life.

According to religion, earth is in the hands of the Devil (“*All of this belongs to me,*” Satan says to Jesus). In the medical cosmology, the earth now belongs to the viruses and bacteria. As formerly the Church was the only guarantor of our salvation, so now medicine will henceforth be the guarantor of our physical health. The Church alienated man from his spirit and his soul; now medicine has alienated us from our own body. In both cases, man’s abdication of responsibility and his dependence on an outside authority are obvious. He is perpetually a weak and fragile child. Evil being an exterior force, the solution to that evil is equally exterior. Evil continues to be present everywhere outside him; solutions must still come from without.

One can argue that medicine can take the credit for beating back certain epidemics, for lengthening the average life span, etc. But the reality has more shades of gray than the black and white image the medical establishment presents. The longer average life span is above all tied to the development of better hygiene practices. It has long been known that pandemics follow a fixed pattern of an ascendant curve, which reaches its apex and then spontaneously falls. Medical intervention (chiefly in the form of vaccines) has usually been applied at the point when the curves had already begun their descent, for instance for tetanus or tuberculosis. More significantly, various populations that have retained the knowledge of how to live a naturally healthful life (breast-feeding infants as soon as possible after birth to ensure consumption of colostrum; a carefully protected and nurtured mother-infant bond; maintenance of healthful habits and diet, etc.) are known to enjoy very good health, without needing to make use of the medical arsenal which most of us are all too familiar with. For the more seriously one considers it, the more it seems that man’s weakness is both

---

<sup>5</sup> It is worth noting that the notion of “field” is being used more and more currently in various sciences. For example, biologist Rupert Sheldrake speaks of “morphogenetic fields” to describe the development of specific behaviors in animal species, the way that schools of fish, flocks of birds, or for that matter, groups of humans, organize themselves. In chapter 4, I will further develop the concept of a “psychic field” made up of atavistic fears that man has carried with him since the dark dawn of his birth and which continues to influence the totality of his waking activities, beyond the reach of his ability to rationally explain it away.

acquired and maintained, so as to conform to the foundational myths of the Judeo-Christian civilization, rather than a “natural” deficiency which would make medical aid truly indispensable.

My objective in writing these lines, I repeat, is neither to put modern medicine on trial nor to deny its very real successes, for instance in the realm of reparative surgery which has been responsible for... dare I say it ...*miracles!* If I seem to be questioning the convictions that many have regarding medicine, whether for lack of being better informed or for not having acquired some personal experience with regard to health, it is in order to make explicit the taboos that surround these convictions and in so doing, to call attention to the tacit prohibition of questioning them, the passions raised by virtue of their infringement, and therefore, the dogmatic character of these so-called “convictions” which precludes their rational, objective, and fact-based study.

The idea that man is by nature feeble, naked, and utterly dependent on outside medical assistance is thus a myth analogous to that of original sin. There is no secular reason to believe man to have been thrust into the world more naked or defenseless than other living species which nature has generously equipped with the means to survive the various assaults of their environment. The greater part of man’s illnesses and pathologies are the result of a way of life that is at odds with nature, characterized by a rejection of his instincts and the over-reliance on his mind, disconnected from his physical body.

Unfortunately, the effect of this powerful myth is to keep us in a state of infantilism and fear, atrophying our capacity to take charge of ourselves and our health. As long as we believe in the unfounded myth of our own helplessness (which, like all *credos*, remains true as long as the believer maintains faith), we will perpetuate the abdication of personal responsibility for our own health to various “experts,” and we will remain ignorant of our own astonishing ability to learn to heal ourselves. All the same, there are many who even today are beginning to look beyond the myth, to overcome their fears, and to develop their “internal healer.” In doing so, they reorient themselves to re-taking control over their own health.

### ***Evil / Sickness; Good / Health: Everything Comes from the Outside***

The very notion of sin implies the existence of good and evil, a concept symbolized in the Christian religion by the Tree from which man, to his enduring misfortune, ate the forbidden fruit. Whether represented by a serpent in the Garden of Eden, by Satan testing Job’s faith, or by the Devil tempting Jesus three times in the desert, evil is always represented as being exterior to man. In addition, it seems to be omnipresent, while the earth is the domain of perdition, dedicated to Evil’s great enterprise. Temptation is everywhere, with the possibilities for error being manifold, while the chances of staying on the correct path and living a virtuous life seem few.

For medicine, illnesses – viruses, microbes, bacteria – are also omnipresent. They threaten man from all sides, and his chances of preserving his health in the midst of them seem quite weak. I said in the preceding chapter that Pasteur postulated that the human organism is pure, purged from any defilement (this is the wrong dogma of the asepsis of the human body), which means that sickness can only come from outside the body. Although we now know this idea to be utterly false – the human body is in fact replete with a large number of micro-organisms, which only become pathogenic when the underlying host environment is out of balance – this notion of the virgin purity of the human body remains printed in the subconscious mind of a majority of people. In fact, this preoccupation with cleanliness has pushed the research and practice of hygiene to an almost paranoiac level in some Western cultures. This can be seen most clearly in the United States, where it has become impossible to distinguish some cafeterias from hospitals, as the personnel of each are required to wear white coats, gloves, masks, and hair-nets. It can also be observed in the case of several celebrities who can afford the “luxury” of living in an atmosphere that is almost totally sterilized. Life, need we restate the obvious, is not sterile: On the contrary, its essential character is fertility. This quest for sterility, motivated by the desire for purity, hygiene, and health, is, in the final analysis, a *morbid* desire. Far from promoting a higher quality of life, or even life itself, this quest ends up endangering life by making individuals fragile, as they are more and more cut off from their natural environment, being only able to prosper in an artificial, aseptic, and de-vitalized environment.

The desire to genetically manipulate flora and fauna (the human species not excepted), in order to control the environment in which we evolve so that we can rid ourselves of all malignant or pathological elements, is the ultimate consequence of the erroneous belief in a bio-environment infested with evil and sickness, in which we cannot survive without wresting victory from our adversaries in a contest that takes no prisoners. Disconnected from nature and from life, locked in our mind and in the artificial material world that we have built for ourselves, we regard our

surroundings as hostile and try to protect ourselves from them, even if that means destroying the environment or reshaping it according to our own will.

An analogous dichotomy leads us to cut ourselves off from our shadow-side<sup>6</sup>, by projecting evil outside ourselves, and to dissociate ourselves from our own physiological inner environment by projecting the origins and causes of our illnesses onto the outside world. In doing so, we deprive ourselves of the ability to learn how to understand and integrate the various parts of our own psyche, which is an indispensable first step for us to be able to live in harmony with ourselves as well as with others. We also deprive ourselves of the ability to take charge of our own health by learning and applying the rules of a healthy life – nutrition, breathing, detoxification, etc. Because we neither understand nor acknowledge our role in maintaining (and even creating) evil and disease, our efforts in fighting them not only fail, but actually yield the opposite result: We keep strengthening what we are trying to destroy.

Having exteriorized evil and sickness, Judeo-Christian culture does the same with their opposites; thus goodness and health must also have their origins outside human agency. Without the aid of a God/Savior, a priest/doctor, hosts/pills, etc., we are condemned. Left to ourselves, we are weak and fragile, continually at the mercy of temptation, aggressed by our environment, against which we can do nothing by ourselves.

In the religious conception as well as in the medical one, man appears as a child, terrified by the subversive threat of the Devil or by mutinous armies of microbes, and nearly equally frightened by a God hidden in the clouds, whom he must implore for mercy and whose rules he must follow, be they clerical or medical, so that he may stay in the graces of His representatives on earth.

Even so, as I am writing these lines, there are groups of people who are taking charge of themselves and their health. Their maturity is such that they are blazing a trail toward autonomy, taking personal responsibility for their own health, confronting their fears, and integrating the scattered fragments of their psyche, be these fragments simply repressed or projected onto the outside.

In this vision of health, the idea of the exterior origin of disease is replaced by the notion of a holistic “medicine of terrain”<sup>7</sup>; pathology is said to be the consequence of imbalance. Thus each individual is empowered: His way of life allows or prevents the development of illness. The external environment may serve as a stimulus to catalyze the appearance of the pathology, but it is not considered to be its original cause.

A similar evolution has taken place in the religious and spiritual understanding of evil. More and more books are written and seminars held explaining the nature (and, for some people, even the existence) of our shadow: how we can learn to accept it, integrate it, and work with it. In this way, evil is no longer seen as simply a foreign thing whose existence is independent of us. It is more and more understood as the result of an internal imbalance or, more precisely, a division (*diabolein*, in Greek, which gave *diable* (the Devil); in French, means *to divide*). In reality, the evil that we project outside ourselves, onto scapegoats, is a part of us from which we have dissociated ourselves, a part which we don’t want to look at and thus becomes all the more harmful.

Thus, a new vision is supplanting the dichotomous system of good/bad, health/sickness, interior/exterior that has prevailed for centuries of Western civilization. This new vision is a unified – but not uniform – one, in which individuals are no longer isolated, cut off from everyone and everything else, but taking an active role in their health, their salvation, and their very lives.

### ***Baptism / Vaccination***

---

<sup>6</sup> It was C. G. Jung who labeled the word “shadow” to describe the dark side inherent in everyone’s psyche.

<sup>7</sup> The French idea of “*médecine de terrain*,” literally “ground medicine,” a fundamental concept in natural medicine, is derived from agriculture. A good farmer, just by looking at what sort of plants grow spontaneously in a field, may know what minerals and natural chemicals, including trace-elements, are present or missing in the ground. Similarly, in “ground medicine” it is considered that a given pathology, or a given microbe or virus, may only develop or appear in a “ground” – our inner physiological environment – that presents a specific imbalance. “The virus is nothing, the ground is everything,” were the last words of famous physician Claude Bernard on his death bed.

Given the omnipresence of evil and of original sin in traditional Christianity, baptism holds a primary place: It is the ritual that ensures divine protection, the remission of sins, and seals the entry of the sinner in the bosom of the Church. Anyone who is not baptized is lost, condemned to hell, or at least to **limbo in Roman Catholicism**. This is why baptism usually takes place only days after birth. So strong was this conviction regarding baptism that, in an era not very far removed from our own, there were known cases of priests inserting a crucifix into the vagina of a pregnant woman, so that an unborn child whose life was in danger would be baptized *in utero*.

In an analogous fashion, vaccination is the central ritualistic act by which children, in modern times, are assured of the good graces of the Medical Church, and of its protection against illnesses. According to the catechism of this faith, anyone who is not vaccinated is exposed to all manners of dangers, to the extent that vaccination is now compulsory in many countries. Parents who attempt to refuse to have their children subjected to the injections can be prosecuted as criminals. The characteristic marks of the first vaccination, which remain with the children long into their adult lives, function as a kind of protective seal attesting their medical affiliation. Looked at objectively, from an anthropological point of view, this scarring of each member of the population does not seem very far different from the ritualistic tattooing of people in primitive tribal cultures.

We should also note that vaccination is one of the rare medical procedures which takes place on a massive scale, in a highly impersonal manner, often in schools – this underscores its character as a collective ritual.

In the time of the Crusades, a priest would bless entire armies before they went off to fight the infidels. Similarly, American soldiers fighting in the Gulf War received their vaccination cocktails before going off to fight the “Devil Saddam.”

Fear plays an important role in both the baptism and the vaccination rituals:

- fear of being condemned to hell, fear of being rejected (excommunicated) by the Church, fear of not being saved;
- and similarly, fear of falling ill, fear of not being cured, fear of being written off as a hopeless case by the medical establishment, and fear of being excluded from welfare benefits (as is the case in France, for people refusing vaccines).

In both cases the individual is convinced that there is nothing he can do himself to ensure his own salvation or health. His only recourse is to put his fate in the hands of another, and in doing so, garner the protection of the society.

Of course, not only are vaccinations not a panacea, nor do they provide absolute protection against illnesses, nor even are they the only way people can protect themselves against disease. In reality, vaccinations themselves present many dangers that have been noted in various books and specialized magazines, and which are just now beginning to see the light, after years of suppression imposed by medical authorities. Many strands of thought from natural medicine (homeopathy being one example) suspect vaccinations, especially as they are begun so early in life, to be responsible for provoking perturbations in people’s immune systems, significant enough to make them more vulnerable to disease later on in life.

Again, my goal here is not to write a polemic on the dangers of vaccinations. I am merely trying to bring into focus the religious dynamic which characterizes their use, whether or not they are effective, because they are administered in a systematic manner that has become effectively mandatory. As always happens when religious fervor interferes with objective science, this dynamic has obviously prevented an impartial study of the undesirable effects of vaccination. Thus, opinions and studies questioning the ubiquitous use of vaccines, while undertaken by respected and numerous physicians, are repressed by the mainstream media and can only be found in rare books and specialized magazines.

In France, particularly, vaccination is not an option, a procedure among others that a patient can accept or reject as he sees fit. It is a *dogma*, which, if questioned even in a purely theoretical manner, arouses such intense fear and such violent negative reactions that it is, in effect, impossible to broach the subject or to have a serious and reasonably argued conversation about it.

These reactions are totally understandable when one keeps in mind that the belief in vaccines functions unconsciously as a security blanket – though the security it affords is a false one – for a population kept in a childish mind-set by the fear of becoming sick. Religious experts know that it is absurd to destroy an idol when those who believe in it have not evolved to the point that their faith has transcended their need for it. Similarly, as long as vaccination is invested with a religious

character, the idea of questioning it will come up against the strongest opposition, no matter how solid the medical evidence amassed against it might be. For this reason, as well as to avoid imposing on others behaviors for which they are not ready, it is indispensable to start by awakening a greater awareness of the unconscious dynamics under which we still labor. When a person faces his fears head-on and begins to become psychically mature, his health and his life will ineluctably begin to transform accordingly.

Another revealing point is the parallels that can be seen between the huge vaccination campaigns undertaken by the World Health Organization (WHO) and the equally massive evangelization crusades carried out by the Catholic Church all over the world. Both kinds of campaigns are motivated by the same depth of faith, the same desire to do good and, no doubt, the same wish to protect pure populations from the contagion that others might well be the carriers of, whether this contamination be in the form of false beliefs or noxious viruses. The gods of other religions were considered “false,” “primitive,” “pagan,” and thus incapable of conferring protection and salvation on those who revered them. Similarly, the medical knowledge of other countries and peoples is often dismissed as “superstition” or “old wives’ tales” etc. It is only very recently that the medical establishment has begun (often out of sheer economic interest) to grant validity to some of the various types of “ethnic” or “non-traditional” medicines, many of which have already been duly plundered, while their patents have been awarded to multinational corporations.

### *The Priest / The Doctor*

It is here that the parallels are most clear. Beyond the most superficial aspects of the resemblance (the cassock/the white coat; the impersonal titles of Father/Doctor), it is above all in the relationship between the priest-parishioner/doctor-patient that a remarkable similitude is displayed.

The priest is the indispensable intermediary between the ordinary man and the divine. Similarly, the doctor is the intermediary between the patient and the secret practices of medical science. Both priests and doctors have long used Latin as their private language in order to limit access of the laity to their knowledge. They both compel a strong respect and so impose a certain fear, because they hold a kind of a power over others: power to judge a man’s soul in one case, or to diagnose his body in the other; power to prescribe penance or treatments; authority to absolve or to heal; right to issue life/death sentences.

As always when a power structure exists, the relationship is based on dependence and fear. The believer, like the patient, is kept in a childish position toward the paternal priest or doctor. Let us also observe the custom, as incongruous as it is revealing, of using the title “Father” **in the Catholic Church** in addressing a member of the clergy, particularly given that they are celibate. Indeed, the doctor of today, just as the priest of old, has no wish for his patients/members of his flock to free themselves from the need of his tutelage: He heals them, but he does not educate them in the ways of healing. He does not teach them the foundations of a healthy life.

There is also an element of *inaccessibility* in the knowledge that both the priest and the doctor possess, each of which has the semblance of pertaining to another world. The layman is not allowed to discuss or argue; he can but obey. Address a doctor as “Mr.,” discuss your case with him as you might your car with your mechanic, express your feelings or – worse yet – your doubts, and note the reactions that such an attitude will provoke in him: You will be considered a miscreant [literally: a non-believer]. If you go so far as to suggest the use of non-conventional therapies, you will be branded a heretic. But, in fact, the doctor’s aura is still such that very few people would ever dare to even think of adopting such a questioning attitude with regard to the ever-authoritative doctor.

The dissemination of medical knowledge, the multiplicity of books and review journals on health and the various forms of medical knowledge in the past few decades have contributed to the somewhat changed relationship between doctor and patient that is now observable in varying degrees. There is also a movement to restore a sense of connection between soul and body that is becoming more pronounced. On the other hand, the appearance of new technologies (cloning, genetic engineering, etc.) is no doubt counterbalancing this evolution. It will make more of the population believe that only very advanced and expensive technological remedies will be able to guarantee the collective health – techniques that are, by their very construction, inaccessible to the laity, who can only hand over the responsibility for their use to the “experts.”

To put such astronomical sums of money into the design of this high-tech equipment, rather than spend these amounts for health education and effective prevention of disease, suggests that the true aim of the health lobby is more the mastery of life than to foster people’s ability to take charge of

their health. I will discuss the possible reasons why this should be so in the chapter entitled “Medicine Messianic and Faustian.”

### ***The Church and Its Vows / The Medical Association and the Hippocratic Oath***

It is also interesting to note the parallels that exist between the Roman Catholic Church and the medical association<sup>8</sup>. These two structures are alike not only in that they are both strongly hierarchical and greatly lack transparency, but also in that they both have their own courts and justice. From heresy to excommunication, to the suspension of priests, and of course – more crudely – from the Crusades to burnings at the stake, the Church has for centuries relied upon its own judicial and punitive mechanisms, whether the malefactor was a pagan, a heretic, a faithful parishioner, or one of their own clerks. In the same way, the medical association – which in France, for instance, still bears the name of “Order of Physicians,” which sounds as a medieval religious denomination – is well known for the fervor with which it still pursues “heresy” in its ranks, under the new name of “charlatanism.”

The vows that a priest intones, like the Hippocratic Oath that a physician pronounces, confer a sacred duty to the accepted calling. In light of the vast wealth of the Church, and of the numerous iatrogenic diseases caused by the huge numbers of new drugs each year, we should wonder whether that is compatible with the vow of poverty expected of Christ’s servants and the principle *primum non nocere*<sup>9</sup> supposed to guide physicians.

State within the State, the Church has long been very close to the centers of political power over which – in France at least, up until the reign of Napoleon – it has always exercised a considerable influence for motives that had little to do with religion, as everyone knows. The Church did not gain its considerable fortunes by making a collection after mass, nor has it contributed particularly to alleviating misery in the world. Since Pasteur, who, remember, was a personal friend of the Emperor, medicine has largely taken the place of the Church, at the right hand, if you will, of the State, as a result of the secularization of society. It is impossible for any thinking person in France to be ignorant of the politico-medical influence of the Pasteur-Mérieux Institute, any more than he could be unaware of the huge sums transiting through the medico-pharmaceutical industry.

The structures have changed, but the fundamental dynamics have not; the goals of the game are still power, control over the population, and financial gain.

A quick reminder: As I made clear in the introduction, I do not believe that the people who function in these ways, be they in the Church or in the field of medicine, do so out of an intentional desire to harm or because they are particularly power-hungry (allowing that some people may in fact be that way). Rather, I believe that most of society is still under the influence of primitive fears and superstitions which surreptitiously influence many areas of human endeavor. Authorities in these areas are just as affected by these fears as those they exercise power over. Indeed, a person who is free from fear is usually free as well from the need to exercise power over his fellow human. Dominant or dominated, both are playing the same game, whose rules are dictated by power and fear.

### ***Heresy / Charlatanism***

To the injunction “Outside the Catholic Church there is no salvation!” corresponds, ever since Pasteur, the equivalent motto: “Outside modern medicine, there is no health!” The Church of Rome saw in Jesus the unique Son of God. As a consequence of that belief, it considered itself the only way to salvation for all mankind, regardless of all other religions, which were considered primitive, pagan, or heretical. Today, in the same manner, Pasteurian medicine considers itself as alone able to bring health to men, like the only rational truth. Any efficacy due to any other form of medicine is denigrated as the result of the credulity of the patient, of charlatanism, of the placebo effect, etc.<sup>10</sup>

Heresy, then, like charlatanism, consists not in putting the salvation or health of another in peril, in most cases, but in daring to look for it by other means, whether it be through different prayers or other medicines than those officially allowed. Little matters that these other prayers or medicines

---

<sup>8</sup> The author’s observations are based on the French Medical Association called “L’Ordre des Médecins” (Translator’s note).

<sup>9</sup> “First, do no harm.”

<sup>10</sup> In recent years there has been a surge of interest in ethnic or traditional medicine, but in general the tendency has continued.

might be more efficacious or even more appropriate to a particular culture or to the aspirations and desires of the people using them.

Having said that, it must be admitted that there do exist real charlatans, crooks, and swindlers in medicine – as there are in any other field. Of that there is no doubt. But it is equally doubtless that numerous therapies are not officially recognized, while their effectiveness is attested to by competent authorities, and therefore are subject to mistrust and questioning that borders on the Inquisition. To the single-minded mainstream thinking corresponds a single-minded medicine that tolerates no dissent. True, doctors who dissent from the orthodoxy are not burned at the stake, nowadays. They are, however, often “burned” or even snuffed out quite effectively: Defamation, fines, jail sentences, loss of freedom to practice or loss of funding (which is often the same thing) are just some of the consequences of heterodoxy that are easy to come by and very hard to break free from.

That many so-called “rationally made” medical decisions are in fact quite arbitrary is clear from the fact that the very same therapies might be forbidden in one country, tolerated in another, and paid for by the Social Security or private health-care providers in a third! For instance, some compulsory vaccines in France are forbidden in Nordic countries and optional in Switzerland. Some complementary therapies that are becoming more mainstream, like acupuncture, osteopathy, and chiropractic, are recognized and paid for by official entities in several countries, while they are still utterly ridiculed and condemned in others. Considerations such as these fairly compel us to question modern medicine’s demand that it be considered a science, since the laws of physics and chemistry, as a comparison, are the same in all latitudes and do not vary with cultures.

Furthermore, a truly objective scientific mind-set would require those who doubt the efficacy of alternative therapies to set up controlled experiments to study their effects and compare them with standard therapies, without having decided *a priori* against the former, merely on the basis of their not being in conformity with the medical dogma presently believed in.

Therein lies another point that underlines the religious dynamic that influences medicine in all its aspects, notwithstanding the scientific aspect in which it strives to clothe itself. Neither physics nor chemistry has the need for “Orders” or religious-like associations to defend those who practice those sciences, neither are they required to take vows or utter oaths. Their experiments and results are freely discussed, without causing fanatical reactions.

In closing this section, I will note that one of the prime motivations of those who fostered the current amalgam between natural medicines and religious cults is to allow the medical powers to demonize the practitioners of alternative medicines, often without regard to even their basic civil rights. Nothing could better illustrate the persistence of the same old religious phobias under the most modern of medical garb.

### ***Salvation and Life Everlasting / Health and Physical Immortality***

Here we have reached the foundation stone of both Christianity and medicine, that is to say, the question of death. Most human religions, if not all, are answers to the problem of death, which for the most part, haunts all *mortals*(!). If you remove the fear of death, you supplant the essential need for belief, no matter what form this belief itself may take. The promise of a higher realm, or of a life after this one, and not only that, but the hope of a much better life, a real paradise, with no illness or misery, and with just compensation for all the injustices of this world – that is the bread and butter of the Christian faith. Not coincidentally, it is also the promise that ecclesiastical authorities in every age have used to control all aspects of the lives of individuals or even of entire populations, and to justify interfering in their private (and sexual) lives, as with the Inquisition and the Crusades.

The Church gave its followers the hope of salvation and eternal life, the faith in a paradise-to-come that would vindicate the faithful for all the wrongs that attend this “vale of tears” – but only for those who follow its commands. This reward is so valuable that whatever sacrifices the Church asked in return for the guarantee of it could not possibly be too costly. After all, what is a human life compared to eternity?

Modern medicine, having substituted the worship of the body to that of the spirit, also cultivates in its followers a barely concealed ambition to conquer illness and death. Quite naturally, it has replaced the goal of spiritual salvation and its attendant hypothesis of an eternal life-after-death with a promise of perfect health by prescription, and the hope, if not for physical immortality *per se*, then at least for a life infinitely lengthened. The number of people queuing up already to have their bodies cryogenically frozen after they die bears witness to this. This delirious hope is kept alive by



some would-be imitators of Dr. Frankenstein, on the basis of the rather uncertain results of some experiments in various fields such as organ transplant and genetic engineering (cloning, storage of organs, etc.). The present lack of hindsight about these methods (they are too recent), leaves me very thoughtful as to the kind of hopes that many people have about them. Especially since behind the so-called “miraculous” results which the media enjoy hyping, unexpected and undesired secondary effects emerge sooner or later, as almost always happens when dealing with life and living beings.

But it doesn't matter. For many people, now, paradise is no longer in some unreachable Eden, it is almost at hand. Soon we will live eternally on earth, thanks to medical progress, surrounded with animal and vegetable species remade and corrected, or even created out of whole cloth in the laboratory by the human genius. God, if He ever did exist, barely managed a rough sketch of his Creation, but luckily we are here to set things right.

If heaven was worth so many sufferings and privations, it makes sense that a terrestrial paradise should also have its price: medical errors (the scope of which, given the means available to modern medicine, tend to be considerable, viz.: mad-cow disease, AIDS-contaminated blood transfusions, etc.), experimentation on animals and humans, and – if we also include biotechnology – the denaturing of animal and vegetable species themselves.

In my opinion, moreover, the way in which medicine manages to excuse its errors – and even to coach society into tolerating its failures – best reveals its religious dimension and the protective aura that surrounds it. In no other area would we stand for a margin of error so large as is tolerated in regard to the medical sciences. In no other domain would we allow lines of research to continue that had proven, in the long term, to have such mixed results. Many vaccines, for example, are just now demonstrating their limits and dangers, dangers that were predicted by contemporaries of Pasteur. The overuse of antibiotics is causing strains of antibiotic-resistant bacteria. New illnesses proliferate. And the costs of health-care have risen to undreamed-of heights. It is true, of course, that for the most part these troublesome realities are veiled from public view by a communication embargo. However, it is likely that if the public were in fact informed of all these errors, the messianic dimension of modern medicine would probably sanctify them in their eyes.

The basic message that modern medical science is trying to get out to the faithful, by way of the various media, is manifold: They would have us believe that we are living longer and better, that the fight against cancer is progressing, that soon they will be able to control life itself and hold death at bay, even if data and statistics need to be twisted or made up to back up this *credo*. Like many religious beliefs, medical beliefs serve to protect us from our fear of death, rather than to teach us to learn to look it squarely in the face and accept it, an indispensable process if one actually wants to live a fully human life. Western medicine denies death, because for medicine, death is a *failure*. Instead, the medical community speaks of cloning, genetic engineering, organ transplants, etc. Even though some progress has been achieved in recent years, the subject of death remains largely taboo. The medical staff prolongs indefinitely the lives of people who live in vegetative states, thus artificially inflating the longevity statistics, statistics that take no account of the quality of life of those treated in such a manner. Death is not really vanquished; it is merely painted over, hidden, denied. And the religion of medicine is only made possible by the belief – sustained by the media – that one day, medicine will get the better of death.

Thus the fear of death is the cement which binds the individual to the doctor as it previously bound him to the priest, in a primary relation of dependence.

### ***Sins, Confession, Repentance / Bad Health Habits, Consultation, Treatment***

Since the Church became an instrument of control of the masses, kept under its benevolent surveillance, its practices have aimed more at maintaining the faithful in this dependent relationship than at helping them find their way to their own interior liberation. The institution of the confession is an eloquent example of this. By demanding of the faithful that they confess their sins regularly, and by granting absolution in exchange for what need only be a superficial exercise in repentance (for example the repetition of some number of “Our Father’s,” – or worse but more significant for our purposes – the selling of indulgences), the Church clearly indicated that her aim was less the elevation of the souls of her flock than the supervision and control of their earthly lives (even to the extent of the most intimate of details), and the increase of its own financial gain. The sinner was thus encouraged to continue to live in his sinful state, to have as many bites at sin as he might want, since his salvation was anyway ensured by the local clergy, in exchange of a few prayers or some glittering cash.

The same relationship of co-dependence was then established between the doctor and his patient. Regular consultations take the place of confession. Their goal, like the latter, is not to give us the means to take charge of our own health (by teaching us, in the present case, the basics of prevention and of a healthy way of life, for example<sup>11</sup>). It is rather to make us dependent on an external authority – an authority just as dependent on the patients it rules over. Here, as in the world of the Catholic Church, we are encouraged to continue to live in a state of unconscious heedlessness, convinced that medicine will be there to fix whatever we might break, in exchange for some money, but mostly without any effort. “Slim down without effort”; “Look younger without work”; and “Be in perfect shape with no effort” – magazines are full of advertisements of this sort, which encourage irresponsibility and infantilism in each of us. The results are well-known: So-called “health”-care costs have become atmospheric, iatrogenic<sup>12</sup> and civilization diseases have multiplied, the quality of life for many has declined, new and unexplained pathologies have appeared, and new, undesirable side effects of known drugs are reported daily, etc. And with each new problem the medical establishment says that a new pill, a new technology, or a new “medical miracle,” *this time* – no fail! – will arrange everything and finally make available to us all this good health that, oddly enough, seems to move just a bit further off every time we get close to it. ...

I could methodically persevere in laying out each of the parallels between the Christian and the medical religions, notably the following:

The Latin Mass	Medical Jargon (previously also Latin)
The Host	Pills, Tablets
The Cassock	The White Coat
The Nuns	The Nurses
Donations to the Church	Donations to Medical Research
Etc.	

I think the examples presented in this chapter will do to illustrate my thesis. Readers for whom this approach seems reasonable will have no trouble in pursuing this comparison themselves, using other characteristics that the two institutions share.

---

<sup>11</sup> Not included in this group are homeopaths and naturopaths, for example, who make it a point to teach their patients how to take charge of their own health.

<sup>12</sup> Caused by drugs.

## Chapter 3

### Medicine Messianic and Faustian

Modern medicine has thus become the collective religion of modern times. It is a kind of a secular “meta-religion,” one whose followers, who number in the hundreds of millions, are simultaneously members of various other religions. Medicine has in its deck – it’s true – quite a powerful trump card: What the catechisms of most other religions guarantee for the after-life, modern medicine gives hope for in this very life. Heaven on earth is for tomorrow; by virtue of cloning, genetic engineering, and organ transplants, people will live indefinitely, sickness will be vanquished, and with it its handmaiden, suffering. Also gone will be chance, bad luck, and the unforeseen; it will be possible to choose the physical and psychological characteristics of our children before they are conceived, and we will be able to have them at any age that is convenient. Also, it will be possible to reshape our body as we want. And we will be surrounded by species of flora and fauna genetically modified to suit our needs (and duly patented, of course), while the original ones will be confined to special reserves if they’re lucky... or museums if they’re not. Welcome to the “Brave New World”!

Of course, the picture I’ve drawn is a caricature, and one could certainly argue that medicine has never (overtly, at least) promised a scene such as the one described above. That is true, but it is just as true that the desire for it is nonetheless present, and even tacitly encouraged. This is demonstrated, again, by the number of people being cryogenically frozen after their death, or perhaps more prosaically but bespeaking a larger cultural influence, by the number of sci-fi and futuristic films that reflect the aspirations of our generation. There are innumerable plots that depend on either the hero or his adversary awakening from a deep-freeze some ten or twenty years after he went in, to wreak havoc or to prevent the bad guys from taking over the world.

“*He who pretends to be an angel ends up behaving like a beast*” says a French proverb. And in a similar fashion, it seems that the Faustian myth is playing itself out under our very noses. For over a century, medicine and the life sciences have sold (or at least *lost*) their soul and been trying to become masters of life itself, while simultaneously denying any spiritual or sacred dimension to life. After all, what need is there for spirituality when the perspective of an indefinite physical life span seems so close, now? Not only has the doctor taken the place of the priest, he now wants to take that of the Creator Himself<sup>13</sup>, to acquire omnipotence over life and to mold it according to his whims.

According to Christian mythology, the archangel Lucifer (“he who brings light”) fell from heaven because of his pride: He believed himself to be equal to the Creator. One can hardly fail to notice the resemblance between this symbolic story and what we are witnessing today. There seems to me to be quite a bit of pride in the idea that man, thanks to the sole light of science, will become absolute master of life, behaving as he does – that is to say, with no respect for life.<sup>14</sup> The parodies of ethical reflection which characterize public debates about essential topics such as infertility treatments, abortion, euthanasia, genetic engineering, etc., emphasize above all the moral disarray in which our culture finds itself. They also reveal how impossible it is for a civilization that denies all dimensions of existence but the material one – and which does not see the unity of all living things – to find anything upon which to anchor its drifting ethical vessel.

Let us open our eyes.

For a century now, the scientific and medical “miracles” of one day become the *mirages* of the next day; the deplorable state of health of mankind, as well as the poor ecological state of the planet, testify to that truth. Whether the issue is vaccines, antibiotics, or their equivalents in agriculture, we find day after day that a more serious reversal and worse problems than before follow each brief victory won against nature. New, more deadly forms of tuberculosis, cholera, malaria, etc. have made their appearances. Resistance to viruses and bacteria has increased, just as pests in

---

<sup>13</sup> My use of this term is to be understood as consistent with the parallels I have been describing in these pages; my use of it does not imply any particular position with regard to the existence of a Creator *per se*. As far as this study is concerned, the issue is not whether or not there exists a Creator in the biblical sense, but only the effects of that belief; a myth can have profound effects on members of society whether or not they believe in it.

<sup>14</sup> I wish to make clear that I do not disapprove of the kind of ambition to gain knowledge and mastery which inspires research, any more than I reject genetic engineering or biotechnology; I only deplore *the spirit in which* these researches are carried out. Our intention is what makes a tool useful or dangerous.

agriculture gain resistance to each new product created to fight them. Should that surprise us, when working *against* Nature instead of *with* Her?

Following each bad surprise, after each new scandal, researchers prophesy that next time will be *the one* they've been after, the next discovery, the next remedy will give us the solution (the *absolution?*). And when, in turn, that solution reveals its own weaknesses and side-effects – effects oftentimes worse than its short-lived benefits – researchers are already talking up the merits of the next miracle cure. ...

This process is obvious nowadays. They now tell us that the next stage, the next miracle, will be genetic engineering. We are told that genetics will be the savior of us all, it will fix everything, put everything right, cure everything that the previous discoveries were unable to cure, as well as all the unfortunate maladies that are the regrettable consequences of the previous miracle remedies. ... But we can be sure that this new mirage will disappear from view just as all the others have, since the fundamental spirit of the medical community has not changed one bit. And what ugly surprises will we discover as the beautiful mirage fades away?

Like an increasing number of people these days, I think that only personal responsibility at all levels (intellectual, medical, social, spiritual, etc.) can actually bring us what generations of prophets have made us hope from an exterior authority or redeemer, encouraging us to give over our responsibility and to alienate ourselves from our own resources, in his name. I am convinced that as long as medicine keeps its present mind-set, it will no more bring health to the world's population than two millennia of denatured Christianity have managed to bring peace and love to the world.

Rather than being unconsciously religious, and thus becoming the stage of expression of the obscure depths of human consciousness, medicine would highly benefit from consciously including a psychological or spiritual dimension in its practices. Obviously, this cannot be decided from the outside, in an academic or intellectual fashion. It can only be the result of an individual, interior process among the members of the medical profession. Many are already of that mind, as attested to by the numerous medical books and seminars of physicians who live their profession as a **spiritual** calling. Many already see their patients with a much broader and deeper vision than the strictly mechanical and physiological one they were taught. Physicians of this type include the psyche, the spirit (or at least a human dimension) in their practice, whether that takes the form of performing certain rituals,<sup>15</sup> by establishing a loving bond with their patients,<sup>16</sup> or through various other means. The results obtained through these methods, not only in objectively measurable terms, but also in the qualitative arena, such as the quality of the relationship between the doctor and patient, the evolution of the patient in his own journey toward health, etc., seem very promising indeed.

Of course, patients themselves have an important responsibility in assuring that their encounters with their doctor or therapist are of the type and quality that they wish them to be. Patients who learn to take charge of themselves, to know themselves, those who manage to see through the religious mask presently veiling medicine – and who consider their physician as someone who will *help* them to *heal themselves* and to understand the meaning of their illness (rather than as someone endowed with magical powers) – these kinds of patients contribute to the evolution of the therapeutic relationship and of the medical practice toward the best and most respectful forms they can take.

All of us, therefore, share the responsibility of the current situation, as opposed to the belief of those who see on one side the “nasty medico-pharmaceutical lobby” supposed to be only after money and power, and on the other side the “poor exploited patients” or the “brave disciples of alternative medicines” victims of some kind of world conspiracy. The system as it exists today came to be because it fulfilled the needs of the majority. And it perpetuates itself because most people continue to give it their consent, albeit tacit. And the people do consent, because notwithstanding its quite obvious imperfections, this system accomplishes its fundamental religious and psychological functions, by calming the collective fears.

To attack this system, as some people do, does certainly seem to be an act of courage, but unfortunately, I believe it will equally be futile unless one can first defeat the mentality that ensures its perennial existence. If the current system were to disappear for some reason and the mentality behind it were not changed, another system would soon be found to replace it, just as medicine itself

---

<sup>15</sup> See the excellent work on this subject, *Healing Ceremonies*, by Drs. Carl A. Hammerschlag and Howard D. Silverman (Perigee 1997).

<sup>16</sup> Cf. *Medicine and Miracles*, by Bernie Siegel, for example.

filled the void left when the collective religion disappeared. It is not, therefore, “the system” which needs to be changed, but our own internal dynamics, our relationship to ourselves, to our fears, to sickness itself, to the world, since this system is just one of the many and faithful mirrors of these dynamics.

People having performed this transformation are no longer in the system, nor are they in any way “opposed” to that system (since to oppose something, we need be at the same level as that which we are fighting); these persons freely manage their lives and their health. They respect those who cure themselves differently from how they do, including those who are still in need of the current established medical system. Any attempt to “force” someone to change – a contradiction in terms – will lead to results opposite those expected. It is much more productive, and more respectful of others, to share with those who are inclined to listen, or who ask for it, the knowledge, the means and methods that allow us to progress on the road to individual responsibility, autonomy, and independence.

## Chapter 4

### The Eternal Recurrence of Atavistic Fears

I have suggested in these pages that a “religious field” is at work in medicine and research, and that like an invisible magnetic field, it orients the functioning thereof, quite beyond any rationality. This field, we have seen, consists of profound beliefs whose purpose is to calm fears, fears so old that their origin is lost in the mists of time, fears which do not cease to prey upon our so-called “rational” and “objective” activities until we individually decide to confront them. One can find traces of this field not only in the medical field, which is the most notable example, but also in various other domains, in politics<sup>17</sup>, in philosophy, even fleetingly in the arts or the economy.

Going a bit further with this approach, one might say that the Christian religion, in the present form that we know it, is itself the hybrid result of the original message of Christ overlaid with the primitive fears of men: fear of death, fear of suffering, fear of the unknown, fear of judgment, of exclusion, including fear of life itself. Indeed, these fears have modeled ancient superstitions, and then the earliest forms of religions, just as they’ve ended up being mixed with the teachings of various prophets, thus distorting them.

This “denaturing” seems to me particularly obvious with regard to the teachings of Christ, which were probably distorted right at their start, just as Nietzsche, in his inimitable eloquence, suggested in his much misunderstood “*Antichrist*.” For Nietzsche, the “good news” brought by Jesus was the disappearance of the idea of fault and of guilt;<sup>18</sup> the “good news” is also the gift of love, the total acceptance of the present life, including an unjust death. Conversely, the Christian religion is based on the idea of guilt, fear, judgment, and punishment. Nietzsche made a supposition that deserves reflection: According to him, the first Christians would not have understood the true meaning of Jesus’ death, and would have interpreted this death in light of their own fears and traditional teachings.<sup>19</sup> He therefore named “Dyspel” (bad news) what they made of Jesus’ teaching by projecting onto his death the pagan concept of the expiatory sacrifice of the innocent as a way to atone for the community.<sup>20</sup> For Nietzsche then, up to now, there has been only one true Christian: Jesus himself, for he alone was able to overcome his fears and to experience real love. This hypothesis seems to be disturbing enough to deserve, in my mind, more than either an emotional rejection or a superficial approval.

---

<sup>17</sup> See, for example, *Totalitarian America*, by Michel Brugnon-Mordan (Editions Favre), which describes the religious influence on American politics.

<sup>18</sup> “In the whole psychology of the ‘Gospels’ the concepts of guilt and punishment are lacking, and so is that of reward. ‘Sin,’ which means anything that puts a distance between God and man, is abolished – this is precisely the ‘glad tidings.’ Eternal bliss is not merely promised, nor is it bound up with conditions: it is conceived as the only reality – what remains consists merely of signs useful in speaking of it” (Excerpt 33), *The Antichrist*, Friedrich Nietzsche, translation by H. L. Mencken.

<sup>19</sup> “Obviously, the little community had not understood what was precisely the most important thing of all: the example offered by this way of dying, the freedom from and superiority to every feeling of resentment – a plain indication of how little he was understood at all! All that Jesus could hope to accomplish by his death, in itself, was to offer the strongest possible proof, or example, of his teachings in the most public manner. But his disciples were very far from forgiving his death – though to have done so would have accorded with the Gospels in the highest degree; and neither were they prepared to offer themselves, with gentle and serene calmness of heart, for a similar death... On the contrary, it was precisely the most unevangelical of feelings, revenge, that now possessed them. It seemed impossible that the cause should perish with his death: ‘recompense’ and ‘judgment’ became necessary (...) Once more the popular belief in the coming of a messiah appeared in the foreground; attention was riveted upon an historical moment: the ‘kingdom of God’ is to come, with judgment upon his enemies...But in all this there was a wholesale misunderstanding: imagine the ‘kingdom of God’ as a last act, as a mere promise! The Gospels had been, in fact, the incarnation, the fulfillment, the realization of this ‘kingdom of God’” (Excerpt 40), *Ibid*.

<sup>20</sup> “And from that time onward an absurd problem offered itself: ‘how could God allow it!’ To which the deranged reason of the little community formulated an answer that was terrifying in its absurdity: God gave his son as a sacrifice for the forgiveness of sins. At once there was an end of the gospels! Sacrifice for sin, and in its most obnoxious and barbarous form: sacrifice of the innocent for the sins of the guilty! What appalling paganism! – Jesus himself had done away with the very concept of ‘guilt,’ he denied that there was any gulf fixed between God and man; he lived this unity between God and man, and that was precisely his ‘glad tidings’...And not as a mere privilege!” (Excerpt 41), *Ibid*.

So, we now see three levels one upon the other, in each of us:

1. The fundamental kernel is made up of the **basic fears** of the human being, which are related to his existence on this planet, his suffering, his death, etc.

2. In order to protect himself from these fears, the individual overlays them with a **layer of beliefs** whose aim is to appease his fears, lest he be able to dispel them with the light of knowledge. Thus, our beliefs dress up our fears, giving them different guises in order to make them more acceptable to us. However, beliefs do not solve anything, and under these guises, fears continue to fester.

3. Finally, in our own time, when the need to know has replaced the need to believe, and science taken the place of religion, an **intellectual varnish** is used to try to justify our beliefs rationally. This, as noted above, is merely giving them a different aspect without changing their basic substance.

In the light of these **three levels**, the sacrosanct “freedom of thinking” seems a sad delusion. Because there can be no liberty of thought without the liberty of belief. And there is no true liberty of belief for those who are enslaved to their fears. Beliefs limit the field wherein thought can occur; they form an invisible magnetic screen, like the one that protects planets from enemies in the movie *Star Wars*. Those who manage to escape the pull of this powerful field disturb those still trapped by its power: This was in fact the case with Nietzsche, the audacity of whose thinking still shocks even today.

The emotions, angers, indignation, and passions that appear as soon as disturbing ideas are broached – not only in medicine, but in all intellectual fields – are usually indications of this invisible “wall of belief” which limits the incursions of thoughts into the unknown. It is said that “thoughts have wings,” meaning they can fly very far and explore unexplored territories. However, in order for them to do that, we must first free them from the roots that hold them in the most obscure depths of our fears.

As long as these core fears continue to drive mankind like an unseen motor, both our intellectual faculties and our imagination will remain far below their actual capacity, enslaved to the overriding task of guaranteeing our psychological security.

According to numerous spiritual traditions, this interference of human activity caused by the obscure depths of the human psyche cannot end until each individual, through his own interior work, transforms his atavistic fears by achieving integration with the shadow part of himself (as opposed to merely projecting it onto someone else); which is to say, until each person realizes his own mature spiritual identity. Since it is rare enough to find individual persons who have achieved this state, it should come as no surprise that no human society has been known to have attained it on a collective scale. Thus, in most countries of the globe, the collective behavior remains, for the moment, strongly influenced by the game that these dark forces of the human mind play<sup>21</sup>. This game is indeed the cause of wars, religious and racial conflicts, wherein the enemy, portrayed as “possessed,” is merely used as an expiatory screen for the darkest collective projections.

---

<sup>21</sup> The French sociologist Jean-Noël Kapferer has illustrated this phenomenon with regard to rumors, in his classic *Rumors* (Editions Points, Actuel), by showing how the same fears constantly resurface, from one century to the next. “Great rumors never die. Their flame flickers low for a while, like an inactive volcano, to reawaken another day. But also they can change; no one knows where the next rumor is going to show up, or whether it will be just as it had been or in some way modified.” The return of the rumor reflects how lasting – if not omnipresent – a fear can be in our whole country...The very idea of the ‘return of the rumor’ is deceptive: in reality the fears and indefinable anxieties have never left the social body. It is only that their expression has been repressed, redirected, and legitimized.”

## Conclusion

Beyond religion and medicine – not to mention other fields of human activity where one can observe similar misunderstandings – it is clearly the human being (each of us) who is *invited* to free himself from fear: fear that distorts perception, fear that seeks power so as to gain security (or at least beliefs that will give the illusion thereof), and which keeps us from truly loving. Indeed, we are “invited” to free ourselves, not forced: Each one is to be given his own time, rhythm, in which to germinate, incubate, and finally to flower.

Such a change in the way of functioning – or change of paradigm – is already at work. One can find traces of it already in progress in several fields: medicine, education, economy, agriculture, politics, sciences, etc. This change always requires individual transformation: From the state of being a passive victim, the individual moves to that of being a conscious actor, responsible for his own life. At last reconciled with himself, in his totality, he is ready to establish healthy and true relationships with others, with his environment, and with the transcendent dimension.

The old paradigm, based upon fear, used to say:

*“You are weak, you are fragile, you can do nothing by yourself. Leave everything to us. We are the specialists, the experts and the authorities (and we must have your allegiance). Sleep in peace. We will look after everything, and will take care of everything. We will bring you the solution to all your troubles and illnesses.”*

The disastrous state of the world today shows us clearly what consequences following this paradigm have wrought.

The new paradigm affirms, rather:

*“We have within us all that we need. Let us take charge of our lives. Let us develop our full potential. Let us take in hand not only our health and our evolution, but also our human fulfillment: in short, our existence at all levels. Let us read, search, experiment, and above all, take responsibility for ourselves. Nothing but individual conscience and personal transformation pays off.”*

This paradigm carries within itself the kernel of a new humanity that has left its childhood and its fears.



## Postscript

The lessons, methods, and tools that help those willing to learn to know themselves better, to accept the shadow part of themselves, to question their beliefs, to squarely face their fears and learn to transform them are numerous. Various spiritual doctrines provide the keys. Recent knowledge from modern psychology, which illuminates the functioning of the mind, also provides elements of information of great value in doing this kind of work.

In my own (ongoing) development, I have appreciated several methods and works more than others, notably those which demand of the reader or student no dedication to any particular dogma, belief, or specific vision of the world.

These methods have contributed to allowing me to begin to transform my relationship with myself and with others. I think they will be accessible to many others. There are of course numerous other books of which I have no knowledge. The brief selection presented below is thus necessarily subjective and very incomplete. Its only purpose is to offer a choice of references with which to begin.

- *No Chance Encounter: meeting yourself in others*  
Kay Pollack, Findhorn Press.
- *Nonviolent Communication: a language of compassion*  
Marshall Rosenberg, PuddleDancer Press.
- *The Four Agreements*  
Don Miguel Ruiz, Amber-Allen Publ.
- *Mastery of Love*  
Don Miguel Ruiz, Amber-Allen Publ.
- *Love is letting go of fear*  
Gerald Jampolsky, Celestial Arts.
- *How to believe in nothing and set yourself free*  
Michael Misita, Valley of the Sun Publ.
- *The Seven Habits of Highly Effective People*  
Stephen R. Covey, Simon & Schuster