



## **Faith x Healing: The relationship between religion and improved prognosis in palliative care patients**

### **Fé x Cura: A relação entre religião e melhora do prognóstico em pacientes de cuidados paliativos**

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#### **ABSTRACT**

It is well known that coping with chronic diseases has a direct impact on the patient's psychology. In this way, faith, whether religious or not, emerges as an ally in the improvement of negative symptoms arising from the patient's vulnerable condition. Studies show that such positivity works as a source of empowerment for patients, giving them hope that the proposed treatment can be effective. To this end, this work seeks to relate the improvement of the cure of physical problems with spiritual help, proposing a discussion between religion and science. The theme will be addressed through reviews of existing literature, as well as films, documentaries, and popular beliefs. This study aims to understand the relationship between believing and the physical and psychological improvement of patients in palliative state.

**Keywords:** Spirituality, Palliative care, Humanized treatment.

#### **1 INTRODUCTION**

Before starting a discussion about the proposed theme, it is necessary to outline the space that the belief in a certain being or thing occupies in the lives of human beings. Faith is not only located in the spiritual plane, it goes beyond this dimension as it implies the well-being of people and influences various aspects of life, thus becoming an object of importance for scientific study.

Given this, what is faith? How can we define something that is subjective to the personal experiences of each being? There is no concrete answer to these questions, but what we can say is that faith is the belief in what cannot be seen materially, as it is put by the Apostle Paul (A BÍBLIA, 2008), author of the Letter to the Hebrews, in chapter 11, verse 11 belonging to the sacred Christian canon, "faith is the firm foundation of things hoped for and the evidence of things not seen".



Reason, a primordial element of science, has become an opponent of faith, since with scientific advances a discussion has arisen to the detriment of the displacement of truth from Theos (God) to anthropos (man), causing a dissociation between believing and rationalizing. However, as one advances in studies, one also observes the importance of balancing the human, physical, psychological, and social dimensions. Thus, it is assumed that not only physiological conditions influence the health/disease process, but also the emotional state has repercussions on the manifestation of the disease. This paradigm is called the biopsychosocial model, which strongly believes that belief is an element to be considered by medicine in the treatment of patients because it is a component of human life. (Pereira, Esther et al.)

The World Health Organization (WHO) defines health as a state of complete physical, mental, and social well-being, and not merely as the absence of disease or infirmity. (WHO, 1946). Thus, the WHO recognizes the importance of mental health and the importance of taking care of well-being and happiness, since the psychological aspect is capable of influencing several other aspects, including physical health. Also according to the WHO, it is known that most mental and physical illnesses are influenced by psychosocial imbalance. Thus, taking into account the difficult access to professional psychological care, many people see religion as a way to remedy this lack for free. (FERNANDES, Vinicius Fagundes et al., 2022).

When seeking support in something as subjective as belief, one must understand its psychosocial influence on everyday life. Since antiquity, it has been documented in books and movies the search by society for alternative methods to science to reduce pain in bad situations, an example of this, we can take the 2nd World War (1929 - 1945), in which religion played an important role in people's lives during conflicts, and many soldiers and civilians found comfort in their faith, as portrayed in the book *The Secret Refuge*. (BOOM, Corrie T., 1971).

Patients in palliative treatment are often in psychological distress, they are based on specific care to relieve and improve physical symptoms, but they know that the disease is incurable. Cancer, for example, has its greatest weight in the perception of the patient and family members, since it produces frustration and hopelessness when facing the lethal reality of this pathology. Thus, by becoming aware of the patient's spiritual nature and valuing this dimension, it provides the patient with comprehensive, humanized, and effective care. (DO NASCIMENTO PIRES, Michelly et al., 2022).

Thus, using this information, this research seeks to relate the improvement of the cure of physical problems with spiritual help, proposing a discussion between religion and science. The theme will be addressed through reviews of existing literature, as well as films, documentaries and



popular beliefs. In this way, we seek to understand if faith really helps in the treatment of patients in a palliative state.

## **2 SPIRITUALITY AND THE HEALTH-DISEASE PROCESS**

The WHO defines palliative care as an approach that provides a better quality of life to patients and their families when facing problems associated with chronic diseases, through the relief or reduction of suffering through measures that treat not only pain, but also other physical, psychosocial and spiritual problems (FLORÊNCIO, Raquel Sampaio et al., 2020).

Comprehensive care for patients and their families considers all dimensions of the human being, since the health-disease process is complex and unique to each being. Spirituality is one of the dimensions to which patients attribute the greatest value, since they use it to remain hopeful and fight against the disease (ROCHA, Leonardo Gotuzzo et al., 2020). Thus, to better understand this dimension, it is important to know some points:

## **3 BRAIN IMPULSES AND STIMULI IN PRAYER**

According to the WHO, faith and prayer have become objects of study for several researchers since 1980, with several studies proving how much physical, mental and biological health is influenced by it. For example, a study conducted by scientists at Harvard Medical School sought to understand how faith and spirituality act on the brain. Imaging tests were used through which the researchers were able to identify a specific brain circuit linked to experiences with belief. The location of this circuit draws attention, since it is centered in the periaqueductal gray (PAG), a region that modulates experiences of pain, altruistic behaviors, fear, and love (MENDONÇA, 2022).

In view of several studies in the area, it is now known that higher levels of religious involvement are positively associated with indicators of psychological well-being, triggering feelings of happiness, positive affection and satisfaction. In this way, spirituality works as a strategy in coping with adverse situations, acting as a source in which patients are strengthened and find comfort, thus helping to believe in the positivity of the treatment and adhere to it (SILVA, Luanna Gabarrão et al., 2020).

## **4 FOLK MEDICINE IN BRAZIL**

The history of medicine is as complex and ancient as the very existence of human beings. Since ancient times, the paths that have defined the paths of contemporary medicine have been



interposed by the elaboration and discovery of methods and knowledge that would guarantee the cure of the sick. Thus, even before defining what a doctor would be, health care was already practiced empirically in the care of oneself and others through popular and superstitious knowledge passed from generation to generation (SILVA, Araci Farias, 2021).

In the Brazilian colonial period, many popular religious and medical practices were put into practice, including blessing. At that time, it was believed that illness was a divine punishment to the detriment of the sins committed by the sick person and that healers can restore harmony between the divine and man. In addition, there was also a shortage of doctors and pharmaceutical products, thus favoring these popular practices (SOUSA, Maria Clara de et al., 2021).

Blessing is practiced, for the most part, by women, predominantly Catholics, who pass on the knowledge and practices from generation to generation, are known by the title of healers or doctors of the people. These people call themselves divine intercessors, who are bearers of gifts granted by the Divine, so they do not place themselves as responsible for the healing itself, but as mediators. For them, healing is only achieved through faith (SOUSA, Maria Clara de et al., 2021).

The rituals take place through prayers and acts of blessings aided by candles, plant branches, and in some cases, teas and natural medicines. Among the practices, divine knowledge transmitted by the connection with the sacred echoes that provide spiritual and mental relief, thus translating an improvement in the affliction caused by the disease (TEIXEIRA, Carolina de Castro et al, 2022).

## **5 PALLIATIVE CARE AND SPIRITUALITY**

Spirituality occupies a relevant space in the daily lives of patients in palliative care, even if there is no clear affiliation to a defined religious belief, patients see in it the relief of pain and suffering. Thus, when combined with palliative treatment, spirituality provides patients with the opportunity to express their feelings, disturbances, and convictions about death, giving them comfort by recognizing the importance of spiritual healing when the chances of physical healing are unlikely (ROCHA, Charles; LEME, Paula, 2023).

The visibility of the importance of humanization of end-of-life care led the Ministry of Health (MoH) to seek to invest in national humanization programs and policies. In the early 2000s, the Ministry of Health implemented the National Program for the Humanization of Hospital Care (PNHAH), which aimed to promote the creation of humanization committees and thus improve the quality of care in health networks (ALVES, Railda, Sabino Fernandes, et al, 2019).



The humanization of health practices is essential for palliative care, since end-of-life care is an area focused on fragile patients, who already carry with them a poor prognosis. In this way, the principles of humanization become a fundamental part of the care of these patients, thus helping to alleviate the anxious symptoms not only of the patient, but also of the family that suffers together (MINAME, Sabrina Carvalho; LEDUC, Vinicius Ribeiro, 2022).

## **6 FINAL THOUGHTS**

In view of the above, the positive influence of belief in the prognosis of the treatment of palliative diseases is evidenced. The need for joint action between palliative care and the humanization of care is highlighted, since the health-disease process, as described, is not restricted only to physical illness, but to the complete set of physical, mental, and social well-being.

Therefore, it is possible to identify that the practice of spirituality is not something recent, but that it has been present since antiquity in the history of the Brazilian people, serving as an ally in popular medicine and also as a comfort to patients in hospital treatment, therefore, this work concludes by affirming the importance of recognizing as an ally the inclusion of spiritual and religious needs as a routine part of palliative treatment.



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