Symbols and Rituals of Healing

Russell S. Blackwelder, MD, MDiv

(Fam Med. 2018;50(1):63-4.)
doi: 10.22454/FamMed.2018.822391

Recently, I had a patient die, which is not an unusual event since I work in a nursing home. The patient’s son was present with her at the time of death—the only family member who wanted to hold vigil at the bedside during his mother’s final hours. Her death was not a shock to anyone, given her advanced Alzheim
er dementia. During the moments after his mother’s last breathe, the son continued to stand on that sacred ground, and the nurses called to inform me that he insisted a doctor perform the pronouncement and confirm death. His greatest fear, which he explained when I went into the room, was that his mother might be buried alive.

In the room, the nurse’s pronouncement had been made, employing the emotionless machinery of the automatic cuff and pulse oximeter. However, alone in a room with a son and his mother’s body, I explained the procedure for confirming death and asked if he wanted to be in the room.

“Oh, yes, it doesn’t bother me; I’d like to watch,” he said assuredly. I proceeded in a manner similar to what I usually do, but this time felt different. As the son watched my every move, I took my stethoscope from my neck and performed the ritual of pronouncement.

While my work is medical at our nursing home, my patients and their families are usually aware that I am also an ordained clergy. They have seen me preach or lead classes on spirituality and medicine in local churches. That work and the frequent overlap is not that different from the work of many physicians, except that there are names to my roles. Ritual and symbol often help define and give meaning to our professional work. I purposely wear my stethoscope around my neck in that setting, not only for convenience, but intentionally so that people know that I am in the role of physician. With my stethoscope taken from around my neck to my hands, I was the doctor. The meaning was in the symbol, and, for the son, the ritual was a means of comfort at the time of his mother’s death.

Similarly, I recently saw a new patient to my practice who switched from her provider after being with him for many years. She was elderly and in clearly failing health, and she knew this. I asked her why she decided to change doctors. She hesitantly stated, “The last time I saw him, he didn’t even listen to me with his stethoscope like he always has.” As we talked, it became clear that this simple oversight represented to my new patient that her doctor had given up on her. In her mind, in the midst of her deteriorating health, the absence of touch—the absence of the stethoscope’s placement on her body—meant her physician had abandoned her. This story of symbolism and ritual—or lack of it—was powerful to her and to me.

The symbols help center the patient, but perhaps even more so, they help center me. The roles of clergy and physician are not that dissimilar. In both roles, I journey with folks in the midst of life’s highest highs and lowest lows. Both roles also have distinct rituals that help define the professions and provide meaning for what I do. Each has symbols that serve to point to something deeper than there are often words to express and connect with an understanding that resides in the deep recesses of the psyche. Just as I developed my pastoral identity, often through the help of symbols, as a medical professional I have also had to develop my physician identity through the use of symbol and ritual.

I wonder if the symbols of medicine are changing. Will the outstanding diagnostician who auscultates, percusses, and has to warm their hands while spending time with the patient and arriving at a narrowed differential endure? Does the storm of technology and all of the clicks on the computer, with its promise of efficiency and communication, compete to be the new bearers of medicine’s

From the Medical University of South Carolina, Charleston, SC.
symbols? While possibly meaningful and helpful at times, I struggle to decide how this impacts my relationship with my patients and my understanding of my own work. The symbols help define what I do and for whom I do it.

The symbols might change during this time of massive upheaval and uncertainty in medicine. The technology might empower me and better equip me. But the symbols must continue to edify my relationship with patients and my own identity as a healer. The symbols are more than just my tools; they also give meaning to what I do, are deeply engrained, and without them I risk losing the trust of those I ultimately serve. In life and in death, the symbols matter.

**CORRESPONDENCE:** Address correspondence to Dr Blackwelder, Medical University of South Carolina, Department of Family Medicine, 9228 Medical Plaza Drive, Charleston, SC 29406. 843-876-7080. Fax: 843-876-7111. blackwr@musc.edu.