

# **Why are we so resistant to holism?**

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Our technologies – so irresistibly convenient – often enter our lives with costs that are more subtle: our more natural senses of personal context, meaning and relationship. Why does this happen? What can we do about it?



*The fatal metaphor of progress, which means leaving things behind us, has utterly obscured the real idea of growth, which means leaving things inside us.*

– GK Chesterton, *Fancies Versus Fads*, 1923

Recently (September 2017) Radio 4's *Today* team discovered a story that they thought captivating.

University-based academic researchers had found that the effectiveness of influenza vaccines was positively correlated with the mood of the recipient at the time of administration: patients who felt better about themselves, others and the world around them developed stronger immunological protection. The study was solid: large-scale and well-designed.

The BBC allocated many minutes of prime-time listening to interview the research director. The interviewer's personal excitement vied with her house-styled, well-modulated BBC mien. She conveyed the thrill of a radical new discovery, of new therapeutic vistas suddenly opening.

'How can this be? How can something as standardly material as a vaccine possibly be so influenced by something so intangibly ephemeral as our mind? *Where* is this link? *What* is it?' The questions tumbled out, then glowed with epiphany.

The research director, another woman, joined her enthusiasm. Yes, this *was* very exciting and full of possibilities. Here was *real* evidence that mind, body and spirit were linked; and if we could harness such links this could be really

useful in healthcare. Who knew the limits of this ubiquitous, yet so often overlooked, power? The researcher and interviewer together entered a brief reverie of wonder – as if gazing upon a new relativity physics, or the unrealised possibility of nuclear fission.

This almost religious reverence was dispersed by the interviewer's question of *mechanisms: how* does this work? The researcher was pleased to be asked this, for she could now describe how the last two decades have spawned real knowledge: formidable new disciplines like psychoneuroendocrino-immunology (yes, really!) and a constellation of neurotransmitters. The interviewer was respectfully impressed, but their time was up and the spell of wonder finished – like a fireworks-display – with an exploding and bemusing litany of technicalities.

*Today* moved on to the next early-morning canapé.

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My own reaction was less biddable and more askance. I was, instead, most interested in the frissoned (though necessarily transient) interest of this flagship news programme. Is this really news? If not, what does it represent?

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Let us take a broader historical view: for as long as there has been literature we have recorded some kind of knowledge of the indivisibility of mind, body

and spirit. From the earliest documents we find frequent notions of this in myth, philosophy, religious ritual, fiction and primitive science. True, our previous notions had far more conviction than precision. But this gulf was eliminated dramatically in the 1930s by Hans Selye's systematic experimental studies on 'stress' and its relationship to health and illness. His thorough research was even able to identify the key anatomical parts and endocrine mediators involved in what he termed the 'General Adaption Syndrome': the Hypothalamus-Pituitary-Adrenal (HPA) Axis mediated by Cortisol, Adrenalin and Noradrenalin.

Selye thus decisively anchored our previous intuitive and often apocryphal knowledge of holism in modern science. And such was the solid competence of his science that it has provided exceptionally long and sterling service: the foundation for derivative research for more than eighty years. Yes, we have since elaborated and multiplied the anatomical parts and chemicals involved, but Selye's primal discovery has not changed: peace and harmony facilitate health, prolonged turbulence or conflict precipitate or sustain illness. This tends to be true for all kinds of illness and treatments, of all degrees of seriousness.

Any practitioner who has the opportunity to get to know their patients with imaginative interest will know not just how often this is true, but how important it becomes. From the beginning of my medical practice several decades ago I would witness and attempt to harness this *force majeure* time and time again. Like earth's gravity, the evidence is all around us: I did not

need scientific terminology or proof to reify, though Selye and his many followers provide this abundantly and repeatedly.

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But despite all this we manage something apparently counterintuitive and remarkably nonsensical: somehow we seem to keep forgetting, and then having brief fascinations with reminders – our ‘new’ (and often expensively procured) evidence: the kind recently fanfared by the BBC. Like water in a bucket with large holes, the continual and ready evidence keeps vanishing from our retention and use.

The evidence for this paradoxical oblivion is as clear and ubiquitous as the reality of the holistic principle that is forgotten. Hence we have two highly educated women discoursing, with sincere enthrallment, of their ‘discovery’, and then broadcasting this on national radio.

More worrying are the templated mindsets urged on contemporary doctors. As medicine becomes, increasingly, directed by centrally controlled algorithms, consultations become managed clusters of prescribed procedures: the language and thinking reduces to that of parts and tasks, not of wholes and meanings. The ‘mind’ or ‘mood’ or ‘personal experience’ – to survive at all – become separate – even alien – dimensions or commodities needing their own, annexed, algorithmic management.

'Don't forget to ask your Diabetic Review patient about her mental state' urges a mentoring physician to his trainee. This is probably better than not considering the 'mental state' at all, yet needing a reminder of this separate category indicates how unholistic is our default method of operating: we must be reminded ... again and again. So our now vaunted 'holistic practice' templates become necessary as bulwarks against other prevailing and atomising currents of contemporary practice: like sea-walls, these may mitigate for a while, yet can only locally outflank dominant and erosive rising ocean forces.

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What is happening? How do we make the ubiquitous so elusive? The ever-present sequestered? What is the nature of this unsealable hole in our bucket?

We are here dealing with the pararational, with social and psychological puzzles and paradoxes – and with these our notions rarely get beyond speculation. So our answers to these questions are unlikely to achieve much consummate uniformity – the kind of agreement, clarity and certainty that Selye brought to the (now often elided!) reality of psychosomatics. Yet however irresolvable, such questions themselves may illuminate. For *A sudden, bold and unexpected question doth many times surprise a man and lay him open* – Francis Bacon, *Essays*, 1625.

That is a definition and the purpose of philosophy. And holism is impossible without philosophy.

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So here is a speculative explanation.

Most of us have awareness of how we use our newer technologies to shape, monitor and control the world around us – our ambient environment, the objects we use and our communication modes are all key examples. What we are generally much less aware of is how our use of technology and objects reciprocally determines *us*: our minds – the way we think, feel and perceive.

There is circular causation here.

More or less consciously we adapt to the objects and technologies that we use to get the world to adapt to us.

We can see how this happens when we consider our increasing dependence on many kinds of industrial manufacture: objects, experiences, food, and conduits of travel and communication. For in our modern industrialised society almost all these things – the essentials for our *modus vivendae* – are conceived and fashioned in some distant source or factory with which we have no other connection. In this way our technological ‘progress’ makes increasingly redundant those activities that had long been key to our individual, domestic or social lives. Innumerable kinds of vernacular skill, knowledge and understanding are lost: less and less are we required to tend, maintain, repair or grow anything. The machine or factory will provide.



(Indeed, such erstwhile essential activities have become protectively sequestered as 'hobbies', leisure-niches and eccentric interests.)

Our advancing technology has thus enabled – many would say now enforced – a very different world: one where, increasingly, we merely choose-use-and-dispose our objects or experiences by involving only our decision, a finger-tap, and – sometimes necessarily – our money. And then, as our technology distances us incrementally from the sources of our objects and our experiences, we live increasingly with certain paradoxes: we know how to work things but not how things work; that which is seamlessly accessible to us is remote – even untraceable – from its source; our influence becomes detached from engagement.

This detachment is important because it tends to an *instrumental psychology*: for without due care our increasingly technologised lives can lead us to *expect* our aims or wishes to be fulfilled without the need of our time, patience, skill, understanding or relationship – the machine or algorithm is there to short circuit any such requirement. If these fail we find ourselves not just frustrated, but often anxiously helpless and hapless. So the 'progressive' world is one increasingly fused with our will, yet adrift from our understanding.

Within these terms we certainly benefit from our technology: speed, accuracy, possibilities – all have burgeoned while requiring less and less from us, or cooperatively from one another. But we must also attend to our losses. For such powerful instrumentalism can easily make us first heedless – then mindless – of the source, the history, the context, the relationship of things –

*holism*. Our expedience makes such considerations unnecessary: erstwhile patterns of thought wither – a kind of disuse atrophy.

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These paradoxes are played out across our arena of medical practice. As our technological diagnostics and treatments get evermore effective and rapid so we relegate notions of context, personal meaning and history, powerful yet fragile ecosystems. If we (think we) can effectively treat the part, why think of the whole?

So it is that we unawaredly unleash an inverse, then perverse, consequence in our proudly modernised institutions. We become technology-rich but humanity-poor; we have more and more machined images and data, but less and less personal connection and understanding.

All this has much topical relevance: for our crumbling healthcare staff morale, recruitment and retention – all are symptoms of this inverse relationship. Such are the inevitable casualties born by not paying attention to, or understanding, the many fragile yet crucial connections sacrificed for our incautious modernising reforms.

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Let us return to where we began, to *Today's* re-cognition of ancient wisdom. Yes, vaccines generally will work better if the recipient (and probably

practitioner) has an enhanced sense of hope, connection, inclusion, purpose, value, esteem and agency. And so will almost everything we do in healthcare. That is an essential definition of holism, and our old-fashioned term 'psychosomatics'. It is at the heart of all forms of pastoral healthcare, healing and psychotherapy.

And the answer to our now perennial amnesia and neglect of these truths? It is not more academic research we need to prove them, it is a restoration of our human scale, sense and sensibility to anchor them.

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*Our remedies oft in ourselves do lie*

*Which we ascribe to heaven*

– Shakespeare, *All's Well That Ends Well*, 1602-3

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