



Briefing

Judy Cassidy
EDITOR

The connection between the body, mind, and spirit was vital in ancient and medieval times, when physicians were priests and faith and prayer were an integral part of healing. But in the seventeenth century, physician-philosopher René Descartes laid the foundations for modern Western medicine's reliance on technological interventions. In the dualistic Cartesian view, the body was a mechanical system that did not include the soul or mind. Today, providers and patients, seeking "wellness," are renewing older, holistic approaches to healing.

A recent *New England Journal of Medicine* report confirms a growing interest in how spiritual and emotional health affect physical health. One-third of Americans in 1990 used some form of alternative medicine as an adjunct to conventional treatment. Even institutions that support rigorous scientific research are acknowledging the efficacy of such therapies. The National Institutes of Health has established an Office of Alternative Medicine (see p. 42), and well-known medical schools are adding courses on unconventional treatments. Mutual of Omaha has agreed to cover the costs of a program—developed by Dean Ornish, MD, director of the Preventive Medicine Research Institute, Sausalito, CA—for reversing coronary disease without drugs or surgery. The program, which uses meditation, support groups, exercise, and diet, is one-tenth the cost of bypass surgery.

Such potential savings are a major factor spurring interest in wellness. In a reformed system, providers' financial incentives will favor prevention and primary care, rather than acute care; so those who improve the wellness of their communities are likely to fare best.

Paul Hattis, writing from his experience with New York University's Hospital Community Benefit Standards Program, also insists on the need for providers to shift their emphasis from individual patient care services to services that improve public health. Hattis's nine success factors can help you design an effective community benefit program.

Like Hattis, Lawrence Seidl foresees a broader role for providers in a reformed system: spiritual healing. He recommends ways facilities can

In a reformed system, financial incentives will favor prevention and primary care; so those who improve the wellness of their communities are likely to fare best.

address social problems that cause the spiritual dysfunction underlying much physical disease. One example is found at Our Lady of Lourdes Medical Center, Camden, NJ, which sponsors holistic spirituality retreats (p. 51).

A broader focus on wellness also characterizes the most advanced employee wellness programs. Barbara K. Burke shows the effectiveness of these "third-generation" models, which work to enhance patients' mental, emotional, and spiritual well-being, rather than just to eliminate unhealthy habits. In this vein, the employee assistance program at St. Joseph's Hospital & Medical Center, Paterson, NJ, has added staff and programs that reinforce each person's wellness and, equally important, a healthy organizational culture (p. 44).

Nontraditional therapies and care delivery are raising new questions about relationships and practices. For example, in the *NEJM* study, 72 percent of people using unconventional medicine did not tell their physician. Sidney Callahan helps you anticipate issues that patients and providers must soon resolve.

NEW COLUMN ON MANAGEMENT ETHICS

Need assistance with complex corporate, social, and business dilemmas? In our new column, "healthcare management ethics" (p. 14), Sr. Joanne Lappetito, RSM, outlines a method for analyzing a situation's ethical dimensions. In subsequent columns, ethicists will use this process to address a variety of questions for healthcare managers.

HEALTH PROGRESS RECOGNITION

In June the Society for National Association Publications gave *Health Progress* awards for "general excellence" and for the January-February 1992 issue on tax exemption. We are most concerned, however, about living up to *your* standards. This means taking on the difficult subjects you need to know about. For a preview, take a look at the 1994 Editorial Calendar on the back of the service directory (following p. 8). If the calendar sparks ideas for articles, please let me know.