

# Doctors and demons

## Introduction

The role of supernatural forces, evil spirits and demons have been strongly implicated in the aetiology of ill health since the advent of written history. This has declined in the economically developed world with the emergence of allopathic medicine since the early 18th century (National Federation of Spiritual Healers, 2006).

Working in an acute stroke unit in Tower Hamlets the authors are attempting to influence secondary cardiovascular risk modifications in a population with diverse ethnic and religious backgrounds.

This article presents a case which has alerted the authors to the need for routinely enquiring about 'alternative and spiritual' aspects of the past medical history.

## Discussion

Mrs MB's history is highly suggestive of a transient ischaemic attack. Such an episode would have alerted doctors to her increased risk of future cardiovascular mortality and morbidity, enabling secondary prevention to be established (Antithrombotic Trialist Collaboration, 2002).

There has been a huge increase in the number of spiritual healers in this country over the past decade; approximately 20 000 are registered with the National Federation of Spiritual Healers. There is

evidence to support the role of spiritual healing in augmenting psychotherapy (Kreiger, 1975; Holdstock, 1979; Tobacyk and Mitford, 1983; Luckoff, 1985; Kepnar, 1987; Turner et al, 1995).

There are a significant number of independent practitioners who offer healing for almost any physical, psychiatric or emotional problem, most at a very expensive price. There are increasing reports of clients paying extortionate fees for medicines, talismans, holy concoctions and even advice offered by some spiritual healers for conditions which are often fatal without appropriate medical treatment. This problem was highlighted by a newspaper report (Boggan, 2004).

Spiritual healing is a flourishing industry and there are currently widespread advertisements targeting specific ethnic and religious populations with promises of cure. Most patients are not willing to disclose contacts with spiritual healers as they fear supernatural repercussions and it is a taboo to be associated with witch doctors (Boggan, 2004).

Spiritual healing is usually offered under the heading of 'prayers' and the fees are labelled as 'compulsory charitable donations for the sake of God' hence many people fail to accept these practices as business. The position of spiritual healing whereby patients are guaranteed cures by means of talismans, magic and spells

are unanimously forbidden by certain religious scholars (Boggan, 2004).

The medical profession needs to be aware of such practices, which may divert the attention of a population already at risk of premature cardiovascular death from seeking the help of primary care teams. It is also important to enlist the help of imams and religious leaders who are working with the local community to increase awareness of such problems (Boggan, 2004). More research needs to be directed at this problem to at least try and formally estimate the prevalence of patients who seek the help of a spiritual healer. **BJHM**

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## Case Report

Mrs MB is a 68-year-old woman of Bangladeshi origin who presented to the acute stroke unit with dense right-sided hemiplegia. Computed tomography scanning confirmed that she had had an acute infarction of the left middle cerebral artery territory. Her past medical history included type 2 diabetes mellitus of 14 years' duration. Apart from serum cholesterol of 6.5 mmol/litre there were no other risk factors for cerebral infarction identified. On admission she was not taking an antiplatelet agent or statin.

She denied having previously suffered a stroke. She was widowed and had been independent with all aspects of daily living.

On further discussions with her daughter it came to light that Mrs MB had experienced mild weakness and 'lack of feeling' in her right arm and leg approximately 4 years ago. This was thought to be caused by what is literally translated from Bangla as 'evil or demonic wind'. At the time she urgently consulted the help of a local spiritual healer in East London as recommended by neighbours and family. The diagnosis of a 'demonic processes' was confirmed by the healer who massaged the affected limbs with 'holy' water. The patient's symptoms resolved completely within hours so a consultation with her GP was not sought.

**Dr Hafiz Syed** is Specialist Registrar in Geriatric Medicine, Newham General University Hospital, London E13 8SL, **Dr Iannis Liakis** is Consultant Physician, Southend University Hospital, Southend, and **Dr Patrick Gompertz** is Consultant Stroke Physician, Royal London Hospital, London

Correspondence to: Dr H Syed