



DEAN ORNISH: Love As Healer



Love and intimacy are at a root of what makes us sick and what makes us well, what causes sadness and what brings happiness, what makes us suffer and what leads to healing. If a new drug had the same impact, virtually every doctor in the country would be recommending it for their patients. It would be malpractice not to prescribe it—yet, with few exceptions, we doctors do not learn much about the healing power of love, intimacy, and transformation in our medical training. Rather, these ideas are often ignored or even denigrated.

It has become increasingly clear to even the most skeptical physicians why diet is important. Why exercise is important. Why stopping smoking is important. But love and intimacy? Opening your heart? And what is emotional and spiritual transformation?

I am a scientist. I believe in the value of science as a powerful means of gaining greater understanding of the world we live in. Science can help us sort out truth from fiction, hype from reality, what works from what doesn't work, for whom, and under what circumstances. Although I respect the ways and power of science, I also understand its limitations as well. What is most meaningful often cannot be measured. What is verifiable may not necessarily be what is most important. As the British scientist Denis Burkitt once wrote, "Not everything that counts can be counted."

We may not yet have the tools to measure what is most meaningful to people, but the value of those experiences is not diminished by our inabil-

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ity to quantify them. We can listen, we can learn, and we can benefit greatly from those who have had these experiences. When we gather together to tell and listen to each other's stories, the sense of community and the recognition of shared experiences can be profoundly healing.

As recently as May 1997, an article in the *Journal of the American Medical Association* reviewed all of the known risk factors for coronary heart disease. While listing esoteric factors such as apolipoprotein E isoforms, cholesteryl ester transfer protein, and lecithin-cholesterol acyl transferase, it did not even mention emotional stress or other psychosocial factors, much less spiritual ones.¹

How did we get to a point in medicine where interventions such as radioactive stents, coronary angioplasty, and bypass surgery are considered conventional, whereas eating vegetables, walking, meditating, and participating in support groups are considered radical?

I'm not against the use of statins, stents, bypass surgery, or anything that works in the short run as a way of temporizing, but we also have to deal with the underlying issues involved in being human. Doctors are

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missing the opportunity to be of greater service to people, and being reduced to technicians. Because of this, many patients are voting with their feet, and going to alternative practitioners.

Why? Because whatever the alternative modality—massage, acupuncture, chiropractic, therapeutic touch—what they all have in common is that they touch people. Practitioners spend time with their patients, and listen to them. Practitioners talk about these issues as part of their overall approach.

There is a fundamental basic human need for a sense of love, connection, community, and intimacy, and this is so often unfulfilled in a typical doctor-patient interaction. More money is spent out of pocket by patients today for alternative interventions than for conventional ones—even though there is little science to prove their efficacy—because alternative practitioners often fulfill patients' basic human needs. If conventional doctors don't address those needs, the medical profession is in danger because our patients are going to find alternative practitioners who do.

Healing and curing are not the same. Curing is when the physical disease gets measurably better. Healing is a process of becoming whole. Even the words "heal" and "whole" and "holy" come from the same root. Returning healing to medicine is like returning justice to law.

In my work with people who have heart disease, both healing and curing often occur. When the emotional heart and the spiritual heart begin

to open, the physical heart often follows. But healing may occur even when curing is not possible. We can move closer to wholeness even when the physical illness does not improve.

The heart is a pump that needs to be addressed on a physical level, but our hearts are more than just pumps. A true physician is more than just a plumber, technician, or mechanic. We also have an emotional heart, a psychological heart, and a spiritual heart.

Our language reflects that understanding. We yearn for our sweethearts, not our sweet pumps. Poets and musicians and artists and writers and mystics throughout the ages have described those who have an open heart or a closed heart; a warm heart or a cold heart; a compassionate heart or an uncaring heart. Love heals. These are metaphors, a reflection of our deeper wisdom, not just figures of speech.

When I lecture at scientific meetings, hospitals, or medical schools, I always start by providing the scientific data as a way of establishing credibility. I show objective evidence from our randomized controlled trials that the progression of heart disease often can be reversed by changing lifestyle. Then I talk about what most interests me: the emotional, psychosocial, and spiritual dimensions of “opening your heart.”

In the process of healing, you reach a place of wholeness and deep inner peace from which you can deal with illness with much less fear and suffering and much greater clarity and compassion. While curing is wonderful when it occurs, healing is often the most meaningful because it takes you to a place of greater freedom from suffering. When healing occurs, people often become more peaceful, centered, happy, and joyful.

That which seems the most “soft” approach to wellness—love, intimacy, and meaning—is, in reality, the most powerful. This part of my work is the least well understood and yet perhaps the most important. There is a deep spiritual hunger in our culture. There has been a radical shift in our society in the past fifty years, and we are only now beginning to appreciate the deep spiritual hunger that has emerged.

The real epidemic in our culture is not only physical heart disease, but also what I call emotional and spiritual heart disease—that is, the profound feelings of loneliness, isolation, alienation, and depression that are so prevalent in our culture with the breakdown of the social structures that used to provide us with a sense of connection and community. It is, to me, a root of the illness, cynicism, and violence in our society.

The healing power of love and relationships has been documented in an increasing number of well-designed scientific studies involving hundreds of thousands of people throughout the world. When you feel loved, nurtured, cared for, supported, and intimate, you are much more likely to

be happier and healthier. You have a much lower risk of getting sick and, if you do, a much greater chance of surviving.

During the past twenty years of conducting research, I have become increasingly aware of the importance of love and intimacy and knew there were many studies documenting their power. Not until I systematically reviewed the scientific literature for this book did I realize just how extensive and rich is this field of study.

Studies Show: Intimacy Promotes Wellbeing

While some studies measure the number or structure of social relationships, I believe that it is your perception of the quality of those relationships—how you feel about them—that is most important.² As two distinguished researchers wrote recently, “Social support reflects loving and caring relationships in people’s lives.... Simple ratings of feeling loved may be as effective, if not more effective, in assessing social support than more comprehensive instruments that quantify network size, structure, and function.”³

At Yale, for example, scientists studied 119 men and 40 women who were undergoing coronary angiography, an X-ray movie that shows the degree of blockages in coronary arteries. Those who felt the most loved and supported had substantially less blockage in the arteries of their hearts.⁴ The researchers found that feelings of being loved and emotionally supported were more important predictors of the severity of coronary artery blockages than was the number of relationships a person had. Equally important, this effect was independent of diet, smoking, exercise, cholesterol, family history (genetics), and other standard risk factors.

A study of 131 women in Sweden also found that the availability of deep emotional relationships was associated with less coronary artery blockage as measured by computer-analyzed coronary angiography. As in the Yale study, this finding remained true even when controlling for age, hypertension, smoking, diabetes, cholesterol, educational level, menopausal status, and other factors that might have influenced the extent of disease.⁵

Similarly, researchers from Case Western Reserve University in Cleveland studied almost ten thousand married men with no prior history of angina (chest pain). Men who had high levels of risk factors such as elevated cholesterol, high blood pressure, age, diabetes, and electrocardiogram abnormalities were over twenty times more likely to develop new angina during the next five years.

However, those who answered, “yes” to the simple question, “Does your wife show you her love?” had significantly less angina even when

they had high levels of these risk factors. Men who had these risk factors but did not have a wife who showed her love had substantially increased angina—almost twice as much. The greater the cholesterol and blood pressure and the greater the anxiety and stress, the more important was the love of the spouse in buffering against these harmful effects.

As the researchers wrote, “The wife’s love and support is an important balancing factor which apparently reduces the risk of angina pectoris even in the presence of high risk factors.”⁶ The researchers also found that those men who also had anxiety and family problems, especially conflicts with their wives and children, had even more chest pain.

In a related study, these researchers studied almost 8,500 men with no history or symptoms of duodenal ulcer. These men were given questionnaires before they developed ulcers, so their responses were not influenced by knowing they had this disease.

Over the next five years, 254 of these men developed ulcers. Those who had reported a low level of perceived love and support from their wives when they entered the study had over twice as many ulcers as the other men. Those men who answered, “My wife does not love me” had almost three times as many ulcers as those who said their wives showed their love and support. This factor was more strongly associated with ulcers than smoking, age, blood pressure, job stress, or other factors. Men who also had anxiety and family problems had more ulcers.⁷

When I reviewed the scientific literature, I was amazed to find what a powerful difference love and relationships make on the incidence of disease and premature death from virtually all causes. It may be hard to believe that something as simple as talking with friends, feeling close to your parents, sharing feelings openly, or making yourself vulnerable to others in order to enhance intimacy can make such a powerful difference in your health and well-being, but study after study indicates that they often do. It’s easy to make fun of these ideas—talking about your feelings in a group, opening your heart to others, practicing yoga, meditation, or prayer to rediscover inner sources of peace, joy, and well-being—but look at what a powerful difference they can make in our survival!

In the Tecumseh Community Health Study, almost three thousand men and women were studied for nine to twelve years. After adjustments for age and a variety of risk factors for mortality, men reporting higher levels of social relationships and activities were significantly less likely to die during the follow-up period. Relationships included the number of friends, how close they felt to their relatives, group activities, and so on.

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When these social relationships were broken or decreased, disease rates increased two to three times as much during the succeeding ten-to-twelve-year period, including heart disease, strokes, cancer, arthritis, and lung diseases.⁸

Thomas Oxman and his colleagues at the University of Texas Medical School examined the relationship of social support and religion to mortality in men and women six months after undergoing elective open-heart surgery (coronary bypass surgery, aortic valve replacement, or both). They asked two questions:

- Do you participate regularly in organized social groups (clubs, church, synagogue, civic activities, and so on)?
- Do you draw strength and comfort from your religious or spiritual faith (whatever religion or spiritual faith that might be)?

They found that those who lacked regular participation in organized social groups had a fourfold increased risk of dying six months after surgery, even after controlling for medical factors that might have influenced survival (such as severity of heart disease, age, previous cardiac surgery, and so on). Also, they found that those who did not draw strength and comfort from their religion were three times more likely to die six months after surgery.⁹

These results indicated that lack of group participation and absence of strength and comfort from religion had independent and additive effects. Those who neither had regular group participation nor drew strength and comfort from their religion were more than seven times more likely to die six months after surgery. Seven times! Even though I am unaware of any factor in medicine that causes a sevenfold difference in mortality only six months after open-heart surgery, how many surgeons even ask their patients these two questions in assessing the risk of cardiac surgery?

Love promotes survival. Both nurturing and being nurtured are life-affirming. Anything that takes you outside of yourself promotes healing—in profound ways that can be measured—independent of other known factors such as diet and exercise. There is a strong scientific basis documenting that these ideas matter—across all ages from infants to the most elderly, in all parts of the world, in all strata of life.

Creating Intimacy

Sharing feelings rather than attacking or criticizing makes it easier for others to listen; listening leads to empathy; empathy leads to compassion; compassion increases intimacy; intimacy is healing.

We ask everyone to resist the natural inclination to give advice on how to solve the problem (unless someone specifically asks for it) and,

instead, to focus on feeling and expressing his or her own emotions and experiences. Remember: The problem we are trying to solve is a lack of intimacy, not the kid on drugs or the boss at work. The lack of intimacy can be solved even when the other problems cannot.

This process takes courage and practice. It is unfamiliar to many people precisely because the experience of intimacy is so rare and precious in our culture. Although many of our research participants were initially skeptical—and sometimes even hostile—to the group support process, most later said that they found the group support to be the most meaningful, helpful, and powerful part of their experience.

As we have seen, increasing scientific evidence documents the healing benefits of opening your heart. Many studies have shown that self-disclosure—that is, talking or even writing about your feelings to others—improves physical health, enhances immune function, reduces cardiovascular reactivity, decreases absentee rates, and may even prolong life.

Much of this important work has been conducted by James Pennebaker and his colleagues.^{10,11}

While disclosure of facts is helpful, disclosure of feelings is much more powerful.¹² The researchers also found that disclosure of traumatic or painful experiences had a more powerful benefit on health and healing than talking or writing about superficial events, even if in the short run the person felt worse. They found that the greater the degree of disclosure, the more benefits they measured. These benefits persisted over time. The benefits were particularly striking in those who talked about upsetting or traumatic experiences they had not previously discussed with others in detail.

What I try to do with patients, just as in my own life, is to help patients use the experience of suffering as a doorway to help transform their lives in ways that can make it richer and more meaningful. When most people think about my work, they think about diet, which is important, but to me it's the least interesting aspect of the work.

The experience of suffering comes in many forms, whether physical, or the deeper suffering which is harder to measure and yet ultimately more meaningful to people—their loneliness, depression, powerlessness, unhappiness, anxiety, fear, worry, sense of being cut off, sense of helplessness or hopeless, or a lack of meaning in their lives. All of these things I experienced to the nth degree when I was in college.

I've had patients say to me, "Having a heart attack was the best thing that ever happened to me." I would say, "That sounds crazy. What do you mean?" They'd respond, "Because that's what it took to get my attention—to begin making these changes I probably never would have done

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otherwise—that have made my life so much more rich, peaceful, joyful, and meaningful.”

Part of the value of science is to help raise the level of awareness for people so that they don't have to suffer as much to gain insight. Awareness is the first step in healing. They don't have to wait until they get a heart attack to begin taking these ideas seriously and making them part of their lives.

Altruism Has Healing Power

Do you want to be Mother Teresa or Donald Trump? Do you choose to help only yourself or do you choose to help others?

Trick question. Fortunately, you don't have to choose.

When you help others, you also help yourself. Seen from that perspective, helping others—being unselfish—is the most “selfish” of all activities, for that is what helps to free us from our loneliness and isolation and suffering.

Compassion, altruism, and service—like confession, forgiveness, and redemption—are part of almost all religious and spiritual traditions as well as many secular ones. We are hard wired to help each other. This has helped us survive as a species for the past several hundred thousand years.

The Tecumseh Community Health Study found that activities involving regular volunteer work were among the most powerful predictors of reduced mortality rates. Those who volunteered to help others at least once a week were two and a half times less likely to die during the study as those who never volunteered. In other words, those who helped others lived longer themselves.¹³

Studies of volunteers have shown that not only do they tend to live longer, but also they often feel better, sometimes reporting a sudden burst of endorphins similar to a “runner's high” while helping others. This good feeling that comes from helping others is a subset of a larger context: Anything that helps us freely choose to transcend the boundaries of separateness is joyful. When you volunteer, you have a choice. When you are pressured or coerced to meet someone else's needs, the joy of helping and the health benefits are compromised or even counterproductive.

At its best, making love is an ecstatic experience when two lovers merge as one, opening their hearts to each other and melting the boundaries that separate them. After my first sexual experience as a teenager, however, I remember thinking, “Is that it? That's all?” There was a brief physiological release but hardly an ecstatic experience. Only much later in life, when I learned to make love with an open heart, did I begin to under-

stand how joyful it could be. There is a growing interest in tantra and other approaches that help couples learn to combine sexuality and spirituality.

The ecstasy that comes from melting the boundaries between self and other is also part of most religious and spiritual traditions. While there are many pathways to experiencing God or the Self, praying with an open heart is one of the most powerful and joyful. Someone might choose to live a celibate life as a monk or a nun or a swami or a priest out of repression or fear of one's sexual impulses, but at its highest form they might renounce worldly relationships because the feelings of ecstasy and freedom that come from merging with God, with the Self, are so much more powerful even than merging with one's beloved mate.

On one level, we are separate from everyone and everything, the self with a small "s." You are your self, and I am my self. On another level, though, we are part of something larger that connects us all—the universal Self, by any other name: God, Buddha, Spirit, Allah, whatever.

Even to give a name is to limit it. When God was revealed to Moses, he asked, "When I tell the people that the God of their fathers has sent me, they will ask his name. What shall I tell them?" And God said, "I am what I am. Tell them I am has sent you."¹⁴

The vision of unity consciousness and oneness is found in virtually all cultures and all religions. God or the Self is described as omniscient, omnipresent, and omnipotent. As described in the Old Testament, "The Lord is One." If God is everywhere, omnipresent, One, then we are not separate from God.

What we experience as different names and forms is God or the Self in varying disguises, manifesting in different ways. All divisions are man-made. The word yoga is Sanskrit for "union." A central precept in Hinduism is "Thou art that... The universe is nothing but Brahman."¹⁵ According to Jesus, "The kingdom of God is within you."¹⁶ Buddha taught, "You are all Buddhas. There is nothing that you need to achieve. Just open your eyes."¹⁷ The Arabian prophet Muhammad, founder of Islam, wrote, "Wherever you turn is God's face.... Whoever knows himself knows God."¹⁸ Albert Einstein, the greatest scientist of the twentieth century, wrote, "The true value of a human being can be found in the degree to which he has attained liberation from the [separate] self."¹⁹ This experience is sometimes described as Oneness or at other times as complete emptiness, void; more precisely, as both. This paradox—everything and nothing—is at the heart of the transcendent experience, "an immediate, nondual insight that transcends conceptualization."²⁰ For it is our concepts of how we think things are that often keep us from seeing and experiencing how they really are.

By analogy, Swami Satchidananda describes the one light in a movie projector manifesting as an entire universe of people, places, and dramas on the movie screen. When we can maintain this double vision—seeing the different names and forms while remembering it's just a movie and seeing the one light behind the many images—then we can more fully enjoy the movie without getting lost in it, without forgetting who we really are.

Although this experience of Oneness lies beyond the intellect, it can be directly experienced. Compassion naturally flows when the divisions that separate us from each other begin to fade.

Compassion helps to free us from anger. Anger itself is often a manifestation of the misperception that we are separate and only separate.

The Intimacy of Touch

What is the largest organ in your body? Your skin. We all know that a loving touch feels good, but did you know it can also affect your health and even your survival?

Intimacy is healing. Touching is intimate. Lack of human contact can lead to profound isolation and illness—and even death.

A number of studies are now showing the benefits of touch in newborns. At the Touch Research Institute in Miami, premature babies given three loving massages a day for ten days gained weight 47 percent faster and left the hospital six days sooner, saving \$10,000 each.²¹

Despite this, we do not touch each other very much in the United States when compared with other parts of the world. Psychologist Sidney Jourard observed and recorded how many times couples in cafés casually touched each other in an hour. The highest rates were in Puerto Rico (180 times per hour) and Paris (110 times per hour). Guess how many times per hour couples touched each other in the United States? Twice! (In London, it was zero. They never touched.) He also found that French parents and children touched each other three times more frequently than did American parents and children.²²

Again, awareness is the first step in healing. When we understand the healing power of touching, we can look for ways of increasing our contact with other people while respecting their boundaries. Give someone a pat on the back or a hug when they've done a good job—or even when they haven't. Get a massage or manicure or shampoo. Shake hands when you see a colleague. Hold hands with your beloved—and don't forget to kiss.

Therapeutic touch is a type of massage that also combines the intention of the person to help or heal while in a meditative state. It was pioneered by Dolores Krieger and is increasingly taught and used by nurses

and other health practitioners. Therapeutic touch also can be practiced by simply placing your hands near someone rather than on them. The goal is to “rebalance energy” and to stimulate a person’s own natural intrinsic healing responses. One of the leading practitioners and researchers of therapeutic touch is Janet Quinn, who described it this way: “Therapeutic touch, at its core, is the offering of unconditional love and compassion.... We’re here for service. We’re here to love other people.... The most fundamental longing of the human heart is for union with the Divine.”²³

Beyond your feelings and your body and your thoughts and your mind is the Self that witnesses all of this. While this Self is beyond the mind’s capacity to experience it, you can feel this Self in your heart as love: “Love comes from God, and everyone who loves is begotten by God and knows God; those who don’t love, don’t know God; for God is love.” (1 John 4:7)

When we realize that, this awareness creates tremendous freedom in making different choices. We can choose to live with an open heart, a love that can include everyone and everything. We are intimate with all things as all things. In that timeless moment, wherever we go, we find only our own kith and kin in a thousand and one disguises. We end where we started, with love and survival. Let’s give the epilogue to the Sufi poet Rumi, who lived in the thirteenth century when he wrote:

There is a community of the spirit.
 Join it, and feel the delight
 of walking in the noisy street,
 and being the noise...
 Why do you stay in prison
 when the door is so wide open?
 Move outside the tangle of fear-thinking.
 Live in silence.
 Flow down and down in always
 widening rings of being.