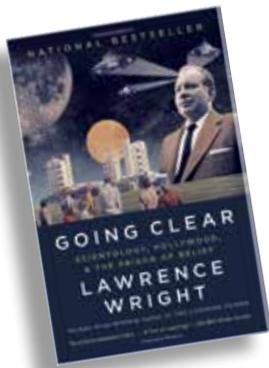


Reviews and reflections

David A. Bennhaum, MD, and Jack Coulehan, MD, Book Review Editors



Going Clear: Scientology, Hollywood, and the Prison of Belief

Lawrence Wright
Knopf, New York, 2013, 365 pages plus references and index

Reviewed by Frederic W. Platt, MD

This is a tough book to read and a tough one to review. Reading about Scientology reminds us of other painful human behaviors that we wish did not exist or at least existed in a country or a universe far from ours. The book's story reminds me of other features connected to the decline and fall of civilization. The business that calls itself Scientology began as pop psychology, morphed into science fiction, and then into a sort of religion, and indeed has been given the status of a religion by the Internal Revenue Service.

This religion urges that human sufferers (all of us) should enlist in Scientology



classes to help overcome habits of thought, including those from past lives, that are blocking their path to spiritual development, psychological health, and material success.

Author Lawrence Wright exposes Scientology as a personally and financially exploitative organization that from its inception has been run by deranged and violent men. The sect has been successful in pursuing celebrities, especially Hollywood actors, and has gleaned tens of millions of dollars and an inestimable amount of free advertising from those sources. Scientology is per member the richest quasi-religious organization in the world. That its leaders have tried vigorously to suppress criticism of the movement increases one's admiration for Wright, who spent years researching and interviewing for the book. Wright received the Pulitzer Prize for a previous book, *The Looming Tower*, and deserves another for *Going Clear*.

The brainchild of L. Ron Hubbard, a bizarre but prolific science fiction author, Scientology today has centers on three continents and is a multibillion dollar business. It generates income from fees for its programs, by charging followers to disenroll in the movement, and by using the unpaid and, in many cases, forced labor of followers to rehab and maintain its extensive collection of properties, including a cruise ship. Reading about devotees of the sect helps one understand what Wright calls "the prison of belief," a process by which a

subject's intellect and common sense are gradually overcome by the strength of his needs, leading him to embrace an illogical system that promises relief from existential pain.

Under the direction of David Miscavige, the autocrat who succeeded Hubbard, Scientology has continued to spread worldwide. As the enrollee invests time and money in pursuing different levels of the *auditing* process that promises to identify and remove barriers to happiness, his belief in the system grows stronger. The sect calls the end result of this auditing process *going clear*. The alternative to belief in the process is to admit that one has been defrauded and exploited. The resemblance of Scientology practitioners to fraudulent faith healers is unmistakable, but such faith healers do not typically spirit away their subjects' children, or keep them as mind slaves to do menial work.

When a follower disobeys one of the organization's many rules, he could be sentenced to serve time in the Rehabilitation Project Force (RPF):

One of the doors the federal agents opened during the raid in Los Angeles led to the darkened basement of the old Cedars of Lebanon Hospital . . . newly christened as Scientology's Advanced Org building. There were no lights, so the heavily armed agents made their way down the stairs with flashlights. They found a warren of small

cubicles, each occupied by half a dozen people dressed in black boiler suits and wearing filthy rags around their arms to indicate their degraded status. Altogether, about 120 people were huddled in the pitch-black basement, serving time in the Rehabilitation Project Force. The ranks of the RPF had expanded along with the church's need for cheap labor to renovate its recently purchased buildings in Hollywood.^{p174}

Going Clear invites the reader to ask: What is a church? What is a religion? How does psychological need drive belief? At what level of belief do we simply relinquish our critical faculties and yield to faith alone? At what level do we simply say, "Nonsense!"

This book will also give the reader an appreciation for investigative journalism. In *Going Clear*, Wright gives several examples of Scientology's critics who were harassed both physically and by ruinous lawsuits for reporting on the sect's practices. Among his informants are people who reached high levels of power in the organization, became disillusioned, and are expecting retribution for their apostasy. In fact, I'm a little nervous about endorsing Wright's criticism myself.

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The Lost Carving

David Esterly
Viking, New York, 2012

Francis A. Neelon, MD (AQA, Duke University, 2002)

Surely this is the lure of serendipity: to come across things, unbidden and unexpected, that change the way we see the world. I remember, in the old days when hospitals had libraries and libraries had actual books on actual shelves,



stumbling across Michael Balint's *The Doctor, His Patient, and the Illness* at Watts Hospital. It was not what I was looking for, but was next on the shelf to what I was looking for. I took it down, read it then, and have been reading it with increasing profit ever since.

Even more remarkable is it to happen on a book that on its face seems to be one thing but on reading turns out to be something vastly deeper and broader—like David Esterly's *The Lost Carving*. Esterly, a Harvard graduate with a recent doctorate from Cambridge, was wonderstruck when, in St. James's Church on Picadilly, he came upon the woodcarvings (wood sculptures might be better) of the seventeenth-century English woodcarver Grinling Gibbons. Esterly completed his doctoral thesis (on Yeats and Plotinus), but abandoned an academic career to learn to carve wood as Gibbons had. Confirmation that he succeeded came when Esterly was selected to reproduce a Gibbons carving that was destroyed in the 1986 fire at Hampton Court.

But Esterly's memoir is much more than a simple accounting of how he attained his considerable skill as a woodcarver. He certainly paid attention when reading Yeats (Plotinus, too, I suspect, but I am no judge there); his deft and highly readable prose is woven throughout with poetical and philosophical elements. I sent a copy of the book to my nephew, a writer and teacher of writing, who wrote back, "I

found myself photocopying parts for my Fiction Writing class this semester. His thoughts on creativity and self-expression were particularly useful. [The biggest obstacle in] teaching adults or college students is to convince them that they are not engaging in an enterprise of self-discovery and self-expression. Those may be by-products, but creation is a bigger proposition than that. Esterly says it very, very well."

I, too, found myself copying out a whole galaxy of quotations, because they amplify and illustrate not carving or writing, but the art of doctoring. The enterprise of medical education dances to the tune of medical science, but limps when it comes to the practice of doctoring. I was reminded of what life is like in the clinic when Esterly wrote,

I discovered a curious thing about carving. Fifty percent of the effort will achieve ninety percent of the effect. Another discovery followed on quickly. If you allow yourself to stop at that ninety percent, then the carving can never succeed, never really succeed. . . . The last ten percent, that final zone of difficulty, is everything.^{p109}

It seems to me that the businessmen who manage modern medical practice are more than happy to get "ninety percent of the effect" if they can push through twice as many patients per hour; why not get their doctor-employees to run faster if there is little or no difference in outcomes between fast and slow doctors? Might this ninety-percent-for-fifty-percent phenomenon also explain the assertion that patients treated by nurse practitioners do as well as those treated by doctors? Perhaps the lack of "significant" difference results from the range of potentially observable variation being not 1–100, but only 90–100 (or even 99–100).

And who has sat in the consulting room "certain" about what the patient before us needs to do, rattling off words of wisdom and expecting the patient

to comply faithfully? And how often has expectation failed us? Because, as Esterly cautions,

When you are shaping a form, forcing assaults usually meet with furious resistance. The blade must woo the wood. You could just as well think of the wood courting the blade, informing it of the configuration of its grain. The wood instructs the tool in its motions. Who's seducing whom? The chisel may propose, but the wood disposes.^{p19}

Wouldn't we all be better doctors if we saw the patients as wooing us, instructing us with their actions (and inactions)?

Thankfully, we are never too old to learn, to profit from being stretched to the limits. Esterly again:

The extreme is the circumstance under which you continue to learn, even after years of plying your trade. You push through your second and third and fourth wind, until the creature gives up the ghost and all that's left is the task. Not that what you're doing becomes easier, under pressure, just that it becomes second nature. *First* nature, even, like breathing and eating. Somebody asked Stravinsky whether he enjoyed composing. "Do you enjoy waking up in the morning?" he replied.^{p255-56}

A reading group of which I am a member, and which has been meeting weekly at Duke Hospital for over twenty-five years, spent five weeks reading and discussing *The Lost Carving*. Happily, I found it as good the second time around as the first. I really do think that when a book written by a carver of wood makes a teacher of writing say, "This is about the art of writing," and a medical doctor say, "This is about the craft of doctoring," the author has gotten close to the heart of *poiesis*, of making, has reached that exalted state where folks from different spheres of interest

feel that the author is talking straight to them.

Reading *The Lost Carving*, I was reminded that 100 years ago Sir William Osler said to beginning medical students:

. . . do not forget, above all things, the famous advice to Blackmore, to whom, when he first began the study of physic, and asked what books he should read, Sydenham replied, *Don Quixote*, meaning thereby, as I take it, that the only book of physic suitable for permanent reading is the book of Nature.^{1p143}

I think we can add Esterly's stunning meditation to the list.

Reference

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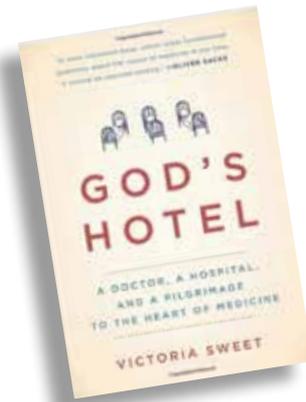
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God's Hotel: A Doctor, a Hospital, and a Pilgrimage to the Heart of Medicine

Victoria Sweet
Riverhead Books, New York 2012

Reviewed by Richard Bronson, MD
(ΑΩΑ, New York University, 1965)

The title of Victoria Sweet's book, *God's Hotel*, is taken from the French *Hôtel Dieu*, which could be translated as "Hostel of God." The term



refers to hospitals, many founded by the medieval church throughout France, that served as places of respite and healing for the sick and destitute. Hôtel-Dieu de Paris is the oldest hospital in Paris, currently affiliated with the Faculté de Médecine Paris-Descartes. In contrast, Hôtel Dieu in Marseille has been converted to an InterContinental Hotel. Victoria Sweet, currently an associate clinical professor of Medicine at UCSF, worked for twenty years in a contemporary American hospital that offered similar care without limit to those in need: Laguna Honda, an almshouse situated in San Francisco.

The last twenty years have been a time of transition within the structure of medical care institutions, with the new focus on diminishing reimbursements, decreasing length of stay of hospitalized patients, and consultants hired to find economies in the system. This theme pervades the book. A second theme deals with Dr. Sweet's entry into a doctoral program in the history of medicine, based in part on her study of *Causae et Curae*, the medical treatise of Hildegard von Bingen, a German abbess who lived from 1098 to 1179, now popularly known for her mysticism and musical compositions. A third theme of *God's Hotel* is Dr. Sweet's maturation as an internist during the time she worked at Laguna Honda, applying what she had learned from her thesis work. These three themes are woven through *God's Hotel*, creating a unique tapestry

in which Dr. Sweet develops the concept of “slow medicine,” in which time and support are provided, allowing healing to occur. The author is a keen observer, an essential attribute for reporting and writing, as well as for becoming a skilled internist. Following an introduction on “How I Came to God’s Hotel,” the book’s twelve chapters present a series of case histories that illustrate its underlying themes. Illustrative chapter titles include: “The Visit of Dee and Tee, Health Care Efficiency Experts,” “Slow Medicine,” “Dr. Diet, Dr. Quiet, and Dr. Merryman,” “Recalled to Life,” and “The Spirit of God’s Hotel.”

Hildegard viewed the body as having an intrinsic ability to heal itself that she termed *viriditas*. There are wonderful asides throughout the book describing the derivation of words. Dr. Sweet tells us that

Viriditas comes from the Latin word for green, *viridis*—which also gives the French *vert* . . . So usually it referred to the color of plants . . . although it was also used metaphorically to mean vigor and youthfulness.

But Hildegard used *viriditas* . . . in a broader sense . . . to mean the power of plants to put forth leaves, flowers, and fruits; and she also used it for the analogous power of human beings to grow, to give birth, and to heal.^{p97}

Hildegard describes prescriptions for living and healing, based on the medieval concepts of the four humors: blood, phlegm, bile, and melancholia. The blend of the different humors in different individuals can be assessed by the astute clinician and advice given accordingly, as expressed in the metaphor of “Dr. Diet, Dr. Quiet, and Dr. Merryman.” But healing takes time, time that was available in a world entrained to the slow medieval clock of the seasons, and also at Laguna Honda, but not available in our present health care system. The element of time pervades *God’s Hotel*, of

time lost to length of stays, RVUs, and the edifice of modern efficient medicine getting in the way of caring and healing, even of diagnoses. How easy not to see the person within the context of his whole life, to miss an important fact! How many of today’s hospitalized patients can even state their doctors’ names?

This concept of humans’ intrinsic capacity to heal has survived to more modern times, as reflected in Claude Bernard’s *milieu interior*, and later, in Walter B. Cannon’s writings on homeostasis, the ability of the body to regulate its own balance. I spent time training at Bellevue Hospital, which was a *Hôtel Dieu* in deed, if not name. Founded in 1736, it is the oldest public hospital in the United States. Its doors were open to everyone in need, and length of stay was never an issue, healing being the first priority. This rule persisted through my internship in 1966, and many patients remained for weeks and months, if necessary. We understood the concept of *viriditas*, knowing that its loss—which we termed “piss-poor protoplasm”—meant that healing was unlikely, no matter what treatments you offered.

The Laguna Honda in which Dr. Sweet practiced no longer exists, and *God’s Hotel* is in some ways a threnody to the institution, its passing into something else. We are left not knowing whether that transformation will succeed, though Dr. Sweet illustrates that something significant has been lost. Yet can the concept of “slow medicine” at Laguna Honda be generalized? We have learned that hospitals are places of danger as well as healing. The errors that occur within modern hospitals lead to deaths, miscommunication of information, drug reactions, and the growth of drug-resistant bacteria, like the ever-present *C. difficile*. If one has a home, better to recuperate there than in the hospital, better to leave as soon as possible! Medicine has advanced so rapidly, with so many areas of deep knowledge and new procedural skills that cannot be encompassed by the general internist

or family practitioner. This has created the need for hospitalists and intensivists as provisioners of inpatient care, a system in which the patient can easily be considered solely as an illness, rather than as a person. I thought of this during my own recent hospitalization. It was reassuring to be cared for by medical staff who knew me, and whom I trusted. We should mourn the loss of “getting to know” our patients.” How frightening it would have been to be treated by strangers during a time of sudden illness!

While of interest to all medical doctors, irrespective of their specialization, *God’s Hotel* should especially be required reading for medical students. There are so many valuable lessons it teaches:

1. The need to focus on the patient as embedded in a life larger than that of the hospital or the person’s illness.
 2. The critical information a perceptive doctor receives when giving the patient time to speak.
 3. The role of nurses in providing continuity of care beyond those few minutes doctors devote to talking with their patients during rounds.
 4. The value for the patient of time, rest, and manifest caring to promote healing through the body’s self-regulating mechanisms.
- And
5. The foibles and dangers of bureaucracy in decision making regarding the design and funding of institutions that provide medical care.

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