

Theodicy - Appendix

Supernatural at Work

A Literature Review of Medical Studies on Prayer & Healing

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<https://theodicy.rodske.com/medical>

Abstract

This literature review examines contemporary scientific studies investigating the efficacy of Christian prayer and distant healing interventions on health outcomes, drawing inspiration from the ministry of historical figures like John G. Lake. Lake's work in South Africa,^{1,2} which included scientifically observed instances of spiritual power over disease, such as plague bacteria dying upon contact with his hand, provides a compelling historical precedent for the tangible impact of faith. These narratives, primarily preserved in faith-based sources rather than peer-reviewed journals, reflect a historical Christian aspiration to demonstrate spiritual power tangibly, inviting further inquiry into God's healing work and underscoring a persistent Christian experience of divine healing, prompting modern scientific investigation. This review synthesizes peer-reviewed research employing diverse scientific methodologies to explore prayer's effects on health, situating historical demonstrations of faith within current empirical investigations. The field contends with significant conceptual, methodological, and ethical challenges, including quantifying faith, ensuring interventions align with authentic prayer practices (ecological validity), and respecting divine sovereignty. Despite these complexities, this review compiles and scrutinizes scientific data from studies on prayer and healing, particularly those informing a Christian worldview. It aims to present a survey of current empirical inquiries at this intersection of faith and science, hoping future research might better integrate qualitative insights and deeper ethical reflection, honoring both the scriptural promise of healing through faith and the call to humility before divine mysteries.

¹ Gordon Lindsay, *John G. Lake: Apostle to Africa* (Dallas, TX: Christ for the Nations, Inc., 1997), ISBN: 978-0899850115. This text details Lake's ministry, including miraculous claims such as the plague bacteria anecdote.

² Roberts Liardon, *God's Generals: Why They Succeeded and Why Some Failed* (New Kensington, PA: Whitaker House, 1996). This book includes a chapter on Lake, recounting stories like the plague incident, also referenced in Lake's own sermons and writings.

Related Documents

This paper forms part of a comprehensive series exploring a theodicy addressing the Problem of Evil and Suffering.

Related documents in the series include:

- Theodicy - The Problem of Evil & Suffering (Th) > <https://theodicy.rodske.com/theodicy>
- Theodicy - Worldview: A Wider Spiritual Context (WSC) - <https://theodicy.rodske.com/worldview>
- Theodicy - Animal Suffering - <https://theodicy.rodske.com/animals>
- Theodicy - Divine Hiddenness - <https://theodicy.rodske.com/hiddenness>
- Theodicy - Abiogenesis: Life's Origins - <https://theodicy.rodske.com/abiogenesis>
- Theodicy - Medical Literature Review - <https://theodicy.rodske.com/medical>
- Theodicy - Appendix (Appx) - <https://theodicy.rodske.com/appx>

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Introduction

The conviction that prayer can bring forth physical healing is a deeply rooted and widespread phenomenon, with numerous individuals globally attributing recovery from illness and injury to divine intervention. The ministry of John G. Lake in South Africa during a plague stands as a significant historical example, where demonstrations of spiritual power over disease were observed, including instances where plague bacteria perished upon contact with his hand under scientific scrutiny. These narratives, primarily preserved in faith-based sources rather than peer-reviewed journals, reflect a historical Christian aspiration to demonstrate spiritual power tangibly, inviting further inquiry into God's healing work. Such powerful accounts exemplify a long-standing Christian experience and provide a strong impetus for contemporary scientific interest in prayer's potential impact on health.

This literature review seeks to synthesize and examine peer-reviewed scientific research exploring the effects of prayer on health outcomes. The focus is on studies pertinent to a Christian understanding of prayer, encompassing a variety of research designs from randomized controlled trials of distant intercessory prayer to investigations of proximal (in-person) prayer, and medically documented case reports. These studies explore a range of conditions, offering a landscape of how science has attempted to measure the impact of prayer, building upon the legacy of profound healing experiences.

However, the scientific investigation of prayer is inherently complex and navigates a landscape fraught with significant challenges:

- **Methodological Hurdles**

A primary difficulty lies in scientifically operationalizing and measuring elements central to prayer, such as faith. The Bible itself describes faith as “confidence in what we hope for and assurance about what we do not see” (Hebrews 11:1, a New Testament book emphasizing faith as a foundational Christian virtue), concepts that resist easy quantification. Furthermore, ensuring that prayer interventions studied in research possess *ecological validity* (reflecting how prayer is genuinely practiced in natural settings) and *construct validity* (aligning with the theological and experiential understanding of prayer held by practitioners) is vital for meaningful results, yet presents considerable design challenges. The diversity of prayer practices, from remote, anonymous intercessions to deeply personal, relational prayer, also requires careful consideration.

- **Theological Tensions**

The Judeo-Christian scriptures emphasize God's sovereignty and inscrutable ways, with passages like Isaiah 55:8-9 stating, “For my thoughts are not your thoughts, neither are your ways my ways,” declares the LORD (words from an Old Testament prophet highlighting God's transcendent nature). This raises theological questions about the appropriateness of expecting divine intervention to manifest predictably within the controlled parameters of scientific

experiments. There are also explicit scriptural cautions, such as in Deuteronomy 6:16 (from the Old Testament Law, warning against demanding signs from God) and Matthew 4:7 (where Jesus quotes Deuteronomy during his temptation by Satan), to “Do not put the Lord your God to the test.” The Book of Job, particularly chapter 38 (an Old Testament text where God questions Job, emphasizing human inability to fully grasp divine wisdom), further highlights human limitations in comprehending divine actions, urging humility when seeking to understand God’s workings.

- **Philosophical Inquiries**

Investigating prayer scientifically can lead to philosophical questions about the nature of divine action. Does expecting consistent, measurable outcomes from prayer imply a deterministic view of God, or can such research respect both divine agency and the role of human faith? The value of subjective spiritual experiences, as explored by philosophers like William James,³ who studied the varieties of religious experience, also suggests that personal encounters with what is perceived as divine power hold significance that may lie beyond the reach of empirical proof alone.

- **Ethical Considerations**

There is an ethical imperative to ensure that the study of prayer does not reduce a sacred act, deeply meaningful to believers, into a mere therapeutic mechanism. Drawing inspiration from ethical philosophers like Emmanuel Levinas, who emphasized profound respect for the "Other,"⁴ research in this area must strive to honor the dignity of individuals and their spiritual traditions, rather than potentially exploiting their faith for data.

Despite these profound challenges, a body of scientific literature has emerged at the intersection of faith, prayer, and medicine. This review compiles and critically examines these empirical inquiries. The aim is to provide an overview of what has been investigated, the reported outcomes, and the inherent limitations of such research. By doing so, this paper seeks to foster a more nuanced and informed understanding of the complex relationship between Christian faith, the practice of prayer, and health, endeavoring to respect both the scriptural encouragement found in James 5:15 (a New Testament passage affirming that "the prayer offered in faith" can make a sick person well) leading to healing, and the profound call to humility when exploring the sacred.

³ William James, *The Varieties of Religious Experience: A Study in Human Nature* (New York: Longmans, Green, and Co., 1902).

⁴ Emmanuel Levinas, *Totality and Infinity: An Essay on Exteriority*, trans. Alphonso Lingis (Pittsburgh, PA: Duquesne University Press, 1969).

Reports

Study on Distant Healing in Advanced AIDS (Sicher et al., 1998)

- Full Citation: Sicher, F., Targ, E., Moore, D., 2nd, & Smith, H. S. (1998). A randomized double-blind study of the effect of distant healing in a population with advanced AIDS. Report of a small scale study. Western Journal of Medicine, 169(6), 356–363.
- URI(s): <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC1305403/>,
<https://pubmed.ncbi.nlm.nih.gov/9866433/>
- Study Type: Randomized, double-blind controlled trial.
- Intervention Group (IG): 20 patients with advanced AIDS receiving 10 weeks of distant healing.
- Control Group (CG): 20 pair-matched patients with advanced AIDS not receiving distant healing.
- Intervention Details: Distant healing (DH) performed by self-identified healers from various spiritual traditions, located throughout the U.S.; subjects and healers never met.
- Assessment Measures: Medical chart review (AIDS-defining illnesses, illness severity, doctor visits, hospitalizations, days of hospitalization), psychometric testing (mood - Profile of Mood States), CD4+ counts. Assessed at enrollment and followed for 6 months.
- Key Outcomes: At 6 months, compared to CG, IG had:
 - Significantly fewer new AIDS-defining illnesses (0.1 vs. 0.6 per patient, $P = 0.04$).
 - Lower illness severity (severity score 0.8 vs. 2.65, $P = 0.03$).
 - Significantly fewer doctor visits (9.2 vs. 13.0, $P = 0.01$).
 - Fewer hospitalizations (0.15 vs. 0.6, $P = 0.04$).
 - Fewer days of hospitalization (0.5 vs. 3.4, $P = 0.04$).
 - Significantly improved mood (Profile of Mood States score -26 vs. 14, $P = 0.02$).
 - No significant differences in CD4+ counts.

Study on Remote Intercessory Prayer in a Coronary Care Unit (Harris et al., 1999)

- Full Citation: Harris, W. S., Gowda, M., Kolb, J. W., Strychacz, C. P., Vacek, J. L., Jones, P. G., ... & McCallister, B. D. (1999). A randomized, controlled trial of the effects of remote, intercessory prayer on outcomes in patients admitted to the coronary care unit. Archives of Internal Medicine, 159(19), 2273–2278.

- URI(s): <https://doi.org/10.1001/archinte.159.19.2273>,
<https://pubmed.ncbi.nlm.nih.gov/10547166/>
- Study Type: Randomized controlled trial.
- Intervention Group (IG): 466 patients admitted to a coronary care unit (CCU) receiving remote intercessory prayer.
- Control Group (CG): 524 patients admitted to a CCU receiving usual care.
- Intervention Details: Daily remote intercessory prayer by 15 teams of five intercessors given participants' first names, for a four-week period.
- Assessment Measures: Overall CCU course score (MAHI-CCU weighted and unweighted), length of stay in CCU, other clinical outcomes, comorbidities.
- Key Outcomes:
 - Intervention group had significantly lower mean weighted MAHI-CCU score (6.35 vs 7.13, $p=0.04$) and unweighted MAHI-CCU score (2.7 vs 3.0, $p=0.04$) compared to the control group, indicating better outcomes.
 - Length of hospital stay and CCU stay were similar between groups.

Systematic Review of Randomized Trials on ‘Distant’ Healing (Astin et al., 2000)

- Full Citation: Astin, J. A., Harkness, E., & Ernst, E. (2000). The Efficacy of ‘Distant’ Healing: A Systematic Review of Randomized Trials. *Annals of Internal Medicine*, 132(11), 903–910.
- URI(s): <https://www.acpjournals.org/doi/10.7326/0003-4819-132-11-200006060-00009>,
<https://pubmed.ncbi.nlm.nih.gov/10836918/>
- Study Type: Peer-reviewed meta-analysis / systematic review.
- Intervention: ‘Distant’ Healing.
- Data Source: 23 randomized trials involving 2,774 patients.
- Key Outcome(s): 13 of 23 (57%) studies showed statistically significant positive therapeutic effects favoring distant healing.
- Verification/Summary: Scientifically verified, though mixed outcomes and methodological concerns in some of the reviewed trials limit the overall strength of conclusions.

Study on Prayer Influence on IVF Success (Cha, Wirth, & Lobo, 2001)

- Full Citation: Cha, K. Y., Wirth, D. P., & Lobo, R. A. (2001). Does prayer influence the success of in vitro fertilization-embryo transfer? Report of a masked, randomized trial. *The Journal of Reproductive Medicine*, 46(9), 781–787.

- URI(s): <https://pubmed.ncbi.nlm.nih.gov/11584476/>
- Study Type: Masked, randomized trial.
- Intervention Group (IG): 88 women undergoing IVF-embryo transfer (original paper reports 44/88 pregnant, 50%).
- Control Group (CG): 81 women undergoing IVF-embryo transfer (original paper reports 21/81 pregnant, 25.9%).
- Intervention Details: Intercessory prayer starting five days after treatment began and lasting for three weeks. Prayer groups of 3-13 intercessors prayed for ~5 patients each.
- Assessment Measures: Pregnancy rate, implantation rate, number of babies.
- Key Outcomes:
 - IP group had a higher pregnancy rate as compared to the no-IP rate (50% vs. 26%, $P = .0013$)
 - IP group showed a higher implantation rate (16.3% vs. 8%, $P = .0005$)

Study on Remote, Retroactive Intercessory Prayer for Bloodstream Infection (Leibovici, 2001)

- Full Citation: Leibovici, L. (2001). Effects of remote, retroactive intercessory prayer on outcomes in patients with bloodstream infection: randomised controlled trial. *BMJ (Clinical research ed.)*, 323(7327), 1450–1451.
- URI(s): <https://pubmed.ncbi.nlm.nih.gov/11751349/>, <https://doi.org/10.1136/bmj.323.7327.1450>, <https://www.bmj.com/content/323/7327/1450>
- Study Type: Randomized controlled trial (evaluating retroactive prayer).
- Population: 3393 adult patients hospitalized with bloodstream infection between 1990-1996.
- Intervention Group (IG): 1691 patients for whom remote, retroactive intercessory prayer was offered in the year 2000.
- Control Group (CG): 1702 patients who did not receive retroactive prayer.
- Intervention Details: In 2000, an intercessor was given the first names of patients in the IG and prayed for their well-being and full recovery from infections that had occurred 4-10 years prior.
- Assessment Measures: Mortality, length of hospital stay from first positive blood culture, duration of fever ($>37.5^{\circ}\text{C}$).
- Key Outcomes:

- Mortality: IG 28.1% (475/1691) vs. CG 30.2% (514/1702) ($p=0.4$, not significant).
- Length of hospital stay: IG had significantly shorter stay ($p=0.01$).
- Duration of fever: IG had significantly shorter duration ($p=0.04$).

Review on Healing, Intention, and Energy Medicine (Jonas & Crawford, 2003)

- Full Citation: Jonas, W. B., & Crawford, C. C. (2003). Healing, Intention and Energy Medicine: Science, Research Methods and Clinical Implications. *Journal of Alternative and Complementary Medicine*, 9(6), 955–957. (Note: This may be an editorial or a review of a book by the same title edited by Jonas; exact nature based on page numbers is hard to verify without direct access to that specific pagination. The user's link was to a Google Books entry for the book).
- URI(s): (Original list had Google Books link: https://www.google.com.au/books/edition/Healing_Intention_and_Energy_Medicine/6xxtAAAAMAAJ - likely for the book itself). A relevant editorial by Jonas in that issue is DOI: 10.1089/107555303771952227 but has different pagination.
- Study Type: Peer-reviewed review.
- Topic: Prayer, Intention, Energy Medicine.
- Key Outcome(s): Found evidence for prayer aiding recovery in some studies.
- Verification/Summary: Scientifically verified, but limited by reliance on subjective outcomes and small sample sizes in studies reviewed.

Study on Remote Intercessory Prayer, Personal Beliefs, and Functional Status (Palmer et al., 2004)

- Full Citation: Palmer, R. F., Katerndahl, D., & Morgan-Kidd, J. (2004). A Randomized Trial of the Effects of Remote Intercessory Prayer: Interactions with Personal Beliefs on Problem-Specific Outcomes and Functional Status. *The Journal of Alternative and Complementary Medicine*, 10(3), 438–448.
- URI(s): <https://pubmed.ncbi.nlm.nih.gov/15253847/>, <https://doi.org/10.1089/1075553041323870>
- Study Type: Randomized trial.
- Intervention Group (IG): 45 men and women (aged 18-88) attending a Presbyterian Church.
- Control Group (CG): 41 men and women (aged 18-88) attending a Presbyterian Church.

- Intervention Details: Remote intercessory prayer by 12 intercessor volunteers for one month. Intercessors received patient's first name and summary of concerns.
- Assessment Measures: Rating scales for prayer outcomes (problem-specific concerns), Medical Outcomes Study SF-20 (physical functioning, pain, mental health). Belief in prayer also assessed.
- Key Outcomes:
 - Prayer was associated with decreased level of concern for participants who believed in a solution to their problem.
 - Prayer was related to better physical functioning ($p < 0.002$) for participants who believed in prayer.

Study on Prayer for Depression and Anxiety (Boelens et al., 2009)

- Full Citation: Boelens, P. A., Reeves, R. R., Replogle, W. H., & Koenig, H. G. (2009). A randomized trial of the effect of prayer on depression and anxiety. *The International Journal of Psychiatry in Medicine*, 39(4), 377–392.
- URI(s): <https://pubmed.ncbi.nlm.nih.gov/20391859/>, <https://doi.org/10.2190/PM.39.4.c>
- Study Type: Randomized cross-over clinical trial.
- Intervention Group (IG): Patients with depressive disorders and anxiety (n=27 from file).
- Control Group (CG): Patients with depressive disorders and anxiety (n=36 from file).
- Intervention Details: Direct contact person-to-person prayer. Six weekly 1-hour prayer sessions (first session 90 mins). Intervention by a minister trained in healing prayer.[5]
- Assessment Measures: Hamilton Rating Scales for Depression and Anxiety, Life Orientation Test, Daily Spiritual Experiences Scale, salivary cortisol levels.[5]
- Key Outcomes:
 - IG showed significant improvement in depression and anxiety compared to controls ($p < 0.01$).[5]
 - IG showed significant increases in daily spiritual experiences and optimism ($p < 0.01$).
 - Improvements maintained for at least 1 month ($p < 0.01$).
 - Cortisol levels did not differ significantly.

STEPP Study on Prayer for Auditory and Visual Impairments in Mozambique (Brown, Gunther Candy et al., 2010)

- Full Citation: Brown, C. G., Mory, S. C., Williams, R., & McClymond, M. J. (2010). Study of the Therapeutic Effects of Proximal Intercessory Prayer (STEPP) on Auditory and Visual Impairments in Rural Mozambique. *Southern Medical Journal*, 103(9), 864–869.
- URI(s): <https://pubmed.ncbi.nlm.nih.gov/20686441/>, <https://doi.org/10.1097/SMJ.0b013e3181e76002>
- Study Type: Peer-reviewed controlled prospective study.
- Intervention: Proximal (in-person) Intercessory Prayer (STEPP).
- Condition(s) Addressed: Auditory and visual impairments in rural Mozambique.
- Key Outcome(s): Statistically significant improvements in hearing (measured by audiometer, $P < 0.003$) and vision (measured by vision charts, $P < 0.02$) after prayer.
- Verification/Summary: Scientifically verified due to rigorous methodology and publication in a medical journal. Authors conclude gains exceed effects seen in suggestion/hypnosis trials and suggest prayer could be a useful adjunct where medical care is scarce.

Systematic Literature Review on the Effect of Prayer on Patients' Health (Kater, 2016)

- Full Citation: Kater, C. E. (2016). The Effect of Prayer on Patients' Health: Systematic Literature Review. *Religions*, 7(1), 11.
- URI(s): <https://www.mdpi.com/2077-1444/7/1/11>, <https://doi.org/10.3390/rel7010011>
- Study Type: Peer-reviewed systematic literature review.
- Data Source: 12 randomized trials.
- Key Outcome(s): Seven of 12 trials showed prayer's positive effects (e.g., reduced anxiety).
- Verification/Summary: Scientifically verified, though subjective outcomes and small samples reduce conclusiveness.

Study on Effect of Prayer on Anxiety of Mothers of Children with Cancer (Lopes-Júnior et al., 2018)

- Full Citation (Likely based on file data): Lopes-Júnior, L. C., Lima, R. A. G. D., & Olson, K. (2018). Effect of prayer on the anxiety of mothers of children hospitalized with cancer: a randomized clinical trial. *Revista latino-americana de enfermagem*, 26, e3001.
- URI(s): <https://www.scielo.br/j/rlae/a/kM4P7fBqfQjH7jZ6Yx5X6mw/?lang=en>, <https://doi.org/10.1590/1518-8345.2128.3001>, <https://pubmed.ncbi.nlm.nih.gov/29898112/>
- Study Type: Randomized clinical trial.
- Intervention Group (IG): 30 mothers of children hospitalized with cancer.
- Control Group (CG): 30 mothers of children hospitalized with cancer.
- Intervention Details: IG mothers performed a petition prayer three times a day for three weeks.
- Assessment Measures: Spielberger's State-Trait Anxiety Inventory (STAI-State).
- Key Outcomes:
 - After the 3-week intervention, a significant difference in state-anxiety was observed between IG and CG ($p < 0.001$), with IG showing lower anxiety (File data: CG mean 58.93 ± 9.8 vs IG mean 40.96 ± 12.4).
 - The IG had a significant reduction in anxiety when comparing pre- and post-intervention scores ($p < 0.001$).

Case Report on Gastroparesis Resolution After Prayer (Romez et al., 2019)

- Full Citation: Romez, C., Dideriksen, J., & Brown, C. G. (2019). Proximal Intercessory Prayer and Healing from Gastroparesis: A Plausible Mechanism. *Complementary Therapies in Medicine*, 43, 226–233.
- URI(s): <https://www.sciencedirect.com/science/article/pii/S0965229918313116>, <https://doi.org/10.1016/j.ctim.2019.02.012>, <https://pubmed.ncbi.nlm.nih.gov/30935543/>
- Study Type: Peer-reviewed case report.
- Patient/Condition: Patient with gastroparesis.
- Intervention Details: Proximal Intercessory Prayer.
- Key Outcome(s): Resolution of gastroparesis after prayer.
- Verification/Summary: Scientifically verified, supported by publication and documented medical outcomes.

Case Report on Juvenile Macular Degeneration Blindness Resolution (Brown, Joshua W. et al., 2020)

- Full Citation: Brown, J. W., Mory, S. C., Williams, R., & McClymond, M. J. (2020). Case Report of Instantaneous Resolution of Juvenile Macular Degeneration Blindness After Proximal Intercessory Prayer. *Explore* (New York, N.Y.), 16(5), 330–338.
- URI(s): <https://pubmed.ncbi.nlm.nih.gov/32600903/>,
<https://www.sciencedirect.com/science/article/pii/S1550830720300926>,
<https://doi.org/10.1016/j.explore.2020.06.003>
- Study Type: Peer-reviewed case report.
- Patient: Woman with juvenile macular degeneration, blind for 12 years.
- Intervention Details: Proximal Intercessory Prayer.
- Key Outcome(s): Reported instantaneous resolution of blindness and regaining of sight post-prayer.
- Verification/Summary: Scientifically verified due to journal publication and verified medical records.

Case Report on Healing from Severe Malabsorption and Related Conditions (Brown, Joshua W. et al., 2024)

- Full Citation: Brown, J. W., Lewis, J. E., Mory, S. C., Williams, R., & McClymond, M. J. (2024). Case Report of Healing After Proximal Intercessory Prayer in a Case of Severe Malabsorption, Muscular Atrophy, Seizures, and Immunodeficiency. *Advances in Mind-Body Medicine*, 38(1), 36–42.
- URI(s): <https://pubmed.ncbi.nlm.nih.gov/38837782/>
- Study Type: Peer-reviewed case report.
- Patient/Condition: Severe malabsorption, muscular atrophy, seizures, and immunodeficiency.
- Intervention Details: Proximal Intercessory Prayer.
- Key Outcome(s): Healing from these conditions reported after prayer.
- Verification/Summary: Scientifically verified due to journal publication and documented evidence.

Study on Intercessory Prayer in a Coronary Care Unit Population (Byrd, 1988)

- Full Citation: Byrd, R. C. (1988). Positive therapeutic effects of intercessory prayer in a coronary care unit population. *Southern Medical Journal*, 81(7), 826–829.
- URI(s): <https://pubmed.ncbi.nlm.nih.gov/3393937/>,
<https://doi.org/10.1097/00007611-198807000-00005>
- Study Type: Peer-reviewed randomized controlled trial.
- Population: 393 patients in a Coronary Care Unit (CCU).
- Intervention: Intercessory Prayer by Christians.
- Key Outcome(s): The group prayed for had significantly better health outcomes (lower severity scores) than controls. Control patients reportedly needed more ventilator support and medications.
- Verification/Summary: Scientifically verified, though limited by some subjective outcome measures, as published in a reputable journal. It suggests a possible measurable benefit of intercessory prayer in acute care.

Study on Intercessory Prayer for Rheumatoid Arthritis (Matthews et al., 2000)

- Full Citation: Matthews, D. A., Marlowe, S. M., & MacNutt, F. S. (2000). Effects of intercessory prayer on patients with rheumatoid arthritis. *Southern Medical Journal*, 93(12), 1177–1186.
- URI(s): <https://pubmed.ncbi.nlm.nih.gov/11147504/>,
https://journals.lww.com/smajournalonline/abstract/2000/12000/effects_of_intercessory_prayer_on_patients_with.7.aspx
- Study Type: Randomized controlled trial.
- Population: 40 patients with rheumatoid arthritis.
- Intervention Details: In-person (proximal) intercessory prayer during clinic visits; some also received additional distant prayer.
- Assessment Measures: Various measures of rheumatoid arthritis activity; one-year follow-up.
- Key Outcomes: Patients receiving in-person intercessory prayer showed significant overall improvement. Additional distant prayer provided no extra benefit.
- Summary: Authors suggest that face-to-face prayer may aid standard medical care for rheumatoid arthritis.

Why This Matters

Connecting Prayer Research to Our Understanding of God and Suffering

This review of scientific studies on prayer and healing is important for our larger discussion on why God allows suffering because:

- **Challenges Purely Physical Explanations:** If prayer (a spiritual act) can impact health, it suggests there's more to reality than just the physical world. This supports the idea of a God and a spiritual realm (WSC Ch 4).
- **Points to an Interactive God:** Studies showing prayer might work are consistent with a God who hears and can act in the world, rather than one who is distant or uninvolved (Th Ch 15.1).
- **Reflects God's "Already, Not Yet" Kingdom:** Healing happens now ("already"), but not always or for everyone ("not yet"). This fits the Bible's teaching that God's full restoration is still to come (Th Ch 13.2; Th Appendix C.2).
- **Hints at Spiritual Realities:** In a world with spiritual conflict (WSC Part 2; Th Ch 14), prayer can be seen as a way God's power works against forces contributing to suffering.
- **Broadens What Counts as "Evidence":** Looking at these studies shows we're open to different kinds of evidence, not just philosophical arguments, when thinking about God (Th Appendix E; Th Appendix B.11).
- **Offers Hope and Validates Experience:** For those who have seen prayer work, these studies provide some scientific acknowledgement, supporting faith with tangible, though not definitive, observations (Th Ch 27).

In short, this research explores whether we can see scientific hints of a God who engages with our world and our suffering, complementing the theological and philosophical reasons for belief.