



Beyond Belief

Is long-distance prayer an honest-to-God AIDS treatment?

April 1, 1997 By Michael Onstott

In his book *Surviving AIDS*, singer and activist Michael Callen wrote, “Religious sentiment certainly has not played any role in my own survival -- at least not so far as I can tell. I recently discovered that my Methodist mother has organized a prayer group that regularly prays for my healing. I was simultaneously deeply moved and horrified.”

Unlike Callen (who lived with AIDS for 12 years before his 1993 death), Philip Prout is an AIDS survivor who has consistently prayed for his own healing. But by 1995, he was dying. Despite taking various medications, he developed MAC and meningitis, could barely walk and was rapidly losing CD4 cells. Prout decided to become one of 20 PWAs enrolled in a six-month, double-blind, controlled study of something called remote prayer. That’s right: Healers from various spiritual traditions prayed long-distance for the improved well-being of particular individuals. The study, cosponsored by the University of California San Francisco, armed each healer with the first name, photo and brief medical history of an enrolled PWA. For at least an hour a day, each healer was to pray for -- but not contact -- one of the 10 in the “treated” (prayed-for) group; the other participants were in an “untreated” control group.

About a month after entering the study, Prout’s meningitis resolved, the MAC infection stabilized in his right knee, his CD4 cells increased, he gained 20 pounds and experienced a renewed sense of mobility, energy and purpose. Today, with his parents’ remote prayers added to his own prayers and standard drugs, Prout is healthier than he’s been in two years.

In early 1996, Prout got a letter from the study coordinator confirming his suspicion -- he had been in the prayed-for group. More dramatic, his group’s members experienced significantly greater recovery from illnesses and more-improved quality of life than members of the control group.

Although the study was small, these amazing findings are not unprecedented. A 1990 published survey found that 25 of 37 mostly peer-reviewed experiments with remote prayer showed significant results with various health problems. One of these was a 10-month, double-blind study of coronary-care-unit patients by cardiologist Randolph Byrd. Approximately half of the 393 patients were prayed for and half were not. Patients who received remote prayer experienced significantly fewer heart problems and required fewer antibiotics and diuretics.

Byrd’s experiment inspired other researchers to organize the study that Philip Prout joined. In turn,

that trial's results were so encouraging that a larger study of PWAs was commissioned. The 40-patient, six-month follow-up study at California Pacific Medical Center began last July and will be completed this spring.

Until last fall, I'd never been drawn to religious approaches to healing. But after struggling with AIDS for 10 years, I felt myself sliding. Pink and scarlet KS lesions were spreading over my arms and legs and throughout my colon, my CD4 cells were fading fast, and I'd lost 10 pounds in 10 days. Although I avoided panic, a kind of gnawing anxiety permeated my psyche. With nothing to lose, I decided to join the follow-up prayer study. Within two months, I made radical changes in my health regimen: A focus on stress reduction, nutritional supplements and Ayurvedic (Indian) herbs -- plus a kickoff of triple antiretroviral therapy.

Today I've resolved everything except the entrenched KS lesions, which have stabilized. I am still in the study, but somehow I don't feel "prayed for." I could be wrong, but I believe my progress has been entirely my own doing. Michael Callen felt the same way about the 25 long-term survivors he interviewed for *Surviving AIDS* (HarperCollins/New York City). Many noted their postdiagnosis embrace of religion or spirituality, but Callen wrote that they had "worked hard to stay alive" and "ought to take more of the credit."

Along with many scientists, Callen believed the idea of remote healing "makes no sense to someone as rabidly, rigidly rational as I am." But, citing a non-AIDS study showing benefit from this approach, he mused, "Perhaps humans communicate concern for each other in ways not yet understood."

That's precisely why we need answers. If a new AIDS drug began to show the same apparent efficacy as remote prayer has, we'd be demanding answers.