THE POWER OF PRAYER

Kristen Luttenberger
RN, MSN, CCRN-CMC, PCCN, APN-c
“Everyday at 5pm in the afternoon all patients and staff not in critical care gather in the middle of the hospital to pray. They make the entire hospital vibrate with the sound. And on the wards afterward, fear and anxiety become absent and are replaced with an atmosphere of faith.”
HOW WOULD YOU FEEL IF YOUR HEALTHCARE TEAM PRAYED FOR YOU?
What percentage of patients who actively pray for health reasons mention it to their health care providers?

10%

Archives of Internal Medicine
-2004
More than half (55%) of Americans said they pray every day, according to a 2013 Pew Research survey. 23% said they pray weekly or monthly. 21% seldom or never. Even among those who are religiously unaffiliated, 21% said they pray daily. Another survey conducted in 2012 found that 76% of Americans agreed with the statement “prayer is an important part of my daily life,” a percentage that has remained relatively stable over the last 25 years. 92% say there is a God and 83% say this God answers prayers, according to a USA TODAY/Gallup Poll of 1,000 adults.
PRAYER VS. RELIGION

“Prayer is the Native Language of the Soul”

➢ Long before Moses parted the Red Sea…
➢ Before Buddha described the path toward Nirvana…
➢ Before Christ died on the cross…
➢ Before Mohammed revealed the message of the Koran…

There was prayer…
The Prayers of 911

Did Your Religion Matter?
### PRAYER VS. RELIGION

“Prayer is a feature of every living religion”

<table>
<thead>
<tr>
<th>Religion</th>
<th>Details</th>
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</table>
| Judaism and Christianity | • Biblical understanding of God as a personal being who hears and responds to people  
  • Ex. Adam, Abraham, and Moses had intimate dialogues                                       |
| Islam               | • Prayer is an act of adoration and incorporated into daily routines  
  • Salat - ritual prayer sited 5x per day while facing Mecca                                       |
| Hinduism            | • Daily prayers are emphasized over personal petition  
  • Vedas - a collection of ancient hymns.                                                      |
| Buddhism            | • Monastic prayers are practiced morning, noon, and night to the sound of a small bell |
| African Traditional | • Pray to various secondary deities as well as to their ancestors  
  • These divinities serve as intermediaries between humans and the primary God (libation, ceremonies) |
PRAYER DEFINED/TYPES

“A solemn request or thanks giving to God or an object of worship” - Concise Oxford Dictionary (2007)

1) Prayer of Transaction- A personal dialogue with God
2) Prayer of Petition- Makes a personal plea to God to intervene
3) Prayer of Submission- Giving up everything to God
4) Prayer of Intercession- Asking God something for others**
5) Prayer of Confession- Expressing repentance/forgiveness
6) Prayer of Lamentation- Crying out in distress/vindication
7) Prayer of Adoration- Giving honor and praise
8) Prayer of Invocation- Summoning God’s presence
9) Prayer of Thanksgiving- Offering gratitude
Byrd Study (1988)

Methods - Over 10 months 393 patients admitted to a CCU were randomized to a Judeo-Christian intercessory prayer group (outside the hospital) or control group (no prayer)

Results - The prayer group had less CHF, less diuretics, less antibiotics, fewer cases of pneumonia, fewer cardiac arrests, and less frequently intubated and ventilated

Limitations - Other prayers for the control group, prayers for oneself, only “prayer-receptive” were agreeable
Harris Study (1999) Repeated Byrd Study

“Patients were not aware they were being prayed for”

**Methods**- 990 CCU patients randomized into intercessory prayer group or not. Prayer group prayed daily for 4 weeks.

**Results**- 11% reduction in MAHI-CCU (adverse outcomes) score in prayer group but not statistically significant. LOS was same. Very similar results as Byrd

**Limitations**- No one knew the study was going on (unethical?), intercessors were given less info on patients then Byrds study, other prayers, MAHI-CCU scoring system is not a validated tool
O’Laoire Study (1997)

Methods- Examined the effects of intercessory prayer on self-esteem, anxiety, and depression (by pre & post surveys) in 406 subjects (volunteers from newspaper adds). 90 prayer volunteers went to a prayer class and had to document in prayer log.

Results- No significant differences were found between prayer and non-prayer groups in any of the measures. However those who prayed for themselves scored higher with their own self-esteem, anxieties, and depression scores.

Limitations- Agent did not pray properly, outside prayer, generalizability, using tests by mail (reminders, feeling pressure to finish survey etc..)
Methods-219 women aged 26-46 who were consecutively treated with IVF over a 4 month period in Seoul, Korea and were randomized into distant intercessory prayer or no prayer groups in the US, Canada, and Australia.

Results- The intercessory prayer group had a higher pregnancy rate as compared to no prayer (50% vs. 26%, P=.0013 for women over 30. The prayer group showed a higher implantation rate (16.3% vs. 8%, p=.0005)

Limitations- Possible coincidence of unknown variables that can effect pregnancy rates, prayer intercessors were known by authors?
Leibovici Study (2001)

Methods- 3393 adult patients whose bloodstream infection was detected at the hospital from 1990-1996. In July of 2000 patients were randomised to a retroactive prayer group and control group.

Results- Remote, retroactive intercessory prayer was associated with a shorter stay in the hospital (p=0.01) and shorter duration of fever (p=0.04) in patients with bloodstream infection. Mortality rates were lower with the intervention group but not statistically significant (p=0.4).

Limitations- Claims perfect blinding and flawless design. However many critics of this work.
**Krucoff Study (2005)**

**Methods**
- 748 patients undergoing elective cath/PCI in nine USA centers were assigned either off-site prayer or no off-site prayer and MIT therapy or none.
- Adverse cardiovascular events and 6-month readmission or death were analyzed.

**Results**
- Neither masked prayer nor MIT therapy significantly improved clinical outcome after elective catheterization or percutaneous coronary intervention.

**Limitations**
- Patients were not informed (double blinded, ethical?), off protocol prayers, doses of MIT?
Benson (STEP) Study (2006)

Methods- Patients at 6 US hospitals were randomly assigned to 1 of 3 groups: 604 received intercessory prayer and 597 did not after both being informed they may or may not receive prayer; and 601 received intercessory prayer after being informed they would receive prayer. Prayer was provided for 14 days, starting the night before CABG.

Results-Certainty of receiving intercessory prayer was associated with a higher incidence of CABG complications 59% vs. uncertain groups 52% & 51%.

Limitations-Intercessors received limited patient info, no name, sex, age, progress etc…Did not restrict others to pray.
Cochrane Database of Systematic Review on Intercessory Prayer

“Systematic reviews of primary research in human health care and health policy, and are internationally recognized as the highest standard in evidence-based health care”

- Analyzed 10 studies from MEDLINE and EMBASE (2007)
- Results are equivocal and the evidence does not support a recommendation either in favour or against the use of intercessory prayer
Common Themes in Prayer Research

- What constitutes the right “dosage” of prayer? That is how long or how often should you pray?
- Should someone know they are being prayed for, does that make a difference, should they pray for themselves?? Is there a “response expectancy”
- There will always be “background interference” you can’t stop others from praying (unethical)
- What happens when prayer intensifies, more people, spiritual healers, nuns, monks, priests? Are their prayers more important?
- Very limited research on other religions other then Christianity.
- Is it possible to scientifically study the divine?
- Scientific literature on prayer is in its infancy
People who believe in God and pray during illness have better health outcomes than those who do not (Oxman 1995, Koenig 1992, Koenig 1998).

For some, faith is an effective means of stress reduction which reduces cardiac morbidity (Blumenthal 1997).

Religious beliefs and practices were consistently associated with greater life satisfaction and psychological well-being, increased hope and optimism, less anxiety and fear, and decreased depression (Sternthal, et al. 2010).

Among blacks/African Americans, there is a 14-year advantage in longevity for those who attend more than once a week religious services than those who never attend (Hummer, 1999).
<table>
<thead>
<tr>
<th>Study</th>
<th>Effect of Muslim Prayer (Salat) on EEG and Its Relationship with Autonomic Nervous System (ANS) Activity</th>
<th>EEG Spectral Analysis on Muslim Prayers</th>
</tr>
</thead>
<tbody>
<tr>
<td>Author</td>
<td>Doufesh et al. (2014)</td>
<td>Doufesh et al. (2012)</td>
</tr>
<tr>
<td>Objectives</td>
<td>To investigate Muslim prayer (salat) on RPx of EEG and the autonomic nervous system</td>
<td>To investigate relaxation from Muslim prayers (salat) by measuring brain activity via EEG</td>
</tr>
<tr>
<td>Methods</td>
<td>30 healthy muslim men with EEGs connected before, during, and after salat</td>
<td>9 Muslim subjects who performed 4 cycles of Dhuha prayer with and without recitations and EEG</td>
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<tr>
<td>Results</td>
<td>During salat, parasympathetic (PNS) activity increased and sympathetic decreased.</td>
<td>Increased alpha amplitude suggesting PNS activation indicating a relaxation state</td>
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</tbody>
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Salat Postures and Movements

- **Standing**
- **Bowing**
- **Prostration**
- **Sitting**

Alpha waves on EEG = Relaxation, mental inactivity, and PNS stimulation
Autonomic Nervous System

“A division of the peripheral nervous system that influences the function of internal organs”

Regulates:
- Heart rate
- Blood Pressure
- Digestion
- Respiratory rate
- Pupillary response
- Urination
- Sexual arousal
<table>
<thead>
<tr>
<th>Sympathetic Nervous System “Fight or Flight”</th>
<th>Parasympathetic Nervous System “Rest &amp; Digest”</th>
</tr>
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<tbody>
<tr>
<td>Diverts blood flow away from the skin &amp; GI tract-vasoconstriction</td>
<td>Dilating blood vessels leading to the GI tract, increasing blood flow</td>
</tr>
<tr>
<td>Dilates bronchioles which allows for greater oxygen exchange-blood flow</td>
<td>Constricting the bronchioliolar diameter when the need for oxygen has diminished</td>
</tr>
<tr>
<td>Increases heart rate and contractility</td>
<td>Cardiac relaxation</td>
</tr>
<tr>
<td>Dilates pupil and allows more light in</td>
<td>Pupil constriction for closer vision</td>
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<tr>
<td>Provides vasodilation for coronary vessels</td>
<td>Accelerates peristalsis</td>
</tr>
<tr>
<td>Constricts intestinal &amp; urinary sphincters</td>
<td>Is activated by rest, sleep, meditation, and relaxation therapies</td>
</tr>
<tr>
<td>Inhibits peristalsis</td>
<td><strong>Promotes healing, regeneration and nourishment of the body, and upregulates the immune system</strong></td>
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</table>
Cortisol—Steroid hormone from adrenal gland which is secreted in response to stress

- Weakens the activity of the immune system
- Reduces bone formation
- Inhibits collagen (molecule that makes connective tissue)
- Lengthens wound healing
- Counteracts insulin-hyperglycemia
- Stimulates gastric acid secretion
- Acts as a diuretic
- Increases blood pressure
- Shuts down reproductive cycle
If Prayer triggers the PNS what does it do??

- Allows the body to heal
- Triggers mechanisms for counteracting stress
- Activates the immune, hormonal, and cardiovascular systems conducive to healing
- Decreases HR and BP
- Decreases episodes of angina
- If you improve overall symptoms then medical expenses decline
Should nurses and health professionals pray for or with patients?

1) Asses prayer needs, not just religion/cultures
2) Prayer should never be forced
3) Prayer should be apart of nursing care if spiritual needs are identified
4) If nurses are willing to pray they should. It should be encouraged by colleagues and administration
5) Prayer relationship can be a great comfort and improve the care-giver/patient relationship.
Thank you!!


Levin JS· (1994). Religion and health: is there an association, is it valid, and is it causal? *Social Science & Medicine, 38*(11):1475-82.


