ESOTERIC HEALING TRADITIONS: A CONCEPTUAL OVERVIEW

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This paper presents, for the first time, a comprehensive scholarly examination of the history and principles of major traditions of esoteric healing. After a brief conceptual overview of esoteric religion and healing, summaries are provided of eight major esoteric traditions, including descriptions of beliefs and practices related to health, healing, and medicine. These include what are termed the kabbalistic tradition, the mystery school tradition, the gnostic tradition, the brotherhoods tradition, the Eastern mystical tradition, the Western mystical tradition, the shamanic tradition, and the new age tradition. Next, commonalities across these traditions are summarized with respect to beliefs and practices related to anatomy and physiology; nosology and etiology; pathophysiology; and therapeutic modalities. Finally, the implications of this survey of esoteric healing are discussed for clinicians, biomedical researchers, and medical educators.

Key words: Healing, religion, spirituality, pathophysiology, treatment, health, medicine

CONCEPTUAL OVERVIEW OF THE ESOTERIC

Contemporary religious scholars typically differentiate two general types of religious expression. One, the outer or exoteric path, comprises forms of expression associated with formal religious institutions and publicly known belief systems. The beliefs, practices, and trappings of the historic religions and denominations constitute exoteric religion. The esoteric is the religion of Roman Catholic popes, Jewish kippot and tallitot, the Muslim hajj, the Hindu Mahabharata, the Jain tattvas, the Tibetan Buddhist lineages, organized worship liturgies, confessional prayers and rituals, religious holidays and festivals, dogmas and doctrines, theological seminaries—in short, the public face of religion.

By contrast, the inner or esoteric religious path represents the mystical, symbolic, hidden, or initiatory way of connecting with God or the cosmos. Esoteric religion is the stuff of meditation, gnosis, arcane and secretive teachings, gurus, initiation, physical austerities and exercises, and concomitant mystical, transcendent, or unitive states of consciousness. A common observation of both scholars and mystics is that although esoteric religions may differ dramatically in their expressions of spirituality across the many “dimensions of the sacred”—that is, in terms of ritual practices, beliefs, historical myths, cultic activities, sanctioned experiences, liturgy, sacred architecture, and polity—features of their respective esoteric, or inner, paths converge along a common core path. This underlying esoteric meta-path has been denoted with a variety of terms: the “primordial tradition,” the...
“secret wisdom,”* the “forgotten truth,”* the “ancient theology,”* the “ageless wisdom,”* and “the Path.”*

Although most (but not all) exoteric religions seem to possess an esoteric counterpart, not all esoteric paths have an identifiable exoteric counterpart—either now or historically. Esoteric spiritual paths do, however, typically have associated with them particular beliefs and practices related to health, healing, and medicine. The near universality of this observation perhaps speaks to the inextricable connection of body, mind, and spirit and a rejection of the modern tendency to conceive of human beings strictly in mechanistic terms. Moreover, just as respective exoteric religious and medical traditions appear correlated (eg, the individual-oriented, demystified, rationalized materialism of both mainline Protestantism and allopathic medicine; the nondualism of both contemplative Hinduism and Ayurveda), so too do respective esoteric cosmological and healing systems go hand in hand. Further, just as there appears to be a “perennial philosophy”—a common esoteric spiritual tradition—so it stands to reason that esoteric healing traditions exhibit common elements. This is explored in the third section of this article.

The section that follows briefly outlines the health- and medical-related beliefs and practices espoused by several categories of esoteric traditions. These categories are by necessity rather broad (eg, the brotherhoods, shamanic, and new age traditions), and within each category passing reference may be made to multiple esoteric systems, which may or may not be historically connected. The objective here is not to provide encyclopedic detail, but rather a concise overview of key facts and features, with citation of helpful sources.

MEDICINE AND HEALING IN THE ESOTERIC TRADITIONS

As noted earlier, the term esoteric covers a lot of conceptual ground. Several distinct esoteric traditions, or classes of esoteric systems, can be identified. Although in their respective beliefs and concomitant practices and rituals these traditions are not entirely discrete (ie, there is considerable overlap in both history and content), they tend to self-identify as unique gateways to the hypothetical esoteric realms. This section provides a brief summary overview of the history and most basic principles of the systems of healing propounded by these major esoteric traditions.

The Kabbalistic Tradition

The Hebrew word kabbalah means “tradition” and refers to the mystical tradition within Judaism.11 The kabbalistic tradition comprises key literary works, such as the Zohar, an esoteric commentary on the Hebrew Bible, and the Sefer Yitzirah, a discourse on metaphysical and numerological features of creation, energy, matter, and higher consciousness, as well as other works by medieval Jewish mystics. Kabbalah encompasses two main branches. Speculative or theoretical kabbalah is concerned with the nature of God, man, and the universe. This dimension of kabbalistic exploration is responsible for many esoteric concepts well known outside of strictly kabbalistic circles: the etz chayyim, or tree of life; the s'firot, or spherical energy centers connecting the transcendent to the manifested world; the four worlds or planes of manifestation (known as atzilut, b'riah, yitzirah, and asiyah, and corresponding, roughly, to the familiar causal, mental, astral, and physical planes of Theosophy); the sh'khinah, or divine presence; the ein sof, or infinite void that preceded creation; and the art of g'matria, or scriptural interpretation based upon the numerical identity of the Hebrew letters. Practical kabbalah emphasizes spiritual practices such as meditation as means of mystical union with God. The principles of practical kabbalah also inform the magical work of Western occultists seeking to control and harness the energies of the universe for ritual purposes. Although modern Jewish scholars generally consider popular writing on the latter as a lurid distortion of kabbalistic teachings, even “practically worthless,”12 it has reached the public eye in recent years through the activities of assorted rock stars and Hollywood celebrities and has contributed to current misperceptions of kabbalah.

Concurrent with the development of practical kabbalah over the past millennium—and possibly predating it, if traditional sources are correct—there has risen a stream of Jewish folk medicine based on equal parts Biblical and rabbinic teachings, on the one hand, and speculative kabbalah, on the other. The encyclopedic Biblical and Talmudic Medicine,13 for example, reads like a comprehensive medical textbook, outlining etiologic, pathophysiological, and therapeutic information culled from the Torah and from Talmudic and Midrashic sources. Contemporary scholars have taken this material and, armed with insights from kabbalistic mysticism, have written treatises expounding on human anatomy,14 detailing the healing power of herbs and natural remedies,15 and describing the diagnostic or therapeutic efficacy of phenomena such as divination16 and alchemy.17 Much of this material is attributed to rabbinic scholars, sages, and mystics, including Jewish medieval philosopher-physician Moses ben Maimonides, who wrote at length on medical topics.18 Kabbalistic insights into health, disease, and healing are also accessible to individuals armed with the requisite knowledge of g'matria to enable identification of the hidden meaning of Biblical texts.19 Kabbalistic beliefs about health and illness and approaches to healing are central to what Epstein has termed the “Western spiritual medical tradition.”20 Among the seminal contributions of this ancient system of “Hebraic medicine,” according to Epstein,21 is the idea of “the bodymind unity”—the inseparability of body and mind. One cannot even speak of cause and effect when describing their interconnection. This is in contrast to other more recently emergent systems of holistic healing that acknowledge linkages between body and mind and attribute illness and healing to mental or emotional agency, yet still view body and mind as distinct, if connected, entities. This perspective on the essential oneness of body and mind is clearly informed by kabbalistic principles, such as the idea that all manifestation and differentiation are the result of a common identity as “sparks” emanating from the Creator.

The Mystery School Tradition

In the few centuries preceding the Common Era, secret cults of initiation flowered in the Greco-Roman world, including Egypt and much of Asia Minor. These societies, led by hierophants,
offered graded instruction in the divine mysteries that governed both cosmogony—the creation and origins of the universe—and the spiritual evolution and self-actualization of individual seekers. Among the most celebrated schools were those preserving and ceremonializing the Eleusinian, Orphic, and Dionysian mysteries with communal activities, rites, and festivals. A common theme of mystery school teachings was that divine revelation is accessible to sufficiently prepared and initiated supplicants or students. Among the most lasting and influential sources of such revelation was the god-man Hermes Trismegistus, a hybrid of the Greek Hermes and the Egyptian Thoth. The Hermetic school was founded to pass along revelations on occult and scientific matters to initiates.

In Angus' classic and authoritative work, *The Mystery-Religions*, mystery schools are described as arcane religions characterized by emphases on symbolism, redemption, gnosis, emotion-inducing sacramental drama, eschatology, personal rebirth, and cosmic interest. For the individual seeking reception by a respective school, candidacy comprised three stages: *katharsis*, or preparation and probation, including the swearing of secret vows; *muses*, or initiation and communion, for purposes of beginning the process of regeneration; and *epopteia*, or experience of an epiphany or theophany, leading to blessedness and salvation, or even immortality. Initiation was the central act in this drama, from the individual's perspective, and the fulcrum by which any subsequent knowledge or experience was gained. Specifically, initiation into the mysteries sought "to open the immortal eyes of man inwards": exalt his powers of perception until they could receive the messages of a higher degree of reality." In practice, this consisted of experiencing a ritual death of the physical body and subsequent resurrection into a new body with new capabilities of drawing down gnosis, or secret wisdom, often regarding the functioning of the body itself. (pp136-157)

Much of the information received by initiates thus spoke to matters related to normal and pathological physiology and to the salutogenic process by which pathophysiological states could be reversed. Nearly all of the ancient civilizations that sponsored mystery schools (Egypt, Babylonia, Assyria, Phoenicia, India, Iran, Greece, and Rome) also hosted a pantheon of deities accessible to oracles, priests, and initiates for purposes of facilitating healing. Through associated norms and rituals governing interaction and communion with these sources of gnosis, the beliefs and practices promulgated by the mysteries, as far as medicine was concerned, were ubiquitous and widespread. Across schools, deep fonts of revealed wisdom were available concerning how to understand and approach health—one's own, that of another person, and in theory—and how to effect physical healing. Within the Greek healing cult of Aesclepius, for example, initiated priest-physicians oversaw great healing temples and shrines, operated medicinal springs, diagnosed and treated disease through interpreting patients' dreams, and marshaled a therapeutic armamentarium that correlates with what today would be termed natural hygiene: fresh air, clean water, sound diet, and wholesome personal habits. The most famous Aesclepinean initiate was Hippocrates, whose reforms hastened the evolution of medicine from metaphysical to scientific discipline.

The Gnostic Tradition

In the couple of centuries before and after the time of Jesus, a pair of sectarian religious traditions respectively flourished in the Holy Land. The Essenes, a minor branch of Judaism, and the gnostics, a name much later given to a class of Christian heresies, were distinctive and mostly unrelated movements. But they were similar in certain respects and shared some common influences. In contradistinction to the nascent rabbinic Judaism of the day, the Essenes were monastic, often celibate, communal, pacificist, and vegetarian. According to the first-century writings of Josephus, they were believers in fate and in the immortality of the soul, stressed the importance of personal righteousness, and "live the same kind of life as do those whom the Greeks call Pythagoreans," one of the mystery schools of antiquity. The Dead Sea Scrolls, a cache of manuscripts uncovered between 1947 and 1956, provide a glimpse into the religious and secular life of the Qumran community, believed to be Essene.

Contemporaneously, the discovery in 1945 of about a dozen Coptic codices in Nag Hammâdi, Egypt, provided access to the beliefs and practices of various groups of early Christians whose heterodox views about God, Jesus, and the nature of the world and of human beings set them apart from the hegemonic Roman church. Like the Essenes, the gnostics were typically monastic and ascetic, they were contemplative, and they affirmed the possibility of mystical insight into man's higher nature and the nature of God and creation, a gnosis that the early church fathers could not tolerate. Both Essenes and gnostics were characterized by dualistic beliefs—in heaven and hell, good and evil, light and darkness, body and soul—possibly through exposure to Zoroastrian influences. The combination of mystical, ascetic, and dualistic ideologies, especially with respect to the human body, promulgated a vaguely shared perspective on the maintenance of health and on healing.

A possible link between the Essenes and gnostics may be the Therapeutae, a monastic order of healers famously described by Philo in his *De Vita Contemplativa*. The Therapeutae are thought to be an offshoot of the Essenes who later established themselves near Alexandria, Egypt. Philo's writings postdated the demise of the sect, and much of what is popularly believed about the Therapeutae, especially derived from contemporary writings of modern neo-Essene groups, is likely speculative at best or apochryphal. According to Philo, the Therapeutae resorted to fasting and prayer, were "devoted wholly to meditation and to the practice of virtue," and, significantly, "process an art of medicine more excellent than that in general use in cities (for that only heals bodies, but the other heals souls)." They were more contemplative than the practical Essenes, and their monastic self-reflection is speculated to be an influence on the gnostics, whose own sacred writings contain references to healing that are resonant with psychodynamic theories and the kinds of inner work characteristic of transpersonal and humanistic therapies. The Gospel of Thomas, for example, attributes to Jesus the following: "If you bring forth what is within you, what you have will save you. If you do not have that within you, what you do not have within you will kill you" (Saying 70).
The Brotherhoods Tradition

Influenced and informed by the teachings and rites of prior esotericists, especially those originating in the ancient mystery schools, medieval brotherhoods arose to preserve and transmit the secret wisdom to generations of initiates. Modern Freemasonry was revived in 1717 as a lodge of masonic guilds, but its origins lie centuries earlier, in the Templar Knights and a stream of other secretive brotherhoods that date back to before the Common Era. The esoteric doctrines of speculative masonry may also have been informed by contact between Templars and Isma'ilis, or “Assassins,” a proto-Sufi sect that flourished in Egypt, and elsewhere, from the 11th to 13th centuries. Subsequent groups evolved out of this lineage, including the Rosicrucians and various sects and organizations devoted to the study of alchemy and other occult sciences for purposes of spiritual growth and illumination.

The brotherhoods were, and are, graded initiatory orders, preserving, according to their myths of origin, ancient mysteriosophy–arcane systems of knowledge, much of which pertains to the healing arts. Brotherhood teachings have emphasized concepts of perfection and balance, attainable through measured progress. The Rosicrucians’ “harmonium” and the Martinists’ “reintegration” exemplify the centrality of equilibrium and wholism within this world view. The alchemical search for the mythic philosopher’s stone, said to transmute base metals into gold, was really a quest for enlightenment and immortality through purification of the physical, mental, emotional, and spiritual vehicles and concomitant life energies. So much of the practical work of alchemists was thus medicinal—preparation of herbal elixirs to hasten these ends. The most celebrated alchemist, the 16th-century Swiss astrologer and occultist Theophrastus von Hohenheim, known as Paracelsus, was also a physician whose eclectic Hermetic-influenced theories of illness and healing emphasized the healing power of nature and of natural substances.

To achieve and restore an integrated balance, perfection, wholeness, and harmony—in oneself or in others—the brotherhoods have also practiced more subtle and ethereal forms of healing. Among the higher degrees of Rosicrucian initiation is a module of instruction on absent healing through a step-situation process of clairvoyant diagnosis and distant mental intervention. This technique is grounded in concentration, visualization, empathy, humility, and prayer as the most effective way to maintain an open and clear channel to “the Cosmic,” the source of all being. Interestingly, these same elements are almost universally acknowledged as essential by contemporary practitioners of healing at a distance, regardless of background or training. The esoteric orders, according to Dion Fortune, also practiced even more unusual forms of healing, including “a method of healing by substitution, in which, by extreme compassion with the suffering of a beloved one, the suffering is experienced in the very self, and then, by the appropriate reaction and realization, is expiated upon a higher plane.” This procedure is functionally identical to the healing-by-proxy method taught by some contemporary subtle energy practitioners.

The Eastern Mystical Tradition

Concurrently, throughout Asia, transmission of esoteric wisdom from teachers to students served as a reliable conduit of health-related instruction that drew on both sacred writings and the influential medical theories of the ancient Greeks. The Indian subcontinent in the first millennium of the Common Era was an especially fertile region for theoretical speculation and practical application. In his Yoga-Sūtras, a seminal text for rāja-yoga and the Yoga philosophy generally, the sage Patañjali devoted an entire section to the development of siddhis, or supernatural powers attainable through advanced meditative practices. The efficacy of these techniques was validated for human physiology through the work of Elmer Green, of the Menninger Foundation, whose laboratory investigations of Swami Rama, a contemporary rāja-yogi, showed him capable of voluntarily modulating his brainwave patterns, creating and dissolving subcutaneous tumors and cysts at will, and knowing entering and exiting a second state of atrial flutter.

The Sāṅkhya philosophy, another of the six philosophical systems of India, also spawned a body of medical knowledge in the form of Ayurveda, but this school, by now a modern and scientific counterpart to allopathic medicine, must be considered esoteric in the present context. However, it too has an esoteric counterpart in the many existing theories and techniques of panic and bioenergetic healing, also informed in large part by principles of Traditional Chinese Medicine. Buddhism, as well, has an ancient tradition of canonical and noncanonical writing on matters related both to wellness and illness (regarding determinants of health, suffering, sickness, mental illness, and substance abuse) and to caring and curing (regarding appropriate medical treatments, guidance for caregivers, bioethical decision making, and navigation of life-course transitions, including death). Detailed instruction exists on almost every important aspect of health, healing, and medicine throughout the Pali, Chinese, and Tibetan Buddhist canons. In The Healing Buddha, for example, Birnbaum documents the veritable materia medica found within the Pali Buddhist Vinaya-Pitaka: natural and mineral substances such as tallow, roots, astringents, leaves, fruits, resins, and salts prescribed for conditions ranging from “wind afflictions” to rheumatism, constipation, itches, boils, sores, eye diseases, jaundice, snakebite, and poisoning.

Within Tibetan Buddhism, a sophisticated medical system developed that, although drawing upon earlier Hindu and Buddhist therapeutic traditions and sharing elements of the Greek humoral system, is essentially sui generis. The Tibetan system of etiology, diagnosis, and treatment is based on principles outlined in a fourth-century Indian collection brought to Tibet and translated into Tibetan in the eighth century, known as the rGyud-bZhi, or Four Tantras. A key etiologic theme is imbalance, which resonates with the traditional Buddhist view that falling out of balance—whether physically, mentally, or spiritually, or through succumbing to aggression, desire, or ignorance—is a primary cause of suffering, a state “that pervades virtually every experience.” Imbalances may also occur in the context of a triad of essential elements called chi, shara, and bhadabha, roughly equivalent to space, energy, and matter, respectively.
Restoring balance requires remediing physical symptoms of excess, deficiency, and disturbance, accomplished through various means including virtuous behavior, a natural diet, folk medicinals, and accessory therapies such as massage or moxibustion. Mental health and well-being can fall out of balance, as well, and can be restored through meditative practices that cultivate happiness.

The Western Mystical Tradition
A phenomenon mostly of the past couple of centuries, a uniquely Western esoteric tradition has emerged as a repository of ancient, arcane learning, both theoretical and practical. Miscellaneous kabbalists, modern gnostics, and brotherhoods are occasionally considered to be part of a Western mystical tradition, so named, but the phrase is more often reserved for non-denominational groups with a strong intellectual emphasis on occult or metaphysical instruction drawn from amongst the teachings and legends of all of the previously catalogued traditions. Western esotericism, collectively and in contemporary form, derives its concepts, theories, and practices from kabbalists (especially techniques of practical kabbalah), the mystery schools (especially with respect to the function of initiation and the role of adeptship), gnosis (notably the process of seeking and receiving “illumination”), the brotherhoods (organizationally and in their emphasis on preservation of and graded exposure to protected wisdom), and Eastern mystics (especially the Buddhist concept of the bodhisattva, or enlightened master, whose guidance is accessible to those who learn how to navigate the inner planes of consciousness). Theosophy and neopaganism constitute two major branches of Western esotericism outside of the brotherhoods, and much of what has followed has evolved either from Theosophy (eg, the Hermetic Order of the Golden Dawn, the Anthroposophical Society, the Society of Inner Light, the Lucis Trust Arcane School) or from a hybrid of both branches combined with gnostic and/or masonic elements (eg, the Ordo Templi Orientalis and related groups).

This is not to say that the Western mystical tradition possesses no original elements. Esoteric groups in the West exhibit, by degrees, greater Christocentricity, such as among the Anthroposophists, and in some respects are simultaneously more sympathetic to pagan features of cosmogony, anthropogeny, and theories of the human manipulability of matter and consciousness. Contemporary craft, or magickal, work—purposes of healing and otherwise—is strongly influenced by equal parts kabbalistic cosmology and the practices of ancient paleopagans and mystery school initiates (eg, skrying, astral projection, “pathwork,” and communication with higher consciousnesses). The practice of healing emphasizes focused intentionality, affirmation, and meditative techniques, in keeping with the assertion that physical matter can change in response to the action of the mind or will.

The influence of concepts first popularized by Theosophists in the late 19th century is widespread, informing most of what Western esotericists believe about the multiple planes of existence, the subtle anatomy of human bodies, conscious evolution, karmic justice, reincarnation, and the purpose of life. Theosophists, beginning with H.P. Blavatsky’s *The Secret Doctrine* in 1888, introduced the West to a trio of influential concepts for the much later birth of holistic medicine: the existence and operation of “thought forms,” the significance of the chakras for healing, and the functioning of the “subtle” (ie, etheric, astral, and mental) bodies in transducing potentials of thought and emotion, for example, to the physical body from the causal body or eternal “ego monad.” Other concepts are just as important, notably the seven “rays” or human temperaments, but they have not caught on as widely within contemporary alternative healing. This terminology is no doubt confusing for novices, and Theosophists and their followers have produced a cornucopia of writings on esoteric features of health, disease, and healing. The Anthroposophists have taken things further, producing a comprehensive philosophy of medical thought and practice based on the prolific teachings of Rudolf Steiner. Likewise, the esteemed Golden Dawn adept, Israel Regardie, described a system of absent healing combining prayer, meditation, visualization, and higher attainment that both recalls certain techniques of the old initiatory brotherhoods and anticipated and informed the contemporary perspective on noncontact healing.

The Shamanic Tradition
The term *shaman* properly references a hierophant of the indigenous people of Siberia, Manchuria, and Central Asia, yet has come to be adopted as a generic label for medicine people and spiritual healers across a variety of native tribes and cultural groups. By whatever name, the shaman was/is a kind of high-priest physician of the primordial ur-religions dating to prehistory and extant throughout parts of North America, South America, Africa, Asia, and Polynesia. It is difficult to generalize about belief and practice across such a wide sweep of cultures, yet shamanic traditions are typically characterized by degrees of animism, spiritism, polytheism, wholism, and specialized role fillers who access and provide access to the imaginal, or unseen, realms. This is mostly so whether one is referencing Trobriand spirits, Yoruba orisa divinities, or innumerable constituent elements of other tribal-specific Weltanschauung, or world views. Across cultures, the shaman regulates and officiates ritual acts that cohere communities of people through normative understandings of space, time, life purpose—and disease etiology—and provides entrée to states of consciousness from which an identified “patient” may return healed or otherwise restored. Ritual is an essential element here—an “anti-machine,” as described by Dagara medicine man Malidoma Patrice Somé, that delivers one from the fast-paced outer world to a special place where healing is possible.

Throughout these cultural traditions, commonalities among etiologic theories can be observed. A fascinating and comprehensive anthropological study of records from 139 indigenous cultures, funded by the National Science Foundation in 1969, identified five theories of natural disease causation (infection, stress, organic deterioration, accident, and overt human aggression) and eight theories of supernatural disease causation (fate, ominous situations, contagion, mystical retribution, soul loss, spirit aggression, sorcery, and witchcraft) which, although not universally present, taken together exist as features of the etiologic understandings of most of these cultures. Unlike modern Western medicine, whose practice “has become increasingly dis-
and so on.65 Intuitive versus intellectual; advisory versus authoritarian; health versus defeating pathology; etiologically multifactorial; more importantly, in terms of world view: focus on restoring with allopathic medicine not just in terms of what each does, but philosophy and clinical practice style78 as established and recognizable as Anthroposophical medicine or any of the recent Eastern imports, such as Traditional Chinese Medicine.

Additional channels of health and medical information have gained considerable followings, for example, Louise Hay, who espouses use of verbal affirmation to de-empower pathophysiological mental patterns79; Elizabeth Clare Prophet, a contemporary representative of the mid-20th-century I AM movement and source for the teachings of the discarnate “ascended masters”80; Caroline Myss, a medical clairvoyant whose capabilities have been subjected to empirical study81; the Course in Miracles, a self-improvement program said to have been dictated to a couple of Columbia University medical professors by the Holy Spirit82; and various well-known practitioners of “psychic surgery,” a controversial modality with proponents in both the Philippines83 and Brazil.84 Typically, the content of channeled, revealed, or inspired information speaks to the healing power of myriad natural substances—gemstones, crystals, color, light, sound, herbs, minerals, animal products—or of alterations to one’s mindset and thought patterns. Alternatively, the channel may exhibit an actual healing gift, such as the “Mr A” (real name: Bill Gray) written about by Ruth Montgomery in her bestselling Born to Heal.85 To be fair to defenders of mainstream Western medicine, it is not difficult to poke fun at the most marginal examples of this genre, such as alien contactees. On the other hand, new age healing may be too easily disparaged. It has served as a vehicle for introducing a variety of progressive health-related concepts to the public consciousness, including perspectives and ideas that are now hallmarks of transpersonal and complimentary approaches to health and well-being, such as the therapeutic potential of intuition, dreams, and extraordinary human capacities.86

POINTS OF CONVERGENCE

Across these many esoteric traditions, extensive commonalities can be seen in characteristic features of their respective teachings about

- The New Age Tradition

The final category of esoteric traditions to be discussed here is the contemporary conglomeration of beliefs and practices that go by the label new age. Much derided and misunderstood, the new age, in its emergence around 30 years ago, was more a quasi-social-movement than an established tradition of esoteric learning and practice. But even that definition does not seem to fit. As with medical self-care, a related emergent phenomenon of the middle 1970s, the new age does not meet any of the established sociological criteria for a social movement, namely an identifiable ideology, a sense of common purpose or “we-ness,” an established institutional structure or organization, and collective action through developed strategies and tactics.74 According to religious historian J. Gordon Melton, the new age “has no single leader, no central organization, no firm agenda, and no group of official spokespersons.”75 Accordingly, new age healing is a kind of polyglot, drawing elements from every one of the other esoteric traditions, removed from their native contexts, into a chaotic stew, updated and popularized and, some would say, trivialized, for the masses. Qualitative studies have tried to taxonomize the landscape of new age healing. The earliest scholarly study of the phenomenon, published in 1986, differentiated body-oriented therapies for mental or physical self-betterment, mental therapies based on esoteric teachings, and mostly Eastern and ritualistic contemplative practices for soul development.1 A subsequent ethnographic study distinguished among Asian-based therapies, synthetic Ayurvedic practices, Euro-American naturalistic medical systems, and healing with mind and spirit.76

An identifying feature of new age healing that separates it from other popular, nonprofessional modes of healing in the West is a reliance upon revealed folk wisdom. By this is meant, heretofore, hidden or altogether new information about health, healing, or medicine that has been “externalized” only now, and not principally through hierophants, adepts, or initiates, but through common people, often caught unawares by an unexpected inspiration. The most familiar means of inspiration is through variations of trance channeling, by which a person enters—or is drawn into—an altered state of consciousness and then becomes a vehicle for a discarnate entity (or, alternatively, one’s “higher self”) to provide information, either for a client or generally. The most famous modern channel of health-related information was the late Edgar Cayce, the famous “sleeping prophet” of Virginia Beach, Virginia, who produced over 14,000 psychic readings, of which 8,976 touch on medical topics related to almost every conceivable disease or condition.77 The Cayce material has generated a sophisticated and multifaceted approach to medical treatment, as well as a unique understanding of human pathophysiology, resulting in a distinctive biomedical philosophy and clinical practice style as established and recognized.

A closer look at Native-American medicine, in its myriad variations, exemplifies these points. Notwithstanding that “Native American” masks many varieties, as does “shaman,” basic principles are observable, principally wholeness.73 The interrelation of all things, derived from a single reality, implies a connectedness that intimately links all manifestation: people, nature, spirits, the life force. Thus, elements of both the natural and supernatural worlds, as well as characteristics internal to individual people, such as thoughts, may function as etiologic factors and as features of the therapeutic armamentarium. Medicine people thus have a variety of tools at their disposal: prayer and chanting; music; smudging; herbalism; laying on of hands; psychological counseling; ritual ceremony; and facilitation of inner work such as fasting and periods of silence. According to Kenneth “Bear Hawk” Cohen, Native-American medicine can be contrasted with allopathic medicine not just in terms of what each does, but in terms of world view: focus on restoring health versus defeating pathology; etiologically multifactorial versus reductionistic; teleological versus adversarial practice; intuitive versus intellectual; advisory versus authoritarian; and so on.65

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The final category of esoteric traditions to be discussed here is the contemporary conglomeration of beliefs and practices that go by the label new age. Much derided and misunderstood, the new age, in its emergence around 30 years ago, was more a quasi-social-movement than an established tradition of esoteric learning and practice. But even that definition does not seem to fit. As with medical self-care, a related emergent phenomenon of the middle 1970s, the new age does not meet any of the established sociological criteria for a social movement, namely an identifiable ideology, a sense of common purpose or “we-ness,” an established institutional structure or organization, and collective action through developed strategies and tactics.74 According to religious historian J. Gordon Melton, the new age “has no single leader, no central organization, no firm agenda, and no group of official spokespersons.”75 Accordingly, new age healing is a kind of polyglot, drawing elements from every one of the other esoteric traditions, removed from their native contexts, into a chaotic stew, updated and popularized and, some would say, trivialized, for the masses. Qualitative studies have tried to taxonomize the landscape of new age healing. The earliest scholarly study of the phenomenon, published in 1986, differentiated body-oriented therapies for mental or physical self-betterment, mental therapies based on esoteric teachings, and mostly Eastern and ritualistic contemplative practices for soul development.1 A subsequent ethnographic study distinguished among Asian-based therapies, synthetic Ayurvedic practices, Euro-American naturalistic medical systems, and healing with mind and spirit.76

An identifying feature of new age healing that separates it from other popular, nonprofessional modes of healing in the West is a reliance upon revealed folk wisdom. By this is meant, heretofore, hidden or altogether new information about health, healing, or medicine that has been “externalized” only now, and not principally through hierophants, adepts, or initiates, but through common people, often caught unawares by an unexpected inspiration. The most familiar means of inspiration is through variations of trance channeling, by which a person enters—or is drawn into—an altered state of consciousness and then becomes a vehicle for a discarnate entity (or, alternatively, one’s “higher self”) to provide information, either for a client or generally. The most famous modern channel of health-related information was the late Edgar Cayce, the famous “sleeping prophet” of Virginia Beach, Virginia, who produced over 14,000 psychic readings, of which 8,976 touch on medical topics related to almost every conceivable disease or condition.77 The Cayce material has generated a sophisticated and multifaceted approach to medical treatment, as well as a unique understanding of human pathophysiology, resulting in a distinctive biomedical philosophy and clinical practice style78 as established and recognizable as Anthroposophical medicine or any of the recent Eastern imports, such as Traditional Chinese Medicine.

Additional channels of health and medical information have gained considerable followings, for example, Louise Hay, who espouses use of verbal affirmation to de-empower pathophysiological mental patterns79; Elizabeth Clare Prophet, a contemporary representative of the mid-20th-century I AM movement and source for the teachings of the discarnate “ascended masters”80; Caroline Myss, a medical clairvoyant whose capabilities have been subjected to empirical study81; the Course in Miracles, a self-improvement program said to have been dictated to a couple of Columbia University medical professors by the Holy Spirit82; and various well-known practitioners of “psychic surgery,” a controversial modality with proponents in both the Philippines83 and Brazil.84 Typically, the content of channeled, revealed, or inspired information speaks to the healing power of myriad natural substances—gemstones, crystals, color, light, sound, herbs, minerals, animal products—or of alterations to one’s mindset and thought patterns. Alternatively, the channel may exhibit an actual healing gift, such as the “Mr A” (real name: Bill Gray) written about by Ruth Montgomery in her bestselling Born to Heal.85 To be fair to defenders of mainstream Western medicine, it is not difficult to poke fun at the most marginal examples of this genre, such as alien contactees. On the other hand, new age healing may be too easily disparaged. It has served as a vehicle for introducing a variety of progressive health-related concepts to the public consciousness, including perspectives and ideas that are now hallmarks of transpersonal and complementary approaches to health and well-being, such as the therapeutic potential of intuition, dreams, and extraordinary human capacities.86

POINTS OF CONVERGENCE

Across these many esoteric traditions, extensive commonalities can be seen in characteristic features of their respective teachings about
health, healing, and medicine. These include points of convergence in expressed beliefs and/or practices related to (a) anatomy and physiology, (b) nosology and etiology, (c) pathophysiology, and (d) therapeutic modalities. One caveat: although the terminology used to language particular concepts may vary dramatically across esoteric systems, the underlying concepts themselves, in many instances, appear to be roughly equivalent. For example, the yogic prāna, the Chinese qi, the Lakota wekān, the archetypus of Paracelsus, the Pythagorean pneuma, the vis medicatrix naturae of Hippocrates, and the orgone of Dr Wilhelm Reich all speak to the idea of a circulating and transpersonal subtle energy, vital life force, or biofield as a feature of human anatomy. These convergences and others are described below.

Anatomy and Physiology

Throughout esoteric systems, a predominant theme is the presence of a “subtle” aspect to physical reality that invisibly interpenetrates the more visible and sentient three-dimensional universe. Concomitant to manifestations of this subtle realm in the natural environment (eg, the existence of multiple higher dimensions, the ever presence of discernable beings, the activity of “elemental” spirits, the reincarnation of souls) are certain features of human anatomy not currently endorsed by allopathic biomedicine. These include (a) the presence of several subtle human bodies or sheaths, surrounding and interpenetrating the visible, physical body; (b) the location on, in, or along these vehicles of powerful vortices or energy centers (eg, the yogic chakras); (c) the existence of a subtle healing energy or vital force, mentioned above; and (d) the operation of a functional system of channels that allows the flow of vital life force throughout these energy centers and vehicles. Whether fact or fiction, these four features have become elements of a lingua franca facilitating communication among a wide variety of modern-day esotericists, regardless of tradition.

The clearest and most precise elaboration of the structure and interrelated functioning of these four cornerstones of subtle anatomy and physiology in esoteric lore is found in the writings of the Theosophists. Detailed and scholarly dissertations have been published over the past century that carefully differentiate (a) anatomy and physiology, (b) nosology and etiology, (c) pathophysiology, and (d) the operation of a functional system of channels that allows the flow of vital life force throughout these energy centers and vehicles. Whether fact or fiction, these four features have become elements of a lingua franca facilitating communication among a wide variety of modern-day esotericists, regardless of tradition.

The presence of these anatomical features is significant for their corresponding physiological functions. Each subtle body, in interface with its respective subtle plane or dimension, both originates and transmutes a particular domain of human psychoneuro-energetic experience. The mental plane is home to “thought forms” that precipitate down their effects from the mental body to the astral body, where they are transformed into emotions; these in turn exert their effects on normal physiology through a further stepping down through the etheric body, home of the human subtle bioelectrical system or aura. The energy centers

and channels are the locations on the overall human vehicle where this activity takes place—the centers serving as transducers of the life force, directing it along the channels to points along the body which are believed to be in correspondence with particular endocrine glands or organ systems.

Nosology and Etiology

These understandings of subtle anatomy and physiology have consequences for the nosology (taxonomic classification) and etiology (causation) of disease. This is not dramatically different from allopathic biomedicine, where the categorization of both disease entities (eg, epilepsy, colitis) and medical specialties (eg, neurologist, gastroenterologist) follows sanctioned differentiation of gross anatomical features (eg, brain, gut) and respective physiological functions (eg, autonomic regulation, digestion). Likewise, identification of causal or antecedent pathogenic factors in both esoteric and esoteric systems is informed by and derived from the presence of bodily or environmental features and processes that are believed to be real. For biomedicine, this includes biological features of agents (eg, viruses, bacteria), human hosts (eg, immune function, heredity), and physical environments (eg, toxic exposures). For esoteric systems, this includes a wide array of posited agents and processes: thought forms, past-life occurrences, harassment by astral beings, chakra imbalances, disturbances in prāna flow, the result of karma.

Esoteric anatomy and physiology are observed to influence esoteric perspectives on nosology and etiology in two ways. First, esoteric conceptions of human structure and function (and corresponding features of higher-dimensional influences) can serve as sources of diseases identified according to existing biomedical nosological categories. For example, the late occultist Alice Bailey, founder of the Lucis Trust, a modern esoteric society, attributed accepted disease entities (eg, syphilis, cancer, tuberculosis) to respective esoteric causal factors such as primordial race (eg, Lemurian, Atlantean, Aryan) and dysfunctions of certain subtle bodies (eg, physical, astral, mental) or energy centers (eg, sexual, solar plexus, throat).

Second, etiology may be attributed to disease outcomes or physiological states that exist only in esoteric schemata. For example, the late Rudolf Steiner, founder of the Anthroposophical Society, describes as a comorbidity feature of influenza the malfunction of the “sensorium,” an intracranial organ that causes a feeling of dullness in the head when not supplied with a requisite substance. Consider also the biblical tzara'at (Leviticus 13-14), almost always mistakenly translated as leprosy. This is apparently some type of skin disease diagnosable only by a kohen (priest) and attributed to spiritual “uncleanliness” due to the subtle energetic effects of a certain class of sin (believed to be slander or gossip). This illness is also treated as communicable due to some unspecified contagious mechanism, and infective of both other people and physical structures such as bedsheets and the walls of houses. The identity and causes of tzara'at continue to baffle scholars. Even the late Dr Julius Preuss, author of the definitive Biblical and Talmudic Medicine, acknowledges that “the explanation of some of these details is impossible to elucidate.”
Pathophysiology
Not surprisingly, the attribution of etiologic significance to esoteric bodily structures and functions requires pathogenic processes that operate according to mechanisms currently unknown to or unacceptable by modern biomedicine. Throughout esoteric systems, innumerable such processes are postulated and described—far too many to detail here. Three key concepts, however, emerge repeatedly in esoteric writing: (a) congestion, (b) imbalance, and (c) what might be termed malefic relationship to cosmic forces.

According to pathophysiological models espoused within certain mystery school, Eastern mystical, Western mystical, and new age traditions, disease may manifest as a result of blockage, congestion, or sluggishness in circulation throughout the various bodily systems. This includes circulation along established channels (eg, arteries, respiratory system, central nervous system), established but not fully understood channels (eg, lymphatic circulation, meridians), and the usual subtle energetic channels. Inflammation, by this perspective, is not a separate and distinctive category of pathogenic sign, but rather a response to congestion—a sequela of impeded flow of some type within these channels and a resultant backing up and stagnation of fluids, waste products, or energies. Such an understanding of pathogenesis can be identified, in part, in the Greek humoral model, in traditional Indian and Chinese conceptions of prāna and chī, and in the therapeutic system developed around the readings given by Edgar Cayce. Treatment, accordingly, focuses on improving circulation and restoring the flow of energy or fluids to blocked channels and organs, thus reviving and strengthening exoteric and esoteric bodily structures and systems. This may be achieved through modalities as diverse as colonics, needling, hydrotherapy, various forms of massage, and, in the Cayce system, use of subtle electromagnetic devices such as the “wet-cell battery” and “radio-active appliance.”

Besides congestion of energetic flow, another common theme in esoteric pathophysiology involves the concept of imbalance. Falling out of a state of dynamic equilibrium, at any “level”—physical, energetic, emotional, mental—can produce pathophysiological changes leading to manifestations of disease. This perspective is commonly held throughout the mystery school, brotherhoods, and Eastern mystical traditions, incorporated in concepts such as the Greek humors and the Rosicrucian idea of harmonium. The main consequence of becoming imbalanced is to increase one’s risk of becoming ill, whether physically or psychologically. This idea has gained considerable contemporary influence through its centrality to a variety of complementary and alternative approaches to health that might not otherwise be considered esoteric. These range from entire schools such as naturopathic medicine to particular theories of natural healing. Imbalance can be conceived of either in reference to the constituent esoteric and exoteric elements of a single human life or as a phenomenon enlarged to encompass external or environmental influences on health.

The latter type of imbalance provides a context for the third concept that dominates esoteric writing on pathophysiology. The cosmic forces spoken of here are not the exoteric type commonly implied by the word cosmic—seasonal, climatic, atmospheric, or geographic influences on health. Such factors are decidedly esoteric, if not yet mainstream in the etiologic or epidemiologic literatures. Rather, within certain esoteric traditions, human beings are believed capable of entering into a malefic relationship with forces such as astrological alignments, subtle bioelectromagnetic fields (as detected through dowings), miasms (or unseen disturbances in the flow of vital life energy), and other elements of “the unmanifest reality.” These relationships are considered here under pathophysiology and not under the category of etiology, above, because the malefic relationship is not considered as an antecedent or risk factor per se, but rather as a reflection of an underlying pathogenic state that manifests simultaneously in the individual and in the particular cosmic phenomenon. This is consistent with the famous alchemical dictum of “as above, so below.” For example, according to a classic reference, the Encyclopedia of Medical Astrology, leucorrhea is associated with an unfavorable birth chart aspect of Pluto square with the moon—not because the latter “caused” the former, but because both are mirror reflections of the same underlying disturbed reality. For this reason, the identification of such malefic relationships serves a diagnostic function for practitioners who recognize their “totemic” correspondences.

Therapeutic Modalities
Individual therapies prescribed within esoteric systems range from well-known natural remedies (eg, herbs) to interventions unique to particular traditions and not easily understandable in terms familiar to conventional medicine. It is the latter class of modalities that will be described here, as they are more consonant, conceptually, with the objective of this paper, namely to summarize theories and systems invisible to or unintelligible by prevailing esoteric systems of medicine. In surveying this material, three general categories of therapies can be identified: (a) subtle-energy-based forms of healing, (b) treatment with unusual gadgets or substances, and (c) interventions involving shifts in consciousness, spiritual states, or one’s overall way of life.

Methods of healing based on transmission or manipulation of some form of subtle bioenergy are commonly endorsed by systems of healing across esoteric traditions. Such energies are sometimes also invoked by alternative but exoteric systems (eg, acupuncture, homeopathy, Therapeutic Touch). Contact and noncontact methods of subtle energy healing are taught and promoted within the Eastern mystical, Western mystical, shamanic, and new age traditions especially. The presumptive salutogenic value of these techniques, for physical and emotional healing, is grounded in an understanding of the pathogenic potential of disturbances in human bioenergy fields. Across specific schools and philosophies of healing, the healer is typically viewed as a conduit of healing, drawing down something—an energy, pure light, consciousness, spirit—that facilitates the client’s own restoration to equilibrium and wholeness. One interesting synthesis of Theosophical, occult, and yogic systems differentiates among what it terms “pranic,” “telepathic,” and “radiatory” healing. A scholarly discussion of the potential mechanisms involved in transpersonally delivered spiritual healing differentiates among “paraphysical,” “energetic,” and “magnetic” methods of healing. The ability to balance internal human energies, or preserve a balance between such energies and
subtle environmental forces (à la “external qi”), is a feature of the “job description” of myriad esoteric healers, from new age body-workers to initiates of secret orders to Eastern adepts to third-world shamans to present-day kabbalistic and gnostic healers.

The widespread existence of hands-on healing modalities throughout the world, across esoteric traditions, utilizing plainly nonuniform methods and ascribing results to widely divergent explanatory systems, suggests that the efficacy of the healing encounter is not a simple function of technique or skill set. The essential elements making for efficacious healing encounters, besides a minimum of technical skill, are believed to be found in other features of the transaction between healer and healer. In one thoughtful model, influenced by Western occult teachings, this boils down to the “three D’s”: dispassion, discernment, and detachment.99 Other healers describe similar prerequisites, such as an ability to achieve mental focus and to sense a connection to the client and to all beings.100 A respected bioenergy practitioner, well known by the present author, offers a take most representative of the perspectives of other healers: successful healing requires of the healer a single-pointed focus, an ability to set an intention or mental image, and most of all, empathy (L. Mead, personal communication, May, 2007). Identification of empathy or compassion as a sine qua non for successful healing is almost universal among the most accomplished healers, such as Dora Kunz,101 Rosalyn Bruyere,102 Olga Worrall,103 Jack Schwarz,104 and Brugh Joy.105

A second major category of esoteric therapies involves use of highly unusual machines or substances to balance, purify, treat, heal, or cure. Scores of instruments exist, ranging from small gadgets to large machines, that purport to serve a therapeutic function of some kind. Regulation has proved difficult if not impossible for federal agencies such as the U.S. Food and Drug Administration, as many of these machines are marketed for relaxation, spiritual growth, or entertainment, and not explicitly for medical intervention. Much of this instrumentation is designed to utilize, manipulate, or interface with subtle bioenergies, so this category of esoteric therapies overlaps somewhat with the previous one. Examples of popular instrumentation include the numerous brain-wave synchronizing light and sound machines,106 radionics machines,107 Biocircuits,108 magnets,109 wet and dry flotation tanks and sound tables,110 and apparatuses not able to be categorized, constructed from channeled or revealed information, such as the devices described in Cayce readings92 or electrotherapeutic machines based on Tesla technologies.111

Numerous substances likewise have been promoted as capable of immediate or lasting health effects, for both acute and chronic conditions. Stereotypically new age modalities include use of crystals and gemstones arrayed on the body; ingestion of magically potentized liquids or powders; breathing of smoke from tobacco, incense, or burnt written affirmations; and wearing or ritual use of amulets or other sacred objects. It would be a mistake, however, to presume that these methods of healing are a solely contemporary phenomenon. Ingestion of unusual natural substances for purposes of healing was characteristic of various civilizations of the ancient world.112 Another “substance” promoted as a healing resource is color. Combining the occult principle of rays with the yogan chakras and Theosophical subtle bodies, systems of correspondences exist which attribute distinct healing properties to respective frequencies of colored light applied to regions of the body.113

A third category of esoteric therapies involves the facilitation of shifts in consciousness or in one’s spiritual or secular lifestyle as a means of eradicating disease or attaining wellness. Particular methods of accomplishing such shifts, whether transient or permanent, typically derive from teachings that are imbued with sacred meaning. Oftentimes such teachings are channeled from discarnate entities. Enormous amounts of health-related self-improvement material has been received from such sources as the Course in Miracles, the Aquarian Gospel, “ascended masters” such as Saint Germain, entities with Native-American-sounding names (White Eagle, Silver Birch), various competing astral Jeesuses, and more recently popular new age celebrity channelees (eg, Ramtha, Lazaris, Seth, Emmanuel). Thankfully, insightful, dispassionate overviews of this material exist in print.114 To summarize, these teachings tend to emphasize self-care, focusing on the importance of changing one’s perspectives on life, self, and vertical and horizontal relationships as keys to becoming healed and whole.

IMPLICATIONS FOR MEDICINE

Esoteric approaches to healthcare hold a considerable attraction for a significant segment of adult medical patients. National probability surveys of utilization rates for complementary and alternative therapies, such as the National Health Interview Survey, now typically include items assessing unusual mind-body therapies, spiritual practices, and forms of bioenergy healing considered somewhat marginal even for alternative medicine.115 If utilization data are a valid indicator, then perhaps we ought to reconsider the term “marginal.” Findings from the 2002 National Health Interview Survey, for example, identified over two million adult Americans who reported a lifetime use of “energy healing therapy/Reiki,” including over one million just in the past year. The numbers for therapeutic use of guided imagery, qi gong, yoga, and ritual prayer were comparable or even higher.

New age-oriented beliefs and practices, in particular, have been significant features of a sort of invisible domain of the folk medical sector for at least a quarter of a century, especially in the United States. This is not dissimilar to the domain of “invisible religions” spoken of by sociologists116—privatized expressions of spirituality that exist entirely outside of formal, organized, and institutionalized religions and are informed by beliefs drawn from sources outside of even unconventional categories of faith traditions. Although much of what constitutes esoteric healing seems to occupy a realm beyond even established conceptions of complementary and alternative medicine, this realm undeniably exists. Clinicians, and investigators, who fail to inquire about these types of beliefs and practices therefore risk missing a good deal of the therapy-seeking activity of their patients or research subjects.

By now, primary care providers are familiar with the importance of probing for use of complementary and alternative therapies. Younger cohorts of physicians, especially, have exhibited “a striking degree of interest” in alternative approaches, both professionally and personally, since the 1980s.117 Assessment of
patients’ use of established alternative therapies, however, is liable to overlook domains of healing resources much more “alternative” than even alternative medicine. It is not easy to offer recommendations to clinicians as to how to proceed when the content of such approaches is so unusual and the prevalence of utilization and profile of users have not yet been precisely identified. These barriers must eventually be overcome. Many esoteric beliefs and practices, when existing among particular patients in parallel to accepted medical care, may be medically harmless in and of themselves—especially the more stereotypically new age variety (eg, use of gemstones, channeled information, ritual meditations). Some may even provide patients with perceived or actual benefit. Other more occult involvements, on the other hand, may present real risks, physical and emotional. It would behoove family physicians and other primary care providers to get a heads-up on any potentially unusual approaches taken by their clientele, notably those that may interfere with effective conventional care.

Not surprisingly, most explicitly esoteric approaches to healing are empirically unverified and untested. Perhaps a “weirdness” factor prevents alternative-medicine-related research efforts from extending their focus to this domain of health beliefs and practices. If so, this is certainly understandable in light of the ongoing struggle for legitimacy on the part of complementary and alternative medical practitioners. It should give clinicians and medical scientists considerable pause, however, to recognize that this same weirdness factor is a potent attractor to legions of patients, whose utilization of unproved new age or other esoteric therapies often occurs in isolation and precludes conventional care.

Many esoteric approaches to diagnosis and treatment seem to encompass elements that are identical to certain conventional or alternative approaches (eg, phytomedicine, meditation, bodywork). Other esoteric approaches are sui generis (eg, clairvoyant or channeled diagnosis, treatment through balancing of chakra energies). Systematic investigation of salutogenic mechanisms would be provocative and fascinating, to be sure, but may be premature in light of existing models of explanation. Trials and medical outcomes studies of clinical efficacy may be more productive at the present time and are strongly advised. Utilization studies conducted by health services researchers are also especially recommended so that the prevalence, patterns, and determinants of use may be mapped with greater precision than is currently available.

Since the beginning of the 1990s, medical and health professions educators have shown a great willingness to expand curricula into two previously uncharted and taboo areas: religion and spirituality and complementary and alternative medicine. Most North American medical schools, for example, now include at least some required or elective coursework on both topics. Material related to esoteric healing traditions would seem to fall somewhere in the gray area between these two topics. The persistent popularity of new age concepts and therapies, and the considerable interest shown in health beliefs and practices related to shamanic and Eastern mystical traditions, argues for inclusion of these latter topics in surveys and overviews of key spiritual and alternative approaches to healing. It is easy to criticize esoteric healing in general as marginal, and in many instances strange, but the importance of these systems and concepts for some patients should not be overlooked. Moreover, we ought not refuse to consider the possibility that today’s esoteric healing may, in some instances, be tomorrow’s scientific medicine. Equipped with a basic understanding of the origins and constituent features of these traditions, providers will be able to more fully identify the resources that patients draw on in seeking to improve their health.

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REFERENCES


