

Teleios recently performed a review of the peer-reviewed psychological literature to help physicians understand how religion affects patients' lives and diseases.¹

We included articles that assessed the influence of religious practices on medicine as a primary or secondary variable in clinical practice.

We used the following search terms:

**religion,
prayer, faith,
beliefs, values, religious,
spiritual, devotion, God, church,
worship, disease, medical treatment, practices,
healthcare, effects, thyroid, cardiovascular disease,
activity, treatment, therapeutic diabetes, practices, heart, cardiac,
thyroid, hypertension, intervention, coronary, health, ophthalmology,
ocular, glaucoma, age-related macular degeneration, ocular hypertension,
cataract,
keratitis,
uveitis,
retina,
conjunctivitis,
blepharitis,
trachoma,
scleritis,
retinopathy**

This study included 49 articles of which 37 were conducted in the United States, 3 in Europe, 7 in Asia, 1 in Africa, and 1 in Canada. Further, 31 studies primarily studied patients of the Christian religion, two Muslim, two Hindu, two "other," and 12 unknown.



**The vast majority
of articles were
conducted in the
USA and studied
Christian religion**



We discovered religious faith is important to many patients, particularly those with serious disease, and that patients depend upon it as a positive coping mechanism.



Patients use religion as a coping mechanism

Many patients react positively to a physician's spiritual interaction with them, especially with greater severity of their disease.

Most patients like when doctors pray with them



Religious practices, including prayer, generally provide positive results in the patient's life and treatment as determined by measurable factors such as patient knowledge about their disease, adherence to treatment, disease coping, quality of life, and overall health outcomes.



Religious practices can improve patient knowledge, adherence to treatment, coping, quality of life and overall health

Importantly, the more a patient practices the positive aspects of their religion, the greater the demonstration of benefits on how they cope with their disease and treatment.

In contrast, patients' struggles related to perceived anger from God or being unloved by God are associated with poorer health outcomes.

Patients lacking a connection to God may experience poorer health



This review suggests that patients frequently practice religion and interact with God about their disease state. This spiritual interaction may benefit the patient by providing comfort, increasing knowledge about their disease, greater treatment adherence, and quality of life.

For a copy of this infographic for your own use please [click here](#).

1. Stewart WC, Adams MP, Stewart JA, Nelson LA. Review of clinical medicine and religious practice. J Relig Health Mar 2013;52:91-106.