

Insane? Incompetent? Or What?

I replaced the receiver and caught my mind returning to the "twilight zone" events and feelings of almost a year before. At that time the thick envelope arriving by registered mail had the logo of the State Attorney General's Office and looked important. Addressed to me was a cover letter for an order from the Board of Medical Examiners. "Re: In the Matter of the Medical License of _____ M.D. Enclosed herewith and served upon you by certified U.S. mail please find ORDER FOR MENTAL EXAMINATION in the above mentioned matter."

This was not a malpractice suit, as bad as that would have been. This was an attack on the ability to practice my profession under any circumstances. I thought further back to the precipitating circumstances, a situation of a couple of months previously.

A family whose children had been my patients for a number of years brought their grade school age boy for increasingly severe behavior problems. He had experienced viral meningitis as an infant and was diagnosed as having Attention Deficit Disorder (ADD) at age six. He seemed very bright. He was aware of his limitations and bothered by them.

In addition, he had episodes of violent behavior. While his distractibility and attention span were generally helped by medication, the episodes, although infrequent, got steadily worse. By age eight, he was attempting to kill his family and himself. Extensive medical and psychiatric investigation had been done. Medication, counselling and psychiatric hospitalization had all been unsuccessful in changing the episodes. It then came out that he was also hearing voices, telling him scary things which he would not discuss.

The boy was brought for physical just prior to his scheduled placement in a long term psychiatric institution with a poor prognosis. After seeing him, I spoke separately to the father. I was disturbed about what the psychiatrists were saying and very heavy hearted about their dismal view of the future. The family were being told that the boy would never be normal, yet most of the time, he seemed fine. It was just those violent episodes that made things hopeless.

I cared about this family and searched my mind for a way to help them. I said to the father that because conventional approaches were not helping I wondered if he would be willing to consider a spiritual area that we had not explored, namely the possibility of demons. He answered that he would. So the next day I gave him an early version of a paper I had written on the topic of [Satan and Demons](#). He accepted it without comment.

About 10 days later I got word indirectly that the Pediatric Department Head of the Health Maintenance Organization which employed me had received a complaint. It was a letter from this family. They questioned my competence to practice medicine, had reported me to the Board of Medical Examiners and did not wish me to continue as their pediatrician. I was surprised and tried to call them at their places of work but they did not return my calls. When it became clear that they would not speak to me, I wrote trying to clarify the situation. They wrote the Department Head again, objecting to the attempted contact and demanding no further calls or letters.

I sought out Christian legal help and was advised against submitting to the mental exam on principle. Besides, some psychiatrists consider belief in the supernatural to be delusional and might diagnose me "out of contact with reality." The issues involved the inability of Psychiatry to rule on the existence of the supernatural as well as religious freedom.

This whole situation seemed unreal. The Board which had been licensing me for 20 years, on the basis of one letter from a distraught family, without consulting me regarding the substance of the allegations or my colleagues regarding my performance, decided to assess my mental competence first and ask questions later. They did not contact anyone in the organization which employs me regarding this situation. It seemed that the whole affair was extremely poorly thought out. Yet, authority rested on their side.

It is no secret that the core of this case was a conflict regarding religion. The prevailing view in our society is that religion is a private matter which can be "right for you but not for me". Because of that, there is a dim view of sharing one's religious views with anyone else. It is redefined as "imposing your views" on others. A new version of the old saying ought to go, "It doesn't matter what you believe, as long as you don't believe it too hard."

The allegation, however, also made a big deal out of the attempts I made to contact the family after they withdrew their children from my care. This was described as hounding them and it was claimed that I did so after they had asked for no further contact. In actuality I feel it was a responsible and empathetic reaction I had to a family in distress with whom I had shared many difficulties over the years.

People prayed. My attorney wrote the Board. Then, suddenly and unexpectedly, the Board changed course with the statement: "Based upon the concerns raised in your letter(s), the Discipline Committee of the Board has agreed to postpone mental examination until further research can be done on this issue." Praise the Lord!

As Daniel's friends said at the brink of the fiery furnace, "Our God Whom we serve is able to deliver us." (Daniel 3:17) And in the words of Joseph, sold into slavery by his brothers but elevated to high position in Egypt, "You meant evil against me; but God meant it for good." (Genesis 50:20)

All during the time this was happening, the Lord continued sending situations my way which needed spiritual counsel and unusual intervention. He was showing me very clearly the reason he had put me in that place. The Lord had also put me in a strong position. I had a large number of happy patients who knew that I would go beyond the call of duty to help solve the problems they brought to me. The Lord also gave me a good reputation with the HMO by causing a great success in a very difficult case. The organization was saved a great deal of money and potential bad publicity as well. It was a genuine miracle and the Lord let me be associated with it. Now I began to understand why.

Thinking back on the incident that led to the brush with the Board, I obviously had miscalculated. Even though I did not feel that they had a just complaint, I realized I should have been more cautious in approaching such a sensitive topic, even though the situation was

desperate. I could have found out more about their spiritual status and whether they had an advisor who could have been involved in the process. I should have followed the practice of Dr. Kurt Koch and formed a prayer group for the boy and then approached the subject more indirectly by offering to pray for him and watching the reaction.

Still, the intensity of the reaction and the likeminded response of the Board made me suspect that I may indeed have hit the nail on the head, perhaps using the wrong hammer. From my research, a major risk factor for the demonization of children is their parents' involvement in the occult. Nowadays, people can go to business seminars where they learn how to "release their hidden potential" and at the end of the sessions, walk on hot coals to prove the point. This sort of thing was going on in our city and most people had no idea it involved the supernatural, much less that, in some cases, demons were being invoked to produce the results.

Things became quiet again and I truly did not expect any further fallout from the matter. I continued to have opportunities for spiritual ministry with certain families, often in the context of sharing my own struggles. If someone was depressed, I would sometimes share my brushes with depression. I would also talk about the meaning in life that is only possible because we are not elaborate accidents, occurring over millions of years when molecules just happened to bounce the right way. We are actually created by a God Who also cares about us and wants a relationship with us. This is not only therapeutic, it is true. When difficulty with adolescents was the problem, I would sometimes share the problems my wife and I have had with our own children and the hope we had found. This was the way I had been doing things for years.

Then my lawyer called me in August, about a year after the original blockbuster. He had received a registered letter from the Board. They had called for a conference. This was to be a fact gathering meeting, not a formal hearing and the date was set for about four weeks hence.

To the previous allegations, they added poor medical management. The document charged that I had "engaged in medical practice which is professionally incompetent." I was at least pleased to note that I had progressed over the intervening year from insane to merely incompetent. Also, a conference is what they should have done from the beginning instead of taking the knee jerk approach of, "this guy sounds crazy." The quality of their "further research" was not impressive, however.

Just a couple of weeks before, an item had hit the newspapers about another physician who had been censured for recommending exorcism in some cases. He was ordered to not mention demons, not pray with patients and was fined and put on probation. It appeared that the Board was on a collision course with some very important principles and my case was a strong one to test them. Even if the Lord did not choose to rescue me from the lion's den, I trusted Him. At least, it did not appear that I would be run over by a tank or machine-gunned into a trench.

We spoke of this to our church and people began immediately to pray. Over the next three weeks the Lord brought us into contact with more praying people than we could have imagined. We shared with organizations and groups we belonged to and spoke to friends and relatives by phone. We were invited to groups and asked to share what was on our hearts. I met people who had special knowledge of the Board and its workings as well as knowledge of other cases before

the Board. I had visits from almost all the families in my practice whom I knew to be Christians and shared briefly. All offered to pray. Some were given special words of wisdom. The other doctors in my group were helpful, even those who had not been so before.

I began to write up a response to the allegations and sent it around to various interested people for comments. I got much good advice and combined it all to refine the arguments. With the help of my godly lawyer (it sounds like an oxymoron, especially coming from a physician, but there are godly lawyers), we began to prepare our defense. We even met with the Medical Director, who had previously tried to get me to agree not to mention anything religious in a medical setting, and one of the corporate lawyers. I found them both surprisingly supportive. Cynically, they wanted an outcome that did not hit the newspapers because at this point, whether I was mentioned as a present or past employee of the HMO, it could be considered equally bad publicity. Yet their advice was also helpful and was incorporated into the final approach.

We discovered that one of the members of the disciplinary committee made no bones about his desire to rid the profession of all traces of Christianity. According to the policy of the Committee, any new complaint would be given to one of its members first to decide if it should be dropped out of hand or if more information should be gathered by way of a conference or an assessment of the physician's physical or mental status. It seemed likely that he had been the one to call for the mental exam the previous year.

A prayer strategy began to emerge. We asked people to pray that a wedge would be driven between the anti-Christian and the other members of the committee, that they would be disturbed by his actions and anxious to put distance between themselves and him, thus charting a more tolerant course for the Board.

We asked that people claim the defeat of Satan and declare the victory that the Lord Jesus Christ has already won through His death and resurrection. Why has Satan been left around after his doom was sealed? The Scripture seems to indicate that it is because our Lord wants us to have combat experience, using the armour He gives us.

The day finally arrived and we were set. A statement was prepared to use it as a basis of discussion. I drove to the designated address, having a little trouble finding it, and arrived just before 11:00 am, the time of the conference.

My lawyer was already there, waiting in the hallway and we checked in at the office which seemed empty. As we sat waiting, I noticed that the Building Directory listed the regional office of the "Transcendental Meditation Society". Then a doctor I knew fairly well came and greeted us. He said he was there for our case, having been called as a consultant on the medical management and that frankly he thought I had done an extraordinarily good job.

We were then all called into a large conference room and introduced to several lawyers and administrative personnel and the three members of the Committee. The anti-Christian turned out to be the Chairman. The "public member" of the Committee, a non-physician was a very maternal appearing lady, probably in her 50's, who sat nearest to me. The third member of the Committee was a Medical School classmate, now a psychiatrist. I knew he was on the Board but

did not know he was part of the Disciplinary Committee. We had always had very opposite views of life. I was chairman of the student chapter of the Christian Medical Society. If there had been an organization of its converse, he would have undoubtedly led it. Still, we had dissected at the same cadaver and had contacts that preceded professionalism.

The Chairman began by asking if I agreed with the allegations. I responded in the negative and he seemed incredulous. I might disagree with the conclusions but I could not deny the facts. I went on to point out that their description of the case was very misleading. He wanted to get right to the material on demons. We first showed that the diagnosis and followup were careful and well documented. They asked about my usual workup for ADD and questioned the combination of medications I had used. Although it was not one in common use, I had support for it.

Then we came to the part about giving the material on demons. The Chairman was loud and forceful, "You really crossed the line there. You can't do that. It isn't medical care." We proceeded to point out that while the Board has an interest in making sure that unscientific practices are not passed off as medical care, that in this case nothing medical was spared the boy or his family. Demons were not a first line consideration when they presented themselves for care and we never said, "Stop the medicine, take him out of the hospital and just pray." Medical and psychiatric care were failing them when this was offered. Also, no dramatic statements were made or ceremonies performed. Nothing was even said in the hearing of the boy.

Rather, information was offered, after the father was asked if he would like it. It was information which he could accept or reject. He could disagree with the whole concept or accept the general idea but maintain that it did not fit his son. The paper given was not sensational but basically a Biblical perspective combined with the insights of the late Dr. Kurt Koch of Germany.

I suggested that although the topic of demons goes beyond the traditional boundaries of science, it does not depart from the realm of reason. There is a powerful chain of logic that leads from the data of nature to the conclusion that there must be a Creator. Then the miracles and prophecies associated with the Bible give it credence as a supernatural book.

The Chairman jumped in, "We are not putting your religious beliefs on trial." I begged to differ and pointed out that the Bible goes on to say certain things that are objectively true for all people. Someone may disagree with me and may or may not wish to support his conclusions rationally. The point is that the Bible talks about something very different from the cultural idea of faith as a leap in the dark. One who believes Biblical truth is really under an obligation to share it with people he feels may benefit.

We also talked about the growing interest our society has in the supernatural and the relationship between the spiritual and health. Traditional religions are being examined as well as ancient occult practices. There is also a growing awareness of strange things that happen to some who get involved in the occult and Satanism. This is true of observers who may deny the objective existence of Satan but cannot deny the sometimes fearful results.

I mentioned that consideration of demons in medical and psychiatric cases is no longer completely out of bounds since the appearance of psychiatrist M. Scott Peck's book, "People of the Lie," and mentioned that I had been invited to present my paper at a conference sponsored by Dr. Peck. I also pointed out news items about a unit at a child and adolescent psychiatric hospital that was being opened specifically for those involved in the occult and Satanism.

I stated that there were several reasons why the Board needed to reconsider its approach to these matters:

Firstly, every medical practitioner will unconsciously and covertly, by words, actions and attitudes, promote his own most deeply held beliefs about life, death and meaning when dealing with serious, terminal and insoluble problems. The Board cannot monitor or police this and most physicians and their patients are unaware that it is even happening.

Secondly, according to the statutes under which the Board operates, religious healers are specifically excepted from regulation. The Chairman jumped in with, "Yes, but we license physicians." My lawyer responded, "That may be true but if, without compelling cause, you restrict a physician's freedom of speech or right to practice his religion, you may be infringing on his civil rights."

Thirdly, there is an actual or potential religious content to many specific therapies such as certain chemical dependency treatments, hypnosis, acupuncture with its offshoots and meditation or mental imaging techniques. Out of fairness, the Board would have to also ban these.

Fourthly, although it may be reasonable to require generally accepted medical diagnosis and treatment to be the first line approach by licensed physicians, caution is still needed if the "herd" defines the standard of care. The history of medicine clearly demonstrates the potential for the "herd" being wrong and the maverick being right, such as in the case of Semmelweis who was rejected when he claimed that doctors could reduce infections by washing their hands between the morgue and the delivery room.

In dealing with medically insoluble problems, I submitted that the physician should be allowed more latitude, although the course needs to be supportable both logically and ethically. In terminal cases, I doubted that the Board would censure a call to the chaplain. But if there were no chaplain available or if the physician felt he had the capability to perform that function, should his profession automatically preclude his doing so?

We were ushered out into the hall to await their deliberations. We had already gone long overtime and the Committee was missing its lunch hour. My attorney reiterated what he had said before that this was a case that could be pursued to the highest levels if necessary.

The conference could dismiss the case outright, which is what we hoped for because it would be done and not be published in the newspapers. It could also result in an agreed-upon disciplinary action if, for instance, I signed a paper promising to follow some restrictions. If I refused, the case would go to a contested hearing. The latter two possibilities would both become matters of public record.

We were called back into the conference room. I released a little pent up frivolity and said, as I pulled out my chair, "Thirty years of hard labor?" The Chairman did not smile, as I recall, but launched into the decision, "We dismiss the case."

My mind began to race again. No long haul? No legal defense fund? No newspaper article? It was incredible and I was ready to say thank you and leave but he was not through yet. He continued, "We do not forbid you to integrate religion with your practice. We do not forbid you to pray with patients."

Here was a 180 degree turn about from their decision of just a few weeks before and amazingly here was endorsement by this body of the things my employer had been hoping to get me to stop.

Then I realized what had happened as he switched to the first person singular, "I suggest..." What he said before was the decision of the committee which had outvoted him, just as we prayed. "I suggest," he said, "that you seek to avail yourself of training opportunities to find non-offensive ways of doing this." Was he really ordering me to attend more Christian Medical Society meetings? His suggestions were not binding and not conditions of the dismissal. He needed to vent and save a little face.

The chairman closed with a veiled threat that he did not want to see me before his committee again, and I remember making a mental note of the expiration of his term of office as I thanked everyone and turned to leave.

Outside, I thanked my attorney and reminded him to send me a bill (I was obviously giddy) and ran to look for a telephone. There were no public phones in that building and I sprinted to another and began to call the various prayer groups. People walking by heard a lot of, "Praise the Lord!" and, "It was a miracle!"

Indeed, I was in the lion's den and smelled his breath. But, as the song goes, "The lion got the lockjaw and couldn't take a bite." Truly the wrath of man was made to praise the Lord as it says in Psalm 76:10.

I believe that the Chairman only feels that he blew this case and did not want to place it in the public record. He would like to come down hard on the next Christian who crosses his path. I pray that the other members of the Committee, and perhaps the Board as a whole, see this as a change of direction. The fishing expedition for "incompetent care" in this case indicated that the persecution of Christians may sometimes be disguised as other issues. This I have suspected in discussions with other physicians, some outspoken believers, who have cases before the Board.

I want to share my experience but not tweak the noses of my tormentors unnecessarily. I also do not want to be accused of violating the confidentiality of any persons mentioned. Therefore I have not given locations or names. Yet, it seems to be the strategy of some anti-Christians to isolate and intimidate. If any physician or other professional would like to have access to more information or resources, they may communicate with me directly.

The glory goes to the Lord Jesus Christ, demonstrating the power of the Cross and the Empty Tomb, released through the prayers of His people. In facing the spiritual battle, even if we get more bruised up than I did this time, we know for sure that the ultimate victory is ours, because it is His.

Ross S. Olson MD