

A list of positive healing studies on answered prayers

Note, there are conflicting studies on both sides, and this list includes only positive healing studies.

Here are a few of best known studies linking prayer with health:

Poloma. M. M., Pendleton, B. F. (1991). The effects of prayer and prayer experiences on measures of general well-being. Journal of Psychology and Theology, 1, 71-83. This study demonstrated that prayer and prayer experiences have a positive effect on the general health of those who practice it.

Laird, S. P., (1991). A preliminary investigation into the role of prayer as a coping technique for adult patients with arthritis (arthritis patients). (Doctoral dissertation, University of Kansas, 1991). Laird found that in arthritis patients 1) having faith in prayer was positively related to better emotional adjustment, 2) praying more days per week was positively related to fewer health concerns,

Highfield, M. (1992). Spiritual health of oncology patients: Nurse and patient perspectives. Cancer Nursing, 10, 1-8. Highfield demonstrates that faith is a significant aid for patients dealing with chronic pain.

Levin, J. (1994). Religion and health: Is there an association? Is it valid? Is it causal? Social Science and Medicine, v.38, n.11, 1475-82. This study documents how religious practice lessens the effects of sickle-cell anemia.

Backus, W. (1997). The healing power of a healthy mind. Minneapolis: Bethany House Publishers. Backus recounts studies showing how faith strengthens the immune system and gives bolstering weapons for patients battling AIDS.

Gardner, J., & Lyon, J. (1982). Cancer in Utah Mormon men by lay priesthood level. American Journal of Epidemiology, 116, 243-57. These researchers identified a correlation between regular public worship and lower cancer rates.

Enstrom, J. E. (1989). Health practices and cancer mortality among active California Mormons. Journal of National Cancer Institute, 81, 1807-14. This study discovered that for those who do contract cancer, faith is a significant factor in recovery.

Graham, T, B., Kaplan, J., Cornoni-Huntley, S., James, C., Becker, C., Hames, S., & Heydon, S. (1978). Frequency of church attendance and blood pressure elevation. Journal of Behavioral Medicine, 1, 37-43. They found that participation in some form of public worship is an effective deterrent against high blood pressure.

Comstock, G. & Partridge, K. (1972). Church attendance and health. Journal of Chronic Diseases, 25, 665-72. This study of 91,909 individuals in Maryland found that those who attended church once or more per week had significantly lower death rate from heart disease (50% reduction), emphysema (56% reduction), and cirrhosis of the liver (74% reduction).

Cerrato, Paul L. (1998). Spirituality and healing. RN, 2, 49. Cerrato found that faith elevated the general health of patients.

Berkel, J. & de Waard, F.(1983). Mortality pattern and life expectancy of Seventh-Day Adventists in the Netherlands. International Journal of Epidemiology 4, 455-59. This study showed that church attendance, meditation, religious study, and worship quite literally invigorate the body.

More studies and excerpts from articles

Healing Words is a book written in 1993 by Dr Larry Dossey, a medical practitioner, describing the scientific evidence for the efficacy of prayer at healing and affecting biological systems. In this book Larry Dossey states that over 300 scientific studies had been performed on the effect of prayer to the time the book was written, with over half of them showing statistically significant results.

These are some excerpts from the book that I found interesting: (References for the specific studies can be found within the book.)

Summary of studies showing the effectiveness of prayer:

"Experiments with people showed that prayer positively affected high blood pressure, wounds, heart attacks, headaches, and anxiety. The subjects in these studies also included water, enzymes, bacteria, fungi,

yeast, red blood cells, cancer cells, pacemaker cells, seeds, plants, algae, moth larvae, mice, and chicks; and among the processes that had been influenced were the activity of enzymes, the growth rates of leukemic white blood cells, mutation rates of bacteria, germination and growth rates of various seeds, the firing rate of pacemaker cells, healing rates of wounds, the size of goiters and tumors, the time required to awaken from anaesthesia, autonomic effects such as electrodermal activity of the skin, rates of hemolysis of red blood cells, and haemloglobin levels."

"Evidence is abundant for an intrinsic, positive effect of prayer not only in humans but in mice, chicks, enzymes, fungi, yeast, bacteria, and cells of various sorts. We cannot dismiss these otucomes as being due to suggestion or placebo effects, since these so called lower forms of life do not think in any conventional sense and are presumably not susceptible to suggestion."

Reasons why prayer may not work in some cases:

"Some might argue that the analogy between prayer and penicillin is off base. If prayer represents the power of the Absolute, as George Bernard Shaw implied, then it should be effective in all diseases. But prayer involves more than the power of the Almighty; it is set in motion by human beings, who may be the weak link in an otherwise immensely strong chain. The fact that prayer doesn't work as powerfully and predictably as it might, therefore, may reflect deficiencies not of prayer, but of the pray-er."

Effectiveness of directed versus nondirected prayer:

"Which prayer techniques - directed [asking for something specific] or non-directed [asking for God's will] - is more effective?... In these [the Spindrift studies] the nondirected technique appeared quantitatively more effective, frequently yielding results that were twice as great, or more, when compared to the directed approach...

"Spindrift devised an experiment to put directed and non directed prayer to the test. The study involved growing a mold on the surface of the kind of rice agar plate bacteriologists and mycologists routinely use. The mold was stressed by washing it in an alcohol rinse so as to damage it and retard its growth, marking it into sides A (the control side) and B (the treated or prayed-for side). When directed prayer was used to encourage the growth of side B, nothing happened; growth remained static. But when directed prayer was replaced by nondirected prayer, in which no goal was held in the mind of the healer, side B began to multiply and formed additional concentric growth rings."

"Spindrift believes, on the basis of a large number of tests, that when a nondirected prayer is answered, the outcome is always in the direction of "what's best for the organism".

"This was demonstrated in a series of germination experiments in which the practitioner did not know what was best for the seeds involved. One batch was oversoaked and thus heavier than it should have been for proper germination to occur; another batch was undersoaked and lighter than optimal. The seeds were being evaluated early in the germination process according to changes in weight (properly germinating seeds gain weight early in germination). Ideally the oversoaked seeds should have eliminated excess water early and become lighter, and the undersoaked seeds should have absorbed water and become heavier. Not knowing which batch was which, the practitioner could not "tell the seeds what to do", so he used nondirected prayer to trust that the seeds would simply move toward the normal according to what was best for each seed. The nondirected approach worked. The results showed that the oversoaked beans eliminated water and lost weight, and the undersoaked beans gained water and increased their weight. On the basis of this type of experiment, Spindrift believes that an answered nondirected prayer is one in which the organism moves toward those states of form and function that are healthiest for it."

Effectiveness of prayer in the coronary care unit

"Over a ten month period, a computer assigned 393 patients admitted to the coronary care unit at San Franscisco General Hospital to either a group that was prayed for by home prayer groups (192 patients) or to a group that was not remembered in prayer (201 patients). The study was designed according to rigid criteria, the kind usually used in clinical studies in medicine. It was randomised, double-blind experiment in which neither the patients, nurses, nor doctors knew which group the patients were in. Byrd recruited various religious groups to pray for members of the designated prayed-for group. The prayer groups were given the first names of their patients as well as a brief description of their diagnosis and condition. They were asked to pray each day, but were given no instructions on how to pray. "Each person prayed for many different patients, but each patient in the experiment had between five and seven people praying for him or her," Byrd explained.

"They prayed for patients differed in several areas:

- 1. They were five times less likely than the unremembered group to require antibiotics (three patients compared to sixteen patients.)
- 2. They were three times less likely to develop pulmonary edema, a condition in which the lungs fill with fluid as a consequence of a failure of the heart to pump properly (six compared to eighteen patients).

- 3. None of the prayed for group required endotracheal intubation, in which an artificial airway is inserted in the throat and attached to a mechanical ventilator, while twelve in the unremembered group required mechanical ventilatory support.
- 4. Fewer patients in the prayed-for group died (although this difference was not statistically significant)."

http://www.beliefnet.com/columnists/prayerplainandsimple/2009/10/for-prayer-skeptics-studies-that-show-the-benefits-of-prayer.html

We do know from scientific studies on the question that prayer does generate response within the one who prayers. Back as far as 1990, over 250 studies have shown that religion plays a significant outcome in physical health. Since then the number has grown considerably.

Dale Matthew's book "The Faith Factor" and William Backus' "The Healing Power of a Healthy Mind" offer reviews of some of these studies. Herbert Benson, an associate professor of medicine at Harvard Medical School and founder of the Mind/Body Medical Institute at Boston's Deaconess Hospital has also written extensively on this subject. Benson in fact was one of the first to connect meditation and religious faith with healing and openly contends that prayer itself can sometimes aid the healing process.

More studies and excerpts from articles:

https://www.newsmax.com/Health/Headline/prayer-health-faith-medicine/2015/03/31/id/635623/

Science Proves the Healing Power of Prayer

For the devout, there never has been any question that prayer has the power to heal.

Now, more and more medical research from leading hospitals and universities across the U.S. has shown conclusively a belief in God really IS good for you, making you healthier and happier, and helping you live longer.

"Studies have shown prayer can prevent people from getting sick — and when they do get sick, prayer can help them get better faster," Duke University's Harold G. Koenig, M.D., tells Newsmax Health.

An exhaustive analysis of more than 1,500 reputable medical studies "indicates people who are more religious and pray more have better mental and physical health," Dr. Koenig says.

"And out of 125 studies that looked at the link between health and regular worship, 85 showed regular churchgoers live longer.

"There's a lot of evidence out there."

Dr. Koenig — director of Duke's Center for Spirituality, Theology and Health and the author of several authoritative books on faith and healing — says a striking study published in the Southern Medical Journal demonstrated that prayer has a remarkable effect on patients with hearing and visual deficiencies.

After prayer sessions, "They showed significant improvements based on audio and visual tests," Dr. Koenig said.

He added: "The benefits of devout religious practice, particularly involvement in a faith community and religious commitment, are that people cope better. In general, they cope with stress better, they experience greater well-being because they have more hope, they're more optimistic, they experience less depression, less anxiety, and they commit suicide less often.

"They have stronger immune systems, lower blood pressure, and probably better cardiovascular functioning."

The proof of the power of prayer is overwhelming, says researcher and writer Tom Knox, a one-time atheist who became a regular worshipper after doing in-depth study of the medical benefits of faith.

"What I discovered astonished me," admits Knox. "Over the past 30 years a growing and largely unnoticed body of scientific work shows religious belief is medically, socially, and psychologically beneficial."

Study after study backs up the benefits of having faith, especially in prolonging life.

In 2006, population researchers at the University of Texas discovered that the more often you go to church, the longer you live.

"Religious attendance is associated with adult mortality in a graded fashion," says Knox.

"There is a seven-year difference in life expectancy between those who never attend church and those who attend weekly."

The American Journal of Public Health studied nearly 2,000 older Californians for five years and found that those who attended religious services were 36 percent less likely to die during that period than those who didn't.

A study of nearly 4,000 older adults for the U.S. Journal of Gerontology revealed that atheists had a significantly increased chance of dying over a six-year period than the faithful.

Crucially, religious people lived longer than atheists even if they didn't go regularly to a place of worship.

The American Society of Hypertension established in 2006 that church-goers have lower blood pressure than non-believers.

Scientists have also revealed believers recover from breast cancer quicker than non-believers, have better outcomes from coronary disease and rheumatoid arthritis, and are less likely to have children with meningitis.

Research at San Francisco General Hospital looked at the effect of prayer on 393 cardiac patients. Half were prayed for by strangers who had only the patients' names. Those patients had fewer complications, fewer cases of pneumonia, and needed less drug treatment.

They also got better quicker and left the hospital earlier.

Concluded Knox: "Atheists can sneer at faith all they like, but they can't assume science is on their side."

https://www.ncbi.nlm.nih.gov/pmc/articles/PMC2802370/

Indian J Psychiatry. 2009 Oct-Dec; 51(4): 247–253.

doi: 10.4103/0019-5545.58288

PMCID: PMC2802370

Prayer and healing: A medical and scientific perspective on randomized controlled trials

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Improved outcomes associated with prayer

Cha et al.[32] studied 219 consecutive infertile women, aged 26-46 years, who were treated with in vitro fertilization embryo transfer in Seoul, South Korea. These women were randomized into distant prayer and control groups. Prayer was conducted by prayer groups in the USA, Canada and Australia. The patients and their providers were not informed about the intervention. The investigators, and even the statisticians, did not know the group allocations until all the data had been collected. Thus, the study was randomized, triple-blind, controlled and prospective in design.

Cha et al.[32] found that the women who had been prayed for had nearly twice as high a pregnancy rate as those who had not been prayed for (50 vs. 26%; P < 0.005). Furthermore, the women who had been prayed for showed a higher implantation rate than those who had not been prayed for (16.3 vs. 8%; P < 0.001). Finally, the benefits of prayer were independent of clinical or laboratory providers and clinical variables. Thus, this study showed that distant prayer facilitates implantation and pregnancy.

http://abcnews.go.com/2020/story?id=132674&page=1

Putting Faith to the Test

In the meantime, other scientists are taking a look at the 191 studies that have already been done on what they call "remote healing."

One such study was conducted at the Mid America Heart Institute in Kansas City, Mo. At first, Dr. William Harris had a hard time persuading a fellow cardiologist, Dr. James O'Keefe, to participate in the prayer experiment on heart patients.

"From a purely scientific standpoint, I thought it was illogical," says O'Keefe. "I don't really think of spirituality normally as playing a role in scientific, rigorous, double-blind placebo-controlled scientific studies. It's two different realms."

A previous study by some other scientists had gotten positive results, and Harris wanted to study remote healing for himself. But he, too, was skeptical.

"We were even doubtful that the phenomena itself was real," he says, "that prayer could do anything."

So Harris wanted to make his experiment impervious to any placebo effects. He did not tell patients they were being prayed for — or even that they were part of any kind of experiment. For an entire year, about

1,000 heart patients admitted to the institute's critical care unit were secretly divided into two groups. Half were prayed for by a group of volunteers and the hospital's chaplain; the other half were not.

All the patients were followed for a year, and then their health was scored according to pre-set rules by a third party who did not know which patients had been prayed for and which had not. The results: The patients who were prayed for had 11 percent fewer heart attacks, strokes and life-threatening complications.

"This study offers an interesting insight into the possibility that maybe God is influencing our lives on Earth," says O'Keefe. "As a scientist, it's very counterintuitive because I don't have a way to explain it."

A Miracle or Simply Chance?

Dr. Elizabeth Targ, a psychiatrist at the Pacific College of Medicine in San Francisco, has also tested out prayer on critically ill AIDS patients.

All 20 patients in the study got pretty much the same medical treatment, but only half of them were prayed for by spiritual healers. Ultimately, 10 of the prayed-for patients lived, while four who had not been prayed for died.

In a larger follow-up study, Targ found that the people who received prayer and remote healing had six times fewer hospitalizations and those hospitalizations were significantly shorter than the people who received no prayer and distant healing.

https://www.webmd.com/balance/features/can-prayer-heal#3

Hospitalized people who never attended church have an average stay of three times longer than people who attended regularly.

Heart patients were 14 times more likely to die following surgery if they did not participate in a religion.

Elderly people who never or rarely attended church had a stroke rate double that of people who attended regularly.

In Israel, religious people had a 40% lower death rate from cardiovascular disease and cancer.

Also, says Koenig, "people who are more religious tend to become depressed less often. And when they do become depressed, they recover more quickly from depression. That has consequences for their physical health and the quality of their lives."

http://www.peterswilliams.com/2016/02/09/evidence-relating-to-prayer-for-healing/

A 2010 field study on proximal (rather than remote) intercessory prayer for healing conducted by Candy Gunter Brown et al, published in Southern Medical Journal, found that: 'First, Mozambican subjects did exhibit improved auditory and/or visual acuity subsequent to PIP interventions. Second, the magnitude of measured effects exceeds that reported in previous studies of suggestion and hypnosis.'[6] Brown comments: 'I found highly significant improvements in hearing and statistically significant improvements in vision following PIP. Out of 11 hearing subjects, two had thresholds reduced by over 50 dBHL. One subject, Jordan, was presented as deaf and mute since birth and made no responses to sounds at 100 dBHL; after PIP, he responded to 60 dBHL tones, imitating sounds in a hoarse, raspy voice. Out of 11 vision subjects, three improved from 20/400 or worse to 20/80 or better. Before prayer, Maryam could not count fingers from one foot away; after one minute of PIP, she was reading the 20/125 line on a vision chart.'[7]

In 2012 Oliver, IN & Detney, A. published 'A randomized, blinded study of the impact of intercessory prayer on spiritual well-being in patients with cancer' in the journal Alternative Therapeutic Health Medicine. Their study showed that: 'Participants with cancer whom the research team randomly allocated to the experimental group to receive remote intercessory prayer showed small but significant improvements in spiritual well-being.'[8]

Indeed, a systematic review of the efficacy of distant healing published in 2000 concluded that 'approximately 57% (13 of 23) of the randomised, placebo controlled trials of distant healing . . . showed a positive treatment effect'.[9] Again: 'David R. Hodge, an assistant professor of social work in the College of Human Services at Arizona State University, conducted a comprehensive analysis of 17 major studies on the effects of intercessory prayer . . . among people with psychological or medical problems. He found a positive effect.'[10] Hodge's meta-analysis featured in the March 2007 issue of Research on Social Work Practice:

This is the most thorough and all-inclusive study of its kind on this controversial subject that I am aware of . . . It suggests that more research on the topic may be warranted, and that praying for people with psychological or medical problems may help them recover . . . Overall, the meta-analysis indicates that prayer is effective.[11]

The clinical trials of rural Mozambique

https://www.psychologytoday.com/blog/testing-prayer/201303/clinical-trials-1

"Even with a relatively small sample size, we found large enough effects in individual subjects and consistent enough effects across study populations that the results were statistically significant."

http://nstarzone.com/faithhealing.html

"The Proof That Prayer Works"

A 1993 Israeli survey following 10,000 civil servants for 26 years found that Orthodox Jews were less likely to die of cardiovascular problems than "nonbelievers." And a 1995 study from Dartmouth College in Hanover, N.H., monitoring 250 people after open-heart surgery concluded that those who had religious connections and social support were 12 times less likely to die than those who had none.

In an attempt to understand the depression that often accompanies hospitalization, Duke University researchers assessed 1,000 hospital patients from 1987 to 1989; patients who drew on religious practices, including prayer, were found to cope far better than those who didn't.

NIH recently convened a panel to determine the merits of integrating conventional medicine with behavioral and relaxation therapies to treat hypertension. The team found that the conflation of therapies, of which prayer was a key component, "can lower one's breathing rate, heart rate, and blood pressure."

Even more outrageous experiments in distance healing involve nonhuman subjects. In a survey of 131 controlled experiments on spiritual healing, it was found that prayed-for rye grass grew taller; prayed-for yeast resisted the toxic effects of cyanide; prayed-for test-tube bacteria grew faster. "I adore these

experiments," says Larry Dossey, M.D., perhaps the world's most vocal expert on prayer and medicine. "Because they don't involve humans, you can run them with fanatical precision and you can run them hundreds of times. It's the best evidence of all that prayer can change the world. And it operates as strongly on the other side of the Earth as it does at the bedside."

In his 1994 book, Healing Words, Larry Dossey, M.D., co-chair of the Panel on Mind-Body Interventions of the Office of Alternative Medicine at the National Institutes of Health in Washington, D.C., reviewed over 100 experiments, most published in parapsychological literature 'on the effects of prayer/visualization. More than half showed an effect on everything from seed germination to wound healing.

At the Mind Science Foundation in San Antonio, Texas, researchers took blood samples from 32 volunteers, isolated their red blood cells (RBCS) and placed the samples in a room on the other side of the building. Then the researchers placed the RBCs in a solution designed to swell and burst them, a process that can be measured extremely accurately. Next the researchers asked the volunteers to pray for the preservation of some of the RBCS. To help them visualize, the researchers projected color slides of healthy RBCS. The praying significantly slowed the swelling and bursting of the RBCS.

These experiments have shown that prayer can take many forms. Results occurred not only when people prayed for explicit outcomes, but also when they prayed for nothing specific.

The experiments showed that a simple "Thy will be done" approach was quantitatively more powerful than when specific results were held in mind.

A simple attitude of prayerfulness, an all pervading sense of holiness and a feeling of empathy, caring, and compassion for the entity in need, seemed to set the stage for healing.

Experiments also showed that prayer positively affected:

High Blood Pressure Wounds Heart Attacks Headaches, and Anxiety.

The subjects in these studies included:

Water

Enzymes

Bacteria

Fungi

Yeast

Red blood cells

Cancer cells

Pacemaker cells

Seeds

Plants

Algae

Moth larvae

Mice

Chicks

The processes that had been influenced by prayer were:

Activity of enzymes

The growth rate of leukemic white blood cells

Mutation rates of bacteria

Germination and growth rates of various seeds

Firing rate of pacemaker cells

Healing rates of wounds

The size of goiters and tumors

Time required to awaken from anesthesia

Autonomic effects such as electrodermal activity of the skin, rates of hemolysis of red blood cells and hemoglobin levels.

It did not matter whether the praying person was with the person who was prayed for the power of prayer to work. You can pray for someone who is far away and still will have an influence on the outcome.

Nothing seems to block or stop the effects of prayer - the object in one study was placed in a lead-lined room and in another in a cage that shielded it from all known forms of electromagnetic energy, the effect still got through.

Given the scientific evidence, Dossey and several other researchers now admit that withholding prayer from an ailing patient is downright irresponsible. "It became an ethical issue for me," says Dossey, who defines prayer as "communication with the absolute."

At a Boston conference sponsored by Harvard Medical School, one of the participants predicted that in just 10 years patients will be questioned about not only their personal medical history but also their spiritual belief system.

Certainly, the idea of distance healing is catching on even today. Cyberspace is full of fellow believers who post their requests on daily prayer chains. Those who believe in distance healing are not sure how it works, though theories abound. Some say it involves sending some kind of subtle, as-yet-unidentified energy to the person in need. Others, including Dossey, say quantum physics may play a role, or what Cambridge-trained biologist Rupert Sheldrake calls "morphogenetic fields," unbounded by space or time.

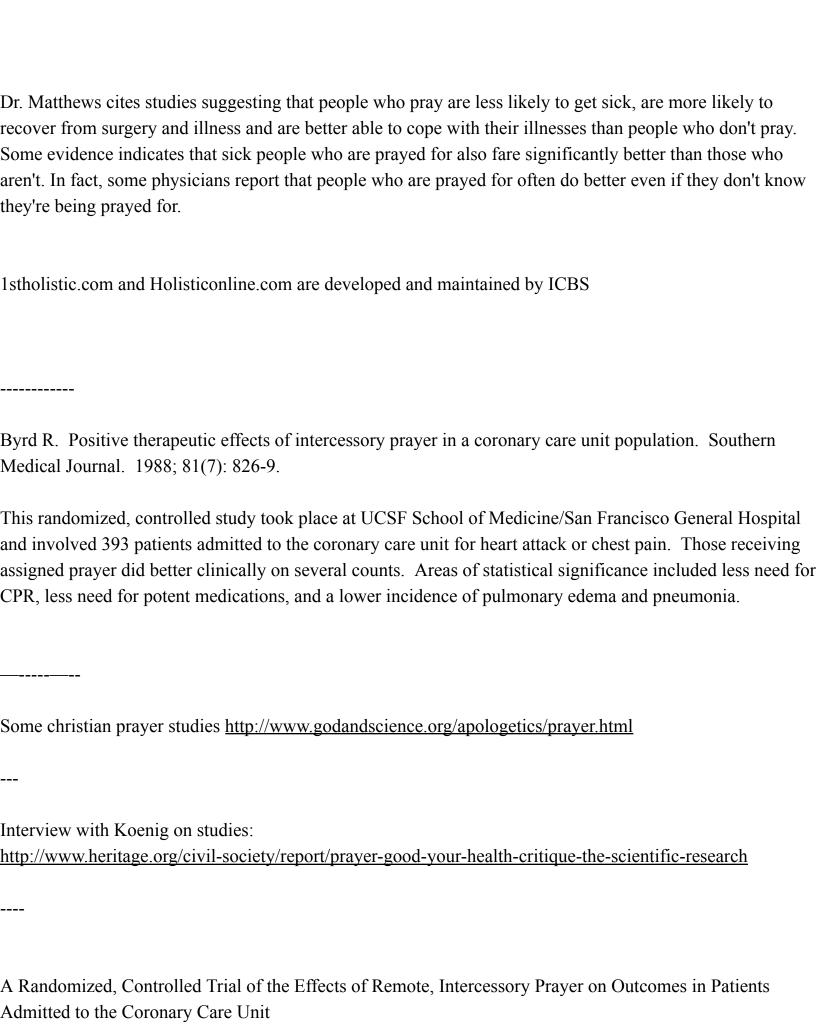
In the absence of hard data, it remains a mystery or a miracle.

The other kind of prayer, in which sick people pray for their own recovery, is far easier for science to explain. Given the proven health benefits of meditation — lowering blood pressure, reversing heart disease — it's not difficult to see how prayer, which can be equally meditative and relaxing, might induce the same effects.

Recent scientific investigation shows that prayer can be used as an alternative therapy as successfully as meditation, exercise, or herbalism. A study of 91,000 people in rural Maryland showed that weekly church attendees had 50 percent fewer deaths from heart disease than non-churchgoers and 53 percent fewer suicides. Churchgoers have lower blood pressure levels than nonbelievers, even after smoking and other known risk factors are taken into consideration.

Many doctors believe that if they prayed with their patients before and after surgery or before administering a course of powerful drugs, this treatment might assist in the patient's recovery. Thirty medical schools in America are now offering courses in faith and medicine.

"Prayer works," says Dr. Matthews, associate professor of medicine at Georgetown University School of Medicine in Washington, D.C., and senior research fellow at the National Institute for Healthcare Research in Rockville, Maryland. Dr. Matthews has reviewed more than 200 studies linking religious commitment and health, cited in his book, 'The Faith Factor'.



William S. Harris, PhD; Manohar Gowda, MD; Jerry W. Kolb, MDiv; et al

Conclusions Remote, intercessory prayer was associated with lower CCU course scores. This result suggests that prayer may be an effective adjunct to standard medical care.

https://jamanetwork.com/journals/jamainternalmedicine/fullarticle/485161

More Positive Healing Studies in Humans:

Harris W, Gowda M, Kolb JW, Strychacz CP, Vacek JL, Jones PG, Forker A, O'Keefe JH, McCallister BD. A randomized, controlled trial of the effects of remote, intercessory prayer on outcomes in patients admitted to the coronary care unit. Archives of Internal Medicine. 1999;159(19):2273-2278.

This double-blind study took place in the coronary care unit at Mid-America Heart Institute, Kansas City, Kansas, and the University of Kansas School of Medicine. Those receiving assigned prayer had a statistically significant, overall better clinical score than the control group.

Krucoff MW, Crater SW, Green CL, Maas AC, Seskevich JE, Lane JD, Loeffler KA, Morris K, Bashore TM, Koenig HG. Integrative noetic therapies as adjuncts to percutaneous intervention during unstable coronary syndromes: Monitoring and Actualization of Noetic Training (MANTRA) feasibility pilot. American Heart Journal. 2001;142(5):760-767.

This double-blind, randomized controlled trial took place at Duke Medical Center. Prayer groups around the world prayed for people undergoing urgent cardiac catheterization and angioplasty. In this pilot study, prayer came from prayer groups around the world. The prayed-for group had 50 to 100 percent fewer complications (bleeding, arrhythmias, death, etc.) than the group not assigned prayer.

Sicher F, Targ E, Moore D, Smith HS. A randomized double-blind study of the effect of distant healing in a population with advanced AIDS — report of a small-scale study. Western Journal of Medicine. 1998;169(6):356-363.

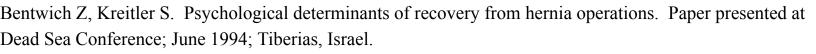
This double-blind study of patients with advanced AIDS took place at UCSF School of Medicine/California Pacific Medical Center. The intervention was "distant healing intentions," which often took the form of prayer. The intervention group had a lower incidence of AIDS-associated illnesses, fewer and shorter hospitalizations, fewer doctor visits, and better psychological profile scores. There was no correlation between clinical outcomes and whether the patients believed they were receiving healing intentions/prayer.

Tloczynski J, Fritzsch S. Intercessory prayer in psychological well-being: using a multiple-baseline, across-subjects design. Psychological Reports. 2002;91(3 Pt 1): 731-41.

This randomized controlled trial studied the effects of intercessory prayer in undergraduates in an upper-level psychology course. Eight participants were prayed for in a Multiple Baseline Across Subjects research design, which included a 1-week minimum baseline period for all subjects followed by the sequential presentation of the independent variable so that every two weeks, two additional subjects were being prayed for until all but 2 participants, who maintained baseline, were exposed to being prayed for at 7 weeks. All participants were prayed for by one of the experimenters using a nondirective method of prayer where no specific requests were made. All subjects completed the Taylor Manifest Anxiety Scale on a daily basis for 5 weeks and the Minnesota Multiphasic Personality Inventory-2 on a weekly basis for 7 weeks. Analysis of data identified significant reductions in anxiety scores on both the tests for subjects who were prayed for but not for those who were not prayed for.

Cha KY, MD, Wirth DP, Lobo R. Does prayer influence the success of in vitro fertilization-embryo transfer? Report of a masked, randomized Trial." J. Reproductive Medicine. September 2001; 46(9): 781-787.

This triple-blind, controlled trial of off-site prayer involved women undergoing in vitro fertilization and embryo transfer in a fertility clinic in Seoul, Korea. The group receiving assigned prayer from people in the U.S., Canada, and Australia had twice the successful pregnancy rate as women in the control group, a highly significant result. This study is suspect: one of the authors was subsequently convicted of fraud (Wirth), and another (Cha) had financial interests in the fertility clinic involved in the experiment.



This controlled trial of prayer involved individuals undergoing hernia surgery. The group receiving assigned prayer had a significantly better clinical course according to several pre-selected criteria.

- Leibovici. L. Effects of remote, retroactive intercessory prayer on outcomes in patients with bloodstream infection: a randomized controlled trial. British Medical Journal;2001(323):1450-1451.
- In this randomized, controlled, blinded experiment, prayer was offered to over 3,000 patients with sepsis four to 10 years after they were hospitalized. The prayed-for group had a statistically better course regarding length of stay and course of fever.
- For a discussion of this unusual study, see: Olshansky B, Dossey L. Retroactive prayer: A preposterous hypothesis? British Medical Journal. December 20, 2003;327:1465-68.
- For a review of twenty-four controlled trials of retro-temporal influence on biological and inanimate systems, see: Braud W. Wellness implications of retroactive intentional influence: exploring an outrageous hypothesis. Alternative Therapies in Health & Medicine. 2000;6(1): 37-48. http://www.integral-inquiry.com/docs/649/wellness.pdf
- Brown CG, Mory SC, Williams R, McClymond MJ: Study of the therapeutic effects of proximal intercessory prayer (STEPP) on auditory and visual impairments in rural Mozambique. South Med J; 2010 Sep;103(9):864-9
- BACKGROUND: Proximal intercessory prayer (PIP) is a common complementary and alternative medicine (CAM) therapy, but clinical effects are poorly understood, partly because studies have focused on distant intercessory prayer (DIP).

METHODS: This prospective study used an audiometer (Earscan(R) 3) and vision charts (40 cm, 6 m "Illiterate E") to evaluate 24 consecutive Mozambican subjects (19 males/5 females) reporting impaired hearing (14) and/or vision (11) who subsequently received PIP interventions.

RESULTS: We measured significant improvements in auditory (P < 0.003) and visual (P < 0.02) function across both tested populations.

CONCLUSIONS: Rural Mozambican subjects exhibited improved audition and/or visual acuity subsequent to PIP.

The magnitude of measured effects exceeds that reported in previous suggestion and hypnosis studies.

Future study seems warranted to assess whether PIP may be a useful adjunct to standard medical care for certain patients with auditory and/or visual impairments, especially in contexts where access to conventional treatment is limited.

http://bmlsearch.com/?&kwr=20686441[pmid]&cmpgt762301=BLD2045T4yg8hXqoy&dt02=&dt03=&xpcl ps3=Matches

Olver IN, Dutney A. A randomized, blinded study of the impact of intercessory prayer on spiritual well-being in patients with cancer. Alternative Therapies in Health and Medicine. 2012; 18 (15): 18-27. In a randomized, blinded trial at the Royal Adelaide Cancer Research Centre, South Australia, researchers added Christian intercessory prayer from an external prayer group to normal cancer treatment in 999 patients with cancer between 2003 and 2008. Intercessors received information about the subjects, but not enough to identify them. Two-thirds of the subjects provided follow-up questionnaires. The intervention group showed significantly greater improvement over time compared to the control group for spiritual well-being (p=.03), emotional well-being (p=.04), and functional well-being (p=.06). The group concluded that the experimental group receiving intercessory prayer showed small but significant improvements in spiritual well-being.

Positive Healing Studies in Nonhumans

Lesniak KT. The effect of intercessory prayer on wound healing in nonhuman primates. Alternative Therapies in Health and Medicine. 2006; 12(5): 42-48. This study examined the effects of intercessory prayer (IP) on wound healing and related physiological and behavioral factors In 22 Garnett's greater bush

babies, a monkey-like African primate. IP was employed in a randomized, double-blind study design to heal self-inflicted wounds in the animals. Animals receiving IP + tryptophan had a statistically significant wound reduction rate when compared to the tryptophan-only group. The IP group also demonstrated statistically significant increases in red blood cells, hemoglobin, and hematocrit, and a significant reduction in wound grooming and total grooming behaviors than the non-prayer group. This study is important because it was conducted in a nonhuman species; therefore, the likelihood of a placebo effect was removed.

For a list of other types of God evidence see this list: https://docs.google.com/document/d/e/2PACX-1vRBX8k0jzAe1lx7W_eZf00IBky3eW3_n-7Q-doTzropkCF https://docs.google.com/document/d/e/2PACX-1vRBX8k0jzAe1lx7W_eZf00IBky3eW3_n-7Q-doTzropkCF https://docs.google.com/document/d/e/2PACX-1vRBX8k0jzAe1lx7W_eZf00IBky3eW3_n-7Q-doTzropkCF

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