LETTER TO THE EDITOR

RE: Response to Palmistry, Tarot Cards, and Psychotherapy; Vol 160, Number 2; pp107-110

Even though I am not a psychiatrist, I found Dr. Pejic’s article on “Palmistry, Tarot Cards, and Psychotherapy” to be thought provoking. Specifically, his comments regarding the use of words in hope and healing are of interest to me. I have been a practicing physician for 28 years, but I am still learning how and when to speak “carefully chosen words” with the hope that those words will in some way assist in the healing process. However, I do have some differing opinions in regard to the idea of hopeful or healing words based on palm readings and tarot cards.

First of all, I would emphasize that as physicians one of our Hippocratic mandates is to “first do no harm”. However, there are those clinicians, including myself, who believe that palm reading and tarot cards are more than just innocent games, psycho-manipulation, or even ancient entertainment. Such activities are often times associated with some of the unhealthier and fundamentally evil aspects of attempts to communicate with or understand the “unseen real” of the spirit world (ex. the Washington Sniper). Extensions of this belief system include the concept that the ultimate author of any message based on palm reading or tarot cards is actually Satan, who is furthermore considered to be the master of deception and lies. If indeed these ideas regarding spiritual reality are correct, then it does raise two questions:

1. “Is there any legitimate hope in words based on deception or lies?”
2. “Is no hope better than false or deceptive hope?”

Another concern when considering the use of tarot cards and palm reading in order to come up with hopeful words is the fact that not all messages and reading generated by such methodologies are positive or hopeful. Once again this does raise some question in my mind regarding the benefit of such negative messages to individuals potentially in need of genuine hope.

All factors considered, whether I am speaking words as a physician or receiving words as a patient, I would prefer the offering of words and hope based on something far more substantial, powerful, and eternal than tarot cards or palm readings.

I am aware that the opinions just expressed are anecdotal and may be considered subjectively experiential by many. However, I would suggest that Dr. Pejic’s comments are also subjective and anecdotal as neither position was offered based on the evidence based literature. Some may even deny the existence of any type spiritual reality. If indeed that is the case, I would remind individuals holding such opinions of the words of C.S. Lewis who wrote “There are two equal and opposite errors into which our race can fall about devils. One is to disbelieve in their existence. The other is to believe, and to feel an unhealthy interest in them. They themselves are equally pleased by both errors and hail a materialist or magician with the same delight” (C.S. Lewis, The Screwtape Letters, New York: Macmillan, 1961, preface).

Randall D. Lea, MD

Dr. Lea raises some excellent points about the potential evilness of Tarot cards, as well as the ethical concerns of providing hope. I hope to address these concerns.

First, I must admit that while preparing to research this paper I judged the palm and Tarot card readers (the readers) as being fraudulent and self-interested, but not satanic. Yet, the readers proved my assumptions to be wrong. Most readers seemed kind and empathetic, which reminded me of the supportive therapy that I conduct in the psychiatric clinic. To be certain, trust and empathy are the cornerstones of such therapy. This is not to say that the readers are qualified therapists. They aren’t. But their empathy is a curious thing, especially given the stereotypes I held, as well as Dr. Lea. Such stereotypes stem from horrendous crimes like the example provided of the Washington Sniper.

The sniper was John Allen Muhammad who murdered several people within the Beltway during the Fall 2002 (washingtonpost.com). He had left the Tarot card of death, upon which he inscribed the words “Dear Police, I am God.” The death card among the Tarot deck is archetypal of the death theme, one of life’s many themes. This card could mean actual death or symbolic death, as in the breakup of a relationship. It was not reported that the Washington Sniper practiced Tarot, just that he had placed the card at the scene of the crime to taunt the police.

The stereotype I had developed of the readers was dissolved after I had my own readings. The reason is that I left the reading feeling hopeful for the rest of the day. I know it sounds silly, but I often feel this same relief after visiting the doctor. The common denominator between the two is of hope. Hope is the positive regard of your future, things may be OK or there is a chance that life will improve. Dr. Lea was concerned that Tarot reader’s version of hope may be deceptive or rooted in lies. He raised the question “is no hope better than false hope?” I argue in favor of false hope over none at all (save blatantly lying). No hope seems callous and counter-therapeutic. We can probably agree that making statements to patients like “only god knows when we go” or “I don’t know if you will die, but I know I won’t give up on you” are not harmful. They leave the door to life cracked open. Yet, I do accept that in terminal illness that these statements are not always appropriate and need to be finessed. Therein lies the art of doctoring.

Also important is that we know the placebo effect works. Placebo is hope at work. How do we explain that 20% to 30% of patients improve with taking a sugar pill? One could make the case that the history of medicine is of the placebo effect, given former treatments of inert concoctions and bloodletting. Ironically, bloodletting is likely harmful. However, patients still held doctors in high regard and still allowed us to treat them. I think the explanation of this enduring relationship is rooted in trust and hope. I do not endorse lying to patients, but I certainly don’t endorse forsaking hope. That would go against “first, do no harm,” which physicians can agree.

Nicholas G. Pejic MD