Spiritual healing from Iranian cancer patients’ viewpoints: A hybrid concept analysis
Forough Rafii, Fereshteh Javaheri Tehrani, Maryam Saeedi

Abstract:
BACKGROUND: Spiritual healing is a complementary and alternative treatment with different meanings in different cultures and religions. However, the concept has not been defined from the cancer patients’ points of view. The present study was done with the aim of concept analyses of spiritual healing from Iranian cancer patients’ viewpoints.

METHODOLOGY: The study was done using a hybrid method at three phases including of theoretical study, field study, and final analysis. In the theoretical study phase and using the keyword “spiritual healing,” pertinent articles were searched in main databases. In the field study phase, ten cancer patients were interviewed, and in the final phase, the two other phases were analyzed. After determining features, antecedents, and consequences, a conclusive definition of spiritual healing from Iranian cancer patients’ viewpoints was proposed.

FINDINGS: Spiritual healing from Iranian cancer patients’ viewpoints was featured with four themes, including connection with paranormal forces; effective, noninvasive, inexpensive, and efficient therapeutic method; a way to achieve piece, adaptation, and health and influenced by cultural and religious beliefs. Spiritual healing is a complementary and alternative treatment that helps careseekers to achieve health through paranormal forces and energies. As the findings showed and according to the participants’ viewpoints, the source of such forces and energies was divine force and the healers were mediums to transfer the energy.

CONCLUSION: The findings supported that religion and faith were the key elements of spiritual healing in the Iranian Islamic context.

Keywords: Cancer, concept analysis, hybrid, spiritual healing

Introduction

According to the International Agency for Research on Cancer, it is estimated that there are 18.1 million new cancer cases and 9.6 million cancer death in 2018, including various diagnoses such as lung cancer in both sexes. Ten-year survival was 56% in the American population. Surviving patients suffer from negative impact on physical and emotional functioning and experience psychological symptoms such as anxiety, fatigue, and depression. They have many concerns about their treatment, recurrence of the illness, body image, finance, and so on. They use Complementary and Alternative Medicine (CAM) such as Yoga, Tai Chi, and Qi Gong. Popularity of CAM has been rapidly increased and many patients in all the world use spiritual healing and other CAM practices. According to Nightingale, spiritual actions and spirituality are intrinsic identities of humanity and potential healing forces. Spirituality religion improves adaptability, coping, and mental health. According to Koenig and Cohen, (2002) through improving adaptability skills and positive feelings like hope and mercy,

How to cite this article: Rafii F, Javaheri Tehrani F, Saeedi M. Spiritual healing from Iranian cancer patients’ viewpoints: A hybrid concept analysis. J Edu Health Promot 2020;9:32.
spirituality keeps the mind, spirit, and body in a harmonious and balanced mood during stressful situations.\textsuperscript{[9]} Spiritual behaviors like prayer have many positive effects on patients and alleviate anxiety.\textsuperscript{[10]} Prayer or AlSalah in the Islamic context reduces the risk of emotional conflicts such as tension or nervous stress and aggression. AlSalah or other religious practices can control various stress factors and developmental and psychological health.\textsuperscript{[11]} But what is spiritual healing?

Spiritual healing is one of the complementary and alternative treatments,\textsuperscript{[12]} that is, used to reduce anxiety level, achieve well-being, or improve the patient’s condition.\textsuperscript{[13]} While spiritual healing is accepted in different cultures as a treatment,\textsuperscript{[14]} there is no clear and definite perception or definition of it available.\textsuperscript{[15]}

People have different ways to experience spirituality. It might be accompanied with religious actions such as prayer, meditation, reading religious textbooks, and visiting religious persons. Some persons use various rituals such as burning candles or healing symbols like healing stones so that all these constitute different aspects of spirituality.\textsuperscript{[16]} The term “spiritual” is usually used along with “religion” so that many believe that spirituality and religious beliefs are related to each other. However, some evidence in the literature do not support such relationship. To explain this, some people have strong spiritual feelings, while they do not define themselves as followers of a specific religion.\textsuperscript{[17]}

Medicine and religion follow the common objective of prolonging the life, improving quality of life, and improving health condition.\textsuperscript{[18]} However, these two might adopt different tools in different cultures. Therefore, nurses need to be familiar with life process and the aspects of health and healing in their culture.\textsuperscript{[19]} It is said that spirituality and spirit contribute to healing process and nurses need to have thorough knowledge about dynamism of and the energy that constitutes the soul and inner healing to achieve the unity of the spirit and body.\textsuperscript{[20]}

Therefore, and given the necessity of understanding spiritual healing by nurses to provide better and comprehensive treatment and the fact that there are different definitions of spiritual healing in different religions, traditions, and culture, the present study tries to elaborate on the concept of spiritual healing using the hybrid model.

**Methodology**

The hybrid model was used to analyze the concept of spiritual healing. The model was designed by Schwartz-Barcott and Kim (1986, 2000), and it is one of the ways to develop and complete concepts and theories. It is used in nursing to eliminate abstract nature and ambiguity of concepts so that the concept is examined based on the available context.\textsuperscript{[19]} The reason for using the hybrid model is that elaborating on the patients’ viewpoint along with literature review leads to a better and deeper understanding of the concept of spiritual healing in Iranian cancer patients. The hybrid model follows theoretical and experimental approaches, including three phases, namely theoretical study, field study, and final analysis, which are further explained in the following sections.

**Phase 1: Theoretical study**

To perform literature review, published papers on “spiritual healing” were searched in credible databases such as CINHAL and MEDLINE; online content available on Web of Knowledge, Scopus, Ovid, ProQuest, and PubMed; and Iranian databases such as IranDoc, Magiran, and SID without time limitation. The main keywords included “spiritual” and “healing.” In addition, other keywords such as faith, belief, religion, and healing were used to find more papers. Inclusion criteria were relevance to spiritual healing, published in English, original or review papers, availability of full text, and the keywords mentioned on the title or abstract. There was no time limitation for the search, and the primary search resulted in 10,982 papers. After reviewing the titles and abstracts, checking availability of full texts, removing the duplicate papers, and based on the inclusion criteria and the objectives of study, 48 papers remained in the study. In the theoretical study phase, 23 articles were analyzed (diagram 1). At this stage, features of the concept spiritual healing, the antecedents, and the consequences were determined through reviewing the papers. Some of the papers are listed in Table 1. In the field study phase, an operational definition of the concept of spiritual healing was determined.

**Phase 2: Field study**

In this phase, participants were selected and interviewed to glean data for further analyses.\textsuperscript{[19]} Twelve semistructured interviews were carried out with cancer patients hospitalized at Firouzgar Hospital.

The participants were selected through purposeful sampling and interviews were begun with an open question about healing, spiritual healing, and personal experiences in this regard. Deep interviews were continued until data saturation. Each interview was recorded and analyzed to find better questions for the next interviews. The interviews were performed at the Oncology and Hematology Wards of Firouzgar Hospital, Tehran, Iran. Some of the questions were like what is healing? Who is a healer and what are his/her characteristics? What is spiritual healing? What is your experience about spiritual healing? And what were the consequences of your experience with spiritual healing?
Table 1: Some important studies with the issues of spiritual healing

| References | Field of study | Features | Antecedents | Consequences |
|------------|----------------|----------|-------------|--------------|
| Wirth 1995[27] | Effect of belief and expectancy on consequence of spiritual healing | Based on healing rituals, its history with advent of man | Patient and healer’s belief and expectancy, Patients’ full participation, Psychological state of patient and healer, Bounding between patient and healer | Physical and psychological improvement |
| Hodges and Scofield 1995[23] | Validity of spiritual healing as a therapy | Noninvasive, Relatively risk-free treatment, Without side effects, Economic value, Applicable everywhere or at a distance, Time-saving | Direct interaction between patient and healer, Psychological factors | Improvement in the patient’s condition |
| Risberg et al., 1996[23] | Spiritual healing and patients’ religious preference of pastoral services | Nonproven therapy, Alternative medicine, Intentional influence, Near, distant healing or self-healing, Facilitate change, Channeling energies, Unpredictable results, Religious basis | Being religious, Diagnosis of illness, Prior spiritual healing attempts | Increasing religious belief |
| Benor 1996[25] | Spiritual healing for pregnancy | Intentional influence, Near, distant healing or self-healing, Facilitate change, Channeling energies, Unpredictable results, Religious basis | Faith of healer and patient, Spiritual awareness | Healing, Psychosomatic reactions, Physical or mental change |
| Jonas and Crawford 2003[32] | Critical literature review of spiritual healing | Using direct mental or spiritual techniques, Basis of culture and religion, Without interfering with medical care | Knowledge and expectation of healer and patients about its benefits, Patient preference | Orientation of behaviors toward a higher being or God, Improvement of well-being and quality of life |
| Javaheri 2006[34] | Prayer healing in Iranian population | Cultural way of coping with health problems, Religious basis | Patient adherence to healer’s advice, Healer-patient relationship, Inner ability of healers, Positive attitude of patients about healers, Trust or doubt about healer’s success | Emotional change, To be affected by healers personality, Inner evolution, Desirable experience, Change in physical or psychological condition |
| Bishop et al., 2010[36] | Development of a consequence measure for spiritual healing | Patient’s idea about healing, Patient’s hopes and expectations of healing, Patient’s idea about healers, Last experience | Existential outlook, Overall health, Energy levels, Emotional balance, Self-confidence, Acceptance of current health, Strengthen the client’s body, Restoring balance, harmony, and connection to the energy flow, Positive changes in physical and mental status | |
| Mark and Lyons 2014[37] | Conceptualizing mind, body, and spirit | Spiritual interaction, Spiritual information, Transferring energy | Healer as a channel of energy, Interconnection between mind body and spirit | |
| Teut et al., 2014[38] | Perceived consequences of spiritual healing | Process of internal cleansing, Process of change, Supporting clients to change | Preexisting expectations, Personal resources, Client-healer relationship | |

Contd...
The interviews were transcribed and matched with the recorded voices for several times to improve the credibility of the study based on trustworthiness measures of qualitative studies. Data analysis was done along with the process of data gathering using conventional content analysis method. The obtained categories and subcategories were reviewed frequently to improve credibility and conformability of the findings. Eventually the key features of spiritual healing in cancer patients were determined.

**Phase 3: Final analysis**

In this phase, the results of interviews and the reviewed papers were compared, surveyed, and checked to achieve the final conclusions. A general analysis was done through combining the results of the two previous phases so that the codes extracted in theoretical study and field study phases were compared and a comprehensive definition of spiritual healing in cancer patients was proposed.

**Ethical concerns**

Permission was issued by the School of Nursing and Midwifery, Iran University of Medical Sciences, to carry out the study and interview the participants. The participants expressed their consent to participant orally. They were also informed that they can leave the study at whatever stage. The codes of anonymity and confidentiality of information were observed.

### Results

**Findings from theory phase**

According to Oxford Dictionary, “spirituality” has to do with influencing human’s soul or something in contrast with material or physic. The term “spiritual” refers to a deep spiritual or emotional relationship. If it is used in reference to man, it conveys the idea of not being interested in physical goals or values. However, in reference to beliefs, it conveys the religious beliefs and thoughts. In addition, the term “healing” in Oxford Dictionary is defined as a process of becoming whole and intact or bringing back something into a whole and intact state.

According to Mount and Kearney (2003), healing is a relational process toward integrity and wholeness that might be facilitated by a healer. However, this relationship has to do with the internal potential capacity of the patient. Healing is a direct interaction between a healer and a patient to alleviate or treat a disease.

Spiritual healing is a complementary and alternative treatment and a purposeful process that affects an alive system without using any known intervention, as Benor’s viewpoint (1990). The theory of spiritual healing was first introduced by Benor (1996). He argued that spiritual healing is aimed at regaining the balance and harmony of the body, emotions, mind, society, and spirit that has been affected by a disease.
According to Benor’s definition, spiritual healing is a systematic purposeful intervention that can be implemented on one or more than one individual to help a living system or a careseeker to use their internal potential sources in an efficient way to overcome stress and regain their health. The main idea of spiritual healing is based on the belief that humans are part of the universal natural energy, and this harmony can be directed toward the patient with the help of a therapist.

Spiritual healing represents a spiritual awareness including healing and to be healed based on religious beliefs. Prayer and its different forms are examples of spiritual healing. Prayer has common philosophical roots in different religions, and it is one of the alternative treatments in different cultures. Faith healing is another common name of spiritual healing, which highlights the necessity of having faith by the therapist or the patient or both of them. Another synonym of spiritual healing is psychic healing, which underscores the purposeful effect of therapist on the patient through paranormal aspects like telepathy. However, spiritual healing is differentiated from soul healing as the former is featured with contribution of the soul in the healing process. Spiritual healing uses mental or spiritual activities such as prayer, imagery, DreamWorks, lay on of hand, and religious rituals that have been common practices in different cultures. Other forms of spiritual healing are therapeutic touch, intercessory or healing prayer, and energy healing practices. At any rate, spiritual healing uses paranormal forces such as the soul and energies. Underlay on of hand technique, people visit nurses or physicians who have healing hands. Through this technique, the healer’s energy is transferred to the patient through the hand to create vital life energy in the patient. Spiritual healing might be implemented from a remote place so that the vital life energy travels the distance from the healer to the patient. In Iranian context, healing prayer is one of the common forms of spiritual healing. In Islam Holy Book, Quran, Muslims are invited to pray and keep God in their minds as a way to achieve their needs and wishes. In Asra we read: “And we send down of the Qur’an that which is healing and mercy for the believers, but it does not increase the wrongdoers except in loss.” Therefore, Muslim in Iran, pray five times a day and also when they face hard challenges. Faith therapists in Iran visit the patients and recommend specific points about prayer to them.

Some of the main antecedents and consequences of the concept of spiritual healing are listed in Table 1. In addition, Table 2 lists the features of the concept.

| Reference | Feature |
|-----------|---------|
| Willis et al., 2015 | Phenomenon |
| Levin et al., 2011 | Complementary treatment |
| Hodges and Scofield 1995 | Noninvasive and nonmedicinal treatment |
| Benor 1996 | Basis of religious and cultural beliefs |
| Aslin et al., 2000 quoted from Benor 1990 | Intentional influence |
| Javaheri 2006 | Cultural way of coping |
| Rao et al., 2016 | Preventive treatment |
| Hodges and Scofield 1995 | Time and cost-benefit |
| Hodges and Scofield 1995 | Applicable everywhere, at distant or by self |
| Teut et al., 2014 | Internal cleansing |
| Benor 1996 | Process of change |
| Benor 1996 | Unpredictable results |
| Levin et al., 2011 | Using supernatural forces or energies |
| Teut et al., 2014 | Helping clients to use their potential resources |
| Alzahrani et al., 2016 | Unacceptable by physicians |
| Carneiro et al., 2017 | Helping patients to reduce anxiety and well-being |

Findings of field study phase

Twelve semi-structured interviews were conducted with ten cancer patients hospitalized in Firouzgar Hospital. The participants were six women and four men with the mean age of 45 years. Eight patients had a hospitalization experience and two of them had been hospitalized for the first time. All of them were informed about their cancer. Six themes were revealed by analyzing the field study data, which are further explained in the following sections.

Approaches of spiritual healing

The majority of participants reported that prayer and chanting were functions of spiritual healing. Three participants had experienced yoga and meditation. The common approaches of spiritual healing mentioned by the participants in three areas were routine or obligatory prayers (Vajibat), nonobligatory prayers (Mostahab) (e.g., chanting God’s names, Hajat prayers for healing, and talking to God), yoga, and meditation.
A participant noted: “energy therapy, meditation, and yoga are unfamiliar and strange terms for us, I think prayer is the same as meditation for us.”

**Therapist as a medium between man and God**
The participants saw therapist as mediums between the patient and God. They believed that the actual therapists were prophets, Imams, religious leaders, the yoga master, and other believers and good people including physicians and consultants. The participants mentioned that with specific characteristics, anyone can act as a medium between man and God in spiritual healing process. Participant (I) said: “any believer, trustworthy, benevolent, and good person can be a healer… I find it a source of peace and tranquility when I talk to a therapist because he/she is a positive person and gives that energy to me….”

**Places of spiritual healing**
The participants highlighted some of the places of spiritual healing. They said that spiritual healing could take place in such places like nature (mountain, garden, and desert), holy places (mosques, holy monuments, and shrines), and other places (anywhere that a connection between an individual and God is established). One of the participants noted that she prays better in holy places. Some of them underscored the positive energy of such places. Two participants mentioned holy objects like Karbala soil (Imam Hussein shrine soil) or Zamzam water (a holy spring in Mecca) and argued that these objects were healing agents. Participant (J) expressed his feeling about holy palaces: “I felt more energetic like a bird that is freed from its cage when I was in Imam Reza’s shrine.”

Participant (A) described her feeling of being in the holy cemetery of Takht-e-Foulad in Isfahan as follows: “I always go to Takht-e-Foulad when I feel sad… there I can find myself closer to God.”

**Features of a therapist**
By referring to the features of therapists, the participants argued that a therapist needs to possess five features including humane conduct, charismatic personality, faith in God, belief in the result, and intrinsic talent of healing. Participant (F) said: “you can feel his attractive and enchanting characteristic and feel calm when you talk to him.”

**Antecedents of spiritual healing**
Interviews analysis revealed five main categories of spiritual healing antecedents, including previous experience, faith in God, faith in achieving the objective, heartbeat, and desire or will. Participant (G) said: “there will be no healing unless the patient wants it. It is essential that the patient be willing to be healed… some patients have no motivation for life… they are just tired from the disease and want to die.”

Participant (B) said: “If a patient, who has lost all his/her hopes, asks God, he/she will be healed undoubtedly.”

**Consequences of spiritual healing**
The participants highlighted many consequences of spiritual healing that can be categorized into seven subcategories including feeling ease and relaxed, feeling good, adaptation, faith invigoration, connection to God, feeling positive energy, and hope for life. The majority of participants experienced a sense of ease and relaxed after prayer or visiting Imam’s shrines. Participant (D) mentioned that after prayer she found it easier to adapt to her disease. She explained her experience: “after prayer and talking to God, I felt like He was watching me and knew how I was in pain.”

Participant (E) described her feelings after yoga practice: “Usually I feel more relaxed after yoga sessions… I feel a positive energy inside.” Participant (C) described her feelings after prayer: “I tend to talk to God after prayer and ask Him to heal all patients including me… afterwards, I can feel more relaxed.”

**Final analysis phase**
Based on the literature review, spiritual healing is one of the complementary and alternative treatments that help careseekers regain their health using their potential resources. In this purposeful process, therapists transfer paranormal energies to the careseekers. Spiritual healing is a noninvasive treatment on religious and faith bases aimed at influencing the careseeker. Throughout the process, the relationship between the therapist and careseeker facilitates realization of physical, mental, and spiritual balance and harmony. The treatment is free of any medical specification and does not intervene with medical interventions. As showed by literature review, healing prayer or healing through prayer was the most common spiritual healing approach in Islamic countries like Iran.

Some of the antecedents of spiritual healing extracted from the reviewed papers were hoped for achieving the objective, bonding between the careseeker and therapist, being religious, previous experiences with spiritual healing, patient’s preference, intrinsic capability of therapist, being connected to God as the superior source, and positive attitudes to life.

Some of the consequences of spiritual healing as the literature review showed were physical, mental, and emotional balance and harmony; invigoration of religious beliefs and faith; stronger connection to God; feeling well; internal evolution; feeling more energy; accepting status quo health condition; ability to change; and finding meaning in life.
Field study findings showed that there were different spiritual healing approaches in the Iranian Islamic context. Among these approaches, obligatory religious rituals, nonobligatory religious rituals (Mostahab), yoga, and meditation are notable. Spiritual healing has a strong religious base in Iran and patients connect themselves to God through prophets, Imams, religious leaders, and therapists. The participants found God as the main source of healing in different forms of healing. Accordingly, spiritual healing can take place anywhere, while better results are expected in holy places like shrines and nature as well. The reason for this is the belief that positive energies are abundant in such places. The participants also highlighted some features of therapists such as humane conduct, charismatic personality, faith in God, belief in attainability of the goal, and intrinsic healing gift. Among the antecedents of spiritual healing mentioned by the participants, previous experience, faith in God, belief in attainability of the goal, disappointment (broken heart), and desire and will are notable. According to the participants, feeling relaxed and calm, well-being, adaptability, connection with God, feeling more energy, and hope for life were the main consequences of spiritual healing.

In general, and based on comparing the results of theoretical and field study phases, spiritual healing has the four following features: (i) connection to paranormal forces; (ii) an effective, noninvasive, economic, and effective treatment method; (iii) a way of achieving peace, adaptation, and well-being; and (iv) influenced by cultural and religious beliefs.

**Definition of spiritual healing**

Given the results of theory and field study phases, spiritual healing is defined as follows: “a nonmedical treatment based on different approaches such as telepathy, energy therapy, lay on of hand, imagery, and religious prayers like routine and Hajat (a type of prayer performed specifically for realization of a wish) prayers in the case of Islamic countries. The process uses paranormal energies and forces to connect careseekers to God and a superior source of healing power in the universe. This mechanism helps patients to regain their health and physical, mental, and spiritual harmony.”

The final analysis of spiritual healing based on comparing the findings of theoretical and field study phases yielded the antecedents and consequences of spiritual healing as follows:

**Spiritual healing antecedents**

Patient and therapist’s belief in attainability, previous experiences, patient’s attitude toward therapist, faith in God and religious beliefs, patient and therapist’s bonding, patient’s desire and will, patient’s health condition, intrinsic capability of therapist, personal resources, and disappointment (broken heart).

**Spiritual healing consequences**

Feeling relaxed, ease, wellness, general harmony, adaptation, invigoration of faith and religious beliefs, connection to God, more energy, hope for life, finding a meaning for life, emotional changes toward feeling more power, healing, and love, feeling attraction to the therapist, desired experiences, and alteration of the concept of self.

**Discussion**

The concept of spiritual healing was analyzed using the hybrid model. The papers published on spiritual healing and interviews were analyzed using the qualitative approach. Field study findings supported the findings of the theory phase. In addition, with regard to the Iranian Islamic context, new themes of spiritual healing were found. The majority of the participants noted that prayer and talking to God were among the approaches for spiritual healing. They believed that healers were mediums between patients and God. Field study findings revealed two new themes; feeling relaxed and ease as a consequence of spiritual healing was one of them. Thus, prayer is an approach to spiritual healing that leads to feeling relaxed in the patients. Similarly, other studies in Iranian context have emphasized the effects of prayer on spiritual health. Prayer also has similar effect on physical condition of patient. Prayer in different contexts improves physical and mental performance of patients and creates a sense of wellness in them. The findings supported the sense of wellness as a consequence of spiritual healing.

Comparing the results of the field study and theoretical study phases revealed some of the similarities between the Iranian context and other cultures about spiritual healing. One of these similarities was the connection between man and God, which was the main theme of spiritual healing.

Another finding of the field study phase was about patients’ will and preference. According to the participants, healing is not possible unless the patient wants it. This finding was also supported by literature review. One of the known features of spiritual healing that was also underscored here was the preventive function of spiritual healing. This theme is accepted by Islamic guidelines through recognizing daily routine prayer as an obligation for Muslims so that they are required to pray five times per day throughout their lives. Given the effects of prayer on health and based on the above, one may conclude that prayer is the main approach of spiritual healing in Islam as a preventive approach.
Another key finding was the belief in attainability of the goal of spiritual healing. The subcategory frequently appeared in the reviewed papers and interviews as well. Some studies have referred to this concept as patients’ and therapists’ expectation with spiritual healing.[36] Another new theme found in the field study phase was disappointment (broken heart) as a circumstance of spiritual healing. Broken heart is defined in Oxford Dictionary as severe distress and agitation or a story with unforgettable joy.[21] The term was frequently used by the participants so that this concept is one of the main elements needed for a pray to be accepted by god.

Some of the findings in this work, such as disappointment or broken heart, are unprecedented and need more studies and analyses for clarification. Future studies may use this concept to develop new tools.

The findings may help the physicians and nurses to recognize the spiritual needs of patients. Health-care policy-makers may use the finding to solve spiritual needs of patients. For example, religious leaders that work as healers and mediums between man and God may help the patients by visiting them regularly. Holding public prayer ceremonies by religious leaders at hospitals is an example of spiritual healing session or a chance for the patient to visit religious leaders.

The limitation of this study is related to small sample size, commonly in other qualitative studies, which has been controlled with accompanying semi-structured interviews in the fieldwork phase.

**Conclusion**

Concept analysis of spiritual healing in the Iranian Islamic context showed that spiritual healing is a nonmedical treatment with different approaches; some of them have strong roots in religion. Religious approaches to spiritual healing are the most common approaches in Iran (prayer and chanting). In the process of spiritual healing, therapist uses paranormal energies to create a connection between man and God. Spiritual healing helps careseekers to attain physical, mental, and spiritual harmony or balance, well-being, and attain overall health.

**Acknowledgment**

Researchers’ of the present study appreciate the help of patients to participate in the study.

**Financial support and sponsorship**

Nil.

**Conflicts of interest**

There are no conflicts of interest between the authors.

**References**

1. Bray F, Ferlay J, Soerjomataram I, Siegel RL, Torre LA, Jemal A. Global cancer statistics 2018: GLOBOCAN estimates of incidence and mortality worldwide for 36 cancers in 185 countries. CA Cancer J Clin 2018;68:394-424.

2. Gerson M. A Cancer Therapy: Results of Fifty Cases: A Summary of 30 Years of Clinical Experimentalation. Gerson Institute, Station Hill Press; 1958. ISBN: 0961152621, 9780961152628.

3. Aaronson NK, Mattioli V, Minton O, Weis J, Johansen C, Dalton SO, et al. Beyond treatment – Psychosocial and behavioural issues in cancer survivorship research and practice. EJC Suppl 2014;12:54-64.

4. Denlinger CS, Barsevick AM. The challenges of colorectal cancer survivorship. J Natl Compr Canc Netw 2009;7:883-93.

5. Clarke TC, Black LJ, Stussman BJ, Barnes PM, Nahin RL. Trends in the Use of Complementary Health Approaches among Adults: United States, 2002-2012. National Health Statistics Reports; 2015. p. 1.

6. Alzahrani SH, Bashawri J, Salawati EM, Bakarman MA. Knowledge and attitudes towards complementary and alternative medicine among senior medical students in king abdulaziz university, saudi arabia. Evid Based Complement Alternat Med 2016; doi: http://dx.doi.org/10.1155/2016/9370721: pages: 1-72016:9370721.

7. Alligood MR. Nursing Theory-E-Book: Utilization and Application. London: Elsevier HealthSciences. http://public.ebookcentral.proquest.com/choice/publicfullrecord.aspx?p=2072101.

8. Deschénes G, Heintzman P, Reimer J. Integrating religious and spiritual practices with therapeutic leisure within the recovery process of persons with mental disorders. Couns Spiritual 2015;34:29-60.

9. Olsen NC. Reflections on faith and healing. J Assoc Nurses AIDS Care 2003;14:73-5.

10. Simão T, Caldeira S, de Carvalho E. The effect of prayer on patients’ health: Systematic literature review. Religions 2016;7:11.

11. Pajević I, Sinanović O, Hasanović M. Association of islamic prayer with psychological stability in Bosnian war veterans. J Relig Health 2017;56:2317-29.

12. Levin J, Taylor RJ, Chatters LM. Prevalence and sociodemographic correlates of spiritual healer use: Findings from the national survey of american life. Complement Ther Med 2011;19:63-70.

13. Carneiro EM, Barbosa LP, Marson JM, Terra JA, Martins CJ, Modesto D, et al. Effectiveness of spiritist “passe” (spiritual healing) for anxiety levels, depression, pain, muscle tension, well-being, and physiological parameters in cardiovascular inpatients: A randomized controlled trial. Complement Ther Med 2017;30:73-8.

14. Bell CJ. Public health implications of spiritual healing practice, in conditions such as depression. J Public Ment Health 2013;12:6-9.

15. Teut M, Stöckigt B, Holmberg C, Besch F, Witt CM, Jeserich F. Perceived outcomes of spiritual healing and explanations – A qualitative study on the perspectives of german healers and their clients. BMC Complement Altern Med 2014;14:240.

16. van Leeuwen R, Tiesinga LI, Jochensen H, Post D. Aspects of spirituality concerning illness. Scand J Caring Sci 2007;21:482-9.

17. Zullig KJ, Ward RM, Horn T. The association between perceived spirituality, religiosity, and life satisfaction: The mediating role of self-rated health. Soc Indic Res 2006;79:255.

18. Xu S, Hu J. Doctors’ faith. J Med Coll PLA 2013;28:35-8.

19. Meleis AI. Theoretical Nursing: Development and Progress. Pennsylvania. Fifth edition: Lippincott Williams and Wilkins; 2011.

20. Polit D, Beck C. Essentials of Nursing Research, Methods, Appraising Evidence for Nursing Practice. Philadelphia, United
States of America: Lippincott, Williams and Wilkins; 2010.
21. Oxford Dictionaries. Post-Truth. Oxford Dictionaries com; 2017.
22. Bridge DT, Bennett KS. “Spirituality, suffering, and healing”: A learning option for western australian medical students. J Pain Symptom Manage 2014;47:659-65.
23. Hodges RD, Scofield AM. Is spiritual healing a valid and effective therapy? J R Soc Med 1995;88:203-7.
24. Astin JA, Harkness E, Ernst E. The efficacy of “distant healing”: A systematic review of randomized trials. Ann Intern Med 2000;132:903-10.
25. Benor DJ. Spiritual healing for infertility, pregnancy, labour, and delivery. Complement Ther Nurs Midwifery 1996;2:106-9.
26. Mackereth P, Wright J. Therapeutic touch: Nursing activity or form of spiritual healing? Complement Ther Nurs Midwifery 1997;3:106-10.
27. Wirth DP. The significance of belief and expectancy within the spiritual healing encounter. Soc Sci Med 1995;41:249-60.
28. Zachariae R, Højgaard L, Zachariae C, Vaeth M, Bang B, Skov L. The effect of spiritual healing on in vitro tumour cell proliferation and viability – An experimental study. Br J Cancer 2005;93:538-43.
29. Patterson E. The philosophy and physics of holistic health care Spiritual healing as a workable interpretation. Plast Surg Nurs 1999;19:46.
30. Masters KS, Spielmans GI. Prayer and health: Review, meta-analysis, and research Agenda. J Behav Med 2007;30:329-38.
31. Jonas WB, Crawford CC. Science and spiritual healing: A critical review of spiritual healing, “energy” medicine, and intentionality. Altern Ther Health Med 2003;9:56-61.
32. Targ R, Katra J. Miracles of Mind: Exploring Nonlocal Consciousness and Spiritual Healing. New World Library; First Trade Paper edition (April 23, 1999).