Thinking Globally, Acting Locally
The Health Message: Heaven’s Gift
Lift Up Your Eyes!
Jesus is the great center of influence in all truly effective medical evangelistic work. His healing, empowering, forgiving presence is its attractive light. Constant connection with Christ makes the physician and dentist a center of influence in the home, the office, the church, the community, and the world.
The Medical Evangelist is the official publication of the Adventist Medical Evangelism Network. The purpose of the publication is to equip physicians and dentists to be effective medical evangelists.

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A recently released documentary film, Forks over Knives, showcases the benefits of a plant-based diet—not only for preventing but also for reversing heart disease and cancer. This film received acclaim by news outlets such as CNN, as well as Seventh-day Adventist institutions and other proponents of lifestyle medicine. Many Seventh-day Adventists saw this film at their local churches, or on DVD, and were inspired by its positive lifestyle message. The film features the work of several physicians and scientists, including Dr. Caldwell B Esselstyn Jr., a noted surgeon at the Cleveland Clinic who, in clinical studies, has demonstrated that heart disease can be reversed by a nonfat, vegan diet. It also featured T. Colin Campbell, PhD, who wrote The China Study, a book in which he showed that a diet low in animal products and saturated fat leads to less risk for heart disease, cancer and obesity.

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As Seventh-day Adventist physicians and dentists, we have the opportunity to present to our patients a lifestyle that will add seven and ten years to their lives and to reduce their risk of cancer, obesity and heart disease. That’s great. But, in addition, we are directed to point our patients to the source of true healing and eternal life.

Therefore, we must avoid the temptation to feel that others are doing a better job of educating the public on lifestyle medicine; instead, we must recognize that, devoid of a spiritual message, lifestyle alone will have little impact in view of eternity. It is my prayer that the reader of this journal will be inspired to not only present the health message as an opening wedge but to seek for those who need a deeper experience with their Creator and Redeemer. True medical missionary work must point our patients to Christ, not just to address their physical needs but their spiritual ones as well. True healers address the body, soul and spirit.

As we have been told: “The religion of the Bible is not detrimental to the health of the body or the mind. The influence of the Spirit of God is the very best medicine that can be received by a sick man or woman. Heaven is all health, and the more deeply the heavenly influences are realized the more sure will be the recovery of the believing invalid” (5T, 172).

Brian Schwartz, M.D.

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The Deception of Deception

As a man thinks in his heart, so is he (Proverbs 23:7).

“If the thoughts are wrong, the feelings will be wrong; and the thoughts and feelings combined make up the moral character... The power of right thought is more precious than the golden wedge of Ophir” (Ellen White, In Heavenly Places, page 164).

My wife and I recently took a trip to Venice, Italy. It was not a medical missions trip, but a “come apart and rest a while” trip. We were impressed by the many African street vendors selling all manner of counterfeit designer merchandise. These vendors were doing business within a few dozen feet of stores selling the actual trademark designer brand names. One would notice an eight hundred dollar Chanel bag in a store window, then walk down the street a few feet and be accosted by aggressive street vendors selling a seemingly identical Chanel bag for under a hundred dollars. The same was true for designer sunglasses, high-end time pieces, trendy shoes and leather goods. No one seemed too concerned about the counterfeit merchandise, including the owners of the stores selling the genuine products. We watched the owners leave their stores at closing, and walk past the street vendors with nothing more than a wry smile and nod of the head.

Purchasing counterfeit merchandise may be counter-productive in numerous ways. Many people would be concerned primarily with such things as funding shady businesses, undercutting legitimate businesses, poor-quality merchandise, etc. However, recent fascinating research brings to light other, unexpected consequences of “pretense.” Our human psyche and character are affected in ways far more destructive than issues of business markets and product value! Scripture says “as a man thinks in his heart, so is he” (Proverbs 23:7), and “by beholding we become changed” (2 Corinthians 3:18). These statements present a law of cognitive reality, not merely wise ancient moral advice. Further consideration will show that the Bible directs us with unfailing accuracy, whether we are dealing with health practices, moral law, spiritual realities, or intellectual experiences.

Consider the following experiment: Scientists at UNC Chapel Hill, Duke, and Harvard, recruited a large sample of young women and had them wear pricey Chloë sunglasses – the real thing. The purpose of the study was to determine if merely thinking one was wearing counterfeit shades would have moral consequences in other areas of life – cheating, stealing, dishonesty, etc.
The women were divided up into two groups – all wearing actual Chloé sunglasses – but half of them thought they were wearing cheap counterfeit versions of the expensive glasses. The women were then given a timed math test which was impossible to complete in the allotted time. After the test, the women were allowed to self-score the exam on the honor system (they graded themselves), and they were given a certain amount of money for each correct answer.

The results were amazing. The women who thought they were wearing fake designer sunglasses cheated considerably more. Seventy percent of the “fake” sunglass wearers inflated their scores when they thought that no one was checking – essentially embezzling or gaming the system for money. On the other hand, only 30% of the “true” sunglass wearers cheated on their scores.

The researchers were so surprised by the results, that they verified their conclusions with a different test. The same women were asked to indicate whether the left or right side of a computer screen had more dots on it. They received 1/2 cent if they answered left side and five cents if they answered right side – whether their answer was correct or not. Again, they self-scored themselves. This task again forced them to choose between an honest answer and a profitable answer. Once again, the women wearing what they thought were the counterfeit sunglasses took the money over the truth much more often than their peers did.

Remember, the women wearing what they thought were fake sunglasses (they were actually the real thing) were part of a random group, compared with the ones who correctly believed that they were wearing the real sunglasses. Thus it was not something intrinsic to the fake sunglass group that caused the difference. It was the actual act of wearing a fake that was triggering dishonesty!

In a follow-up study, the same group of researchers wondered if the act of attempting to polish self-image by wearing counterfeits, might not only affect personal ethics, but actually cause a cynical attitude toward others. In other words, does behaving unethically as a result of self-image concerns cause one to look at others as being phony and unethical?

The researchers tried another experiment using the same method. The two groups all wore genuine Chloé sunglasses, but one group thought they were wearing counterfeit Chloé glasses. The volunteers were asked to complete a survey about people in their social network – family, friends, coworkers, etc. For example, they were asked whether their peers would:

- use an express line at the grocery store with too many groceries in their cart
- pad an expense report
- take home office supplies
- overstate their GPAs

Does behaving unethically as a result of self-image concerns cause one to look at others as being phony or unethical?
Consistent with the previous data, the participants who thought they were wearing the counterfeit Chloé’s, saw other people as more dishonest, less truthful, and more likely to act dishonestly in business transactions.

The secular researchers came to a conclusion which sounds like it came from the Bible or an inspired author: “Wearing counterfeit glasses not only fails to bolster our ego and self-image the way we hope, it actually undermines our internal sense of authenticity. ‘Faking it’ makes us feel like phonyes and cheaters on the inside, and this alienated, counterfeit ‘self’ leads to cheating and cynicism in the real world.”

There is probably value in avoiding counterfeits when it comes to clothing and accessory purchases. The research discussed above, however, is just one example of the moral realities our world faces. God’s laws are not arbitrary, but built into the fabric of our intellectual and spiritual natures. Violation of those laws actually leads to “having their own conscience seared with a hot iron” (1Timothy 4:2).

It really is true that “by beholding we become changed” (2 Corinthians 3:18). That beholding process is not limited to what we see in the world around us. It involves the world within us, as the above research validates. “It is a law both of the intellectual and the spiritual nature, that by beholding, we become changed. The mind gradually adapts itself to the subjects upon which it is allowed to dwell. It becomes assimilated to that which it is accustomed to love and reverence. Man will never rise higher than his standard of purity or goodness or truth. If self is his loftiest ideal, he will never attain to anything more exalted. Rather, he will constantly sink lower and lower. The grace of God alone has power to exalt man. Left to himself, his course must inevitably be downward” (Ellen White, The Great Controversy, page 555).

There is good news in the gospel. It is expressed in Scripture and the Spirit of Prophecy, and supported by the weight of evidence. The good news is that choosing the truth over error will also lead to greater and greater blessings.

“Your word I have hidden in my heart, that I might not sin against You” (Psalm 119:11).

“The entrance of Your words gives light; It gives understanding to the simple” (Psalm 119:130).

“Great peace have those who love Your law, And nothing causes them to stumble” (Psalm 119:165).

The effects of sin and wrong choices are real, and have real consequences. We can take courage in the fact that the gospel also has real effects and is more powerful. “Where sin abounded, grace abounded much more” (Romans 5:20).

Thinking Globally, Acting Locally

Ours is a global church; thus, our mission is as well. AMEN members continue to respond to the global challenge that God, through the prophet Isaiah, set before His people in Isaiah 58. We must apply its principles to our practices, and to our lives.

Despite the rat race of just living, there are these breaking points where the stresses of life seem to win. I went through one recently. It felt like a dark and hopeless place. So I turned to God; surely He would succor me.

So, I fasted, from everything, even from work. Strange thing was, it didn’t help. Then, over the next few days, I had a few opportunities to minister to the needs of others. Then, guess what? By doing that, I had now embodied the promises of Isaiah 58:8-12.

Sure, we fast because we want God to hear us; we want to feel His presence; we want to receive His blessings. But Isaiah tells us that God is closest to us when we feed the hungry, clothe the naked, and house the homeless. We are promised that when we place the needs of others before our own, the divine takes up residence in humanity, and the character of Christ is reflected to a dying world.

The Lord has placed in the care of the church the poor, the widowed, and the fatherless. The character of your Christianity will be shown by the way in which you treat the Lord’s representatives. The best evidence you can give of love for Christ will be shown by your tenderness and liberality for those who need your help.

Thus, let us stop doubting, let us stop murmuring; instead, let us become doers of the Word. If you become laborers together with God, you will have a vital interest in others, and self will drop out of sight. The Lord has given to us talents that will enable us to bless others, and, thus, become richer and more joyful ourselves. “Our characters may become fragrant with good works; for by practice the living principles of righteousness will pass into the character, and unfold in beauty and purity of life.” Review and Herald, February 20, 1894.

Carlos Moretta, DDS

Thinking Globally,
Acting Locally

Carlos Moretta, DDS has moved up the dental ladder from being a dental hygienist to graduate of Loma Linda Dental School and then completed a post graduate residency in Oral and Maxillofacial Surgery at LLU. He is now an adjunct faculty at LLU, in private practice in Kettering, OH, and has gone on over 20 dental mission trips to South America, Central America the Caribbean and the Far East.
Inevitably there will always be those who cannot go on a mission trip abroad. To these I would say: think globally but act locally. One way you can do this is to target particular people groups—Somali refugees, for example—who may have taken refuge in your community. There are many agencies who seek out refugees from other countries going through disaster. Connecting with one of these agencies may be a good way to provide local and global help simultaneously. In other words, although local opportunities to alleviate suffering abound, you can still make a global difference by working with these groups right in your own community.

For those that are able to serve abroad, you may want to consider one of the trips listed below. These life-changing experiences overseas often serve as a paradigm shift, or a perspective adjuster for your personal and spiritual life. Please don’t miss the opportunity to connect with just one of these efforts. The Lord will surely bless you.

**Quiet Hour Ministries**
- **Malaysia** - November 4-19, 2011
- **Honduras** - March 29- April 8, 2012
- **Philippines** - April 13-28, 2012
- **Peru** - June 15-30, 2012
- **Philippines** - June 22 – July 7, 2012
- **Tonga** - July 3-15, 2012
- **Tonga** - July 17-29, 2012
- **South Africa** - July 12-29, 2012

**Share Him Ministries**
- **India** - February 24- March 10, 2012
- **Philippines** - April 6- April 21, 2012
- **Cuba** - April 20 - May 5, 2012

**Maranatha**
- **India** - Fall Open Team
- **Bugema** - University Open Team
- **Christmas Family Project**
- **Africa** - Open Team Project
- **Latin America** - Open Team Project

**Loma Linda University**
*Students for International Mission Service*
- **Honduras** - December 26- January 2
- **Malawi** - summer 2012

For more information on these projects email: missions@amensda.org.
The young nation’s president, George Washington, was fatally ill. One doctor drew fourteen ounces of blood from the president’s veins, in the mistaken belief that when a fever rises, the best thing to do was to take the overheated blood out of the body. When that didn’t work Washington’s physicians took out even more blood. In this weakened condition the President begged his physicians to let him die in peace. The morning after his death the press in the Nation’s Capital reported: “Our beloved leader had received the best care, but his untimely death occurred in spite of all that human knowledge and skill could do to arrest the course of the disease.”

This story gives us an idea of the state of medicine in early America. In fact, by the mid-1800s, things weren’t any better. Some common medical procedures included (believe it or not!): the use of mercury to cure disease; use of a lot of alcohol to help patients sleep; tobacco as a remedy for ailing lungs; and, of course, the time tested process of cutting open the veins and bleeding patients of what was, we now know, a fluid essential for health.

This was the medical environment in which God raised up the Seventh-day Adventist health message. It was sorely needed for many reasons, not just to correct some of the unscientific medical practices of the 1800’s.

Let’s examine four major reasons why the Lord, in His mercy, gave His people the health message to share with the world, and why it remains so relevant for us today.

#1 Healthier, Happier Lives

God gave us the health message because He wants us to live healthier and happier lives now.

This principle is illustrated in Jesus healing of the paralytic in Matthew chapter 9: “So he got into a boat and crossed over and came to His own city. And behold, they brought to Him a paralytic, lying on a bed.” Notice, they brought to Him a paralytic, lying on a bed. The paralytic did not come by himself. Don’t miss this crucial point: In the New Testament, there are about thirty separate case histories of healing; in more than half of them, the sick did not come to Jesus by themselves. Somebody was concerned enough to bring their loved one to Jesus. Jesus is the true source of all healing. All true science is based on the laws of the Creator. In the use of rational scientific methods we create an environment where healing can take place but He who heals the body is the One who created it in the first place. Whether we use natural remedies or 21st century cutting edge technology, we do not heal, He does. Jesus is...
the Restorer, the Healer—the Saviour.

The same verse continues: “Behold, they brought to Him a paralytic lying on a bed, and Jesus seeing their faith...” Faith is not just something cognitively believed. Faith is something that is seen when it is translated into action. It’s real, it’s tangible. The Scripture says, “Seeing their faith He said to the paralytic, Son, be of good cheer, your sins are forgiven thee.”

Now, notice – the man is healed and Jesus declares, “Be of good cheer.” Not only was the paralytic physically healed, His sins were forgiven and Jesus encouraged Him to be of good cheer. In other words Christ was saying to the man, “My desire for you is to live a happy, abundant life. Your sickness has robbed you from enjoying life in all of its fullness. I have given you back not only your health but life in all its richness.” And that is the same thing Jesus wants not only for us, but for the people that we meet in our offices, serve as our patients, and come in contact with in our daily lives.

One of the primary reasons that God has given His people a health message is to enable them to enjoy life to the fullest. God has given a health message not as some legalistic requirement to make people feel oppressed by all the things they have to do and all the things they cannot do. The health message is given by a loving God so that you and I can live an abundant life, and we can share that life with those whom we come in contact with.

#2 Clear, Receptive Minds

God has given His people a message of health so that we can know Him in all of His fullness. There is an intimate link between our physical, mental and spiritual health. Jesus often spoke of physical healing and forgiveness in almost the same breath. Here is an example from the story of the paralytic in Matthew 9. “Behold, they brought Him a paralytic, lying on a bed. And Jesus, seeing their faith, said to the paralytic, ‘Son, be of good cheer, your sins are forgiven you’.”

In the New Testament accounts of Jesus healing, there are times when Jesus heals and then says, “Go, sin no more.” On other occasions Jesus forgives, then heals. In Jesus’ mind, healing is restoration. It is restoration physically, mentally and emotionally. Sin has left its deadly toll on all aspects of our lives. The Gospel is to restore men and women to the image of God physically, mentally, and spiritually. The point is, there is a strong mental and spiritual component to the health message. Our physical bodies, our mental states, and our spiritual life are all intimately connected to each other.
For instance, our brains are nourished by the quality of the blood transported to them through our veins and arteries. The Holy Spirit does not speak to us through our big toes. He speaks to us through our brain. If, because of inactivity, the blood that passes to the brain does not oxygenate the brain; and if, because of a high fat diet, I have impaired my health in ways that impact my thought patterns, it’s that much harder for the Holy Spirit to reach me. If we are eating food that destroys the quality of the blood that nourishes the brain, our minds will not be as clear to understand the promptings of the Holy Spirit in the mind and in the heart. If our lifestyle habits destroy our health, it is much more than a physical matter, it is a spiritual issue.

Ellen White makes this point clear in an article printed in the Review and Herald in 1881, “Let none who profess godliness regard with indifference the health of the body, and flatter themselves that intemperance is no sin, and will not affect their spirituality. A close sympathy exists between the physical and the moral nature. The standard of virtue is elevated or degraded by the physical habits. Excessive eating of the best of food will produce a morbid condition of the moral feelings. And if the food is not the most healthful, the effects will be still more injurious. Any habit which does not promote healthful action in the human system degrades the higher and nobler faculties. Wrong habits of eating and drinking lead to errors in thought and action. Indulgence of appetite strengthens the animal propensities, giving them the ascendancy over the mental and spiritual powers.”

God has given us the health message so that, among other things, we can have clear minds, which will better enable us to draw closer to Him in prayer and Bible study. God has given us the health message so that a junk food diet does not destroy the health of our bodies and deaden our spiritual impulses. God has given us the health message so that we will not be so stressed out in overwork and lack of physical exercise that we have foggy brains and sluggish thoughts. God has given us the health message so we will have clear minds to listen to His voice speaking to us through His Holy Spirit and through His word so our hearts will be in tune with His heart and our minds in tune with His mind.

In short, God gave us the health message because He wants us to know Him more fully.

#3 A Prepared People
God has given His people the gift of health to enable them to be ready for the coming of Jesus.

Here’s where the Seventh-day Adventist health message is unique, not so much because of the specific health practices themselves (some of which were already being taught by others) but because health is part of a message to prepare a people for the coming of Jesus.

Health is not an add-on to Jesus’ teachings. It is an integral part of Jesus’ last day message. It is indissolubly linked to the message of the three angels to prepare a people for the last days. The apostle Paul affirms this thought in 1 Thessalonians 5:23, “Now may the God of peace Himself sanctify you completely, and may your whole spirit, soul and body be preserved.
Salvation comes only through the grace of Jesus Christ but His grace saves us completely not partially.

proclamation of God’s Word. They will just not receive it that way. But when we approach them with kindness and love and understanding – when we sympathize with them over the issues that they have in their health – then doors are opened to the medical missionary that are not opened to one who merely proclaims the gospel.

Matthew’s record says: “Behold they brought to Him a paralytic.” (Matthew 9:2) Consider Matthew 9 verse 32. “As they went out, behold they brought to Him a man mute and demon possessed.” Again, as we saw earlier, friends brought friends to Jesus.

Mark 8:22 reads, “Then He came to Bethsaida and they brought a blind man to Him.”

Again and again, medical missionaries bring people to Jesus. The message is so clear, it bears repeating: We are to bring people to Jesus, and nothing will work better for us than our health message.

Here are the words of God’s last day messenger “Nothing will open doors for the truth like gospel medical missionary work” (Ellen G. White, Evangelism, page 513).

blameless at the coming of our Lord Jesus Christ.” Seventh-day Adventists believe that human beings are an integrated unit: physical, emotional, mental, and spiritual. What affects our physical health affects our state of mind. What affects our mental state of mind affects our physical health. What affects our mental and physical health affects our emotional health. What affects our physical, mental, and emotional health affects our spiritual health. Jesus is longing for people that are totally committed to Him physically, mentally, emotionally and spiritually.

One of God’s end time purposes for the health message is to open the mind so the Holy Spirit takes full control. It is to prepare men and women physically, mentally, emotionally, and spiritually for the coming of Jesus. And for this to happen to us, we must learn to surrender anything and everything that stands in the way of that preparation. When we surrender anything in our life that is not in harmony with God’s will, He enables us to receive the Holy Spirit’s power for victory. He paves the way to empower us to overcome the next thing in our life that needs to be surrendered so we can be ready in every facet of our lives for Jesus return. This is by no means salvation by diet or exercise. Salvation comes only through the grace of Jesus Christ but His grace saves us completely not partially. When His grace permeates our lives we consecrate every aspect of our beings to Him in preparation for His soon return. The health message is part of His last day message of “giving glory to Him” in the final generation. (Revelation 14:7).

#4 Effective Witnesses

God has given us the health message to enable us to be the most powerful witnesses possible for Him as we approach His return.

There are many people, of course, whom we will never reach through a direct
What, then, is the purpose of medical missionary work? It is certainly to give us a longer, healthier life. Certainly it is to give us a better quality of blood and a more intimate relationship with Jesus. Certainly it is to prepare us for the coming of Jesus. But it is also, through loving ministry, to touch others with the gospel. It is not merely to wait on tables and make money in a health food restaurant. It is to use those moments as opportunities to share Jesus.

It is certainly much more than prescribing a hydrotherapy treatment. It is certainly much more than encouraging patients not to smoke cigarettes. It is certainly much more than getting them on a low-fat diet. However important these things are, in and of themselves, they are a means to an end, not the end in and of themselves!

There is a vast difference between health education and medical missionary work. We are medical missionaries. We have a task to accomplish for Jesus. We have a goal to reach. We are much more interested in the souls of men and women than we are in merely helping them live seven years longer so they can sin longer to burn in the lake of fire. Certainly, we want them to have the best quality of life. But we have ulterior motives.

And I don’t apologize for that! And, indeed, neither should you!

I have an ulterior motive. Along with you, I long to see the people I minister to through Medical Missionary work saved in God’s kingdom and rejoice with Him through all eternity. If love leads us to work as a physician, as a dentist, as a health educator or medical missionary in any way – if love leads me to work for the physical health of the people I serve, won’t that same love desire them to have eternity? If we love them enough to try to keep them from having a coronary heart attack, will we not love them enough to want them to have a new heart? If we love them enough to help them eat the best diet to reduce the risk of disease wouldn’t we also want to introduce them to Jesus the true health Restorer? If we love them enough to encourage them to drink adequate amounts of water would we not want them to quench their inner spiritual thirst with the Water of Life?

Conclusion

Why has God given us medical missionary work?

Notice, it is not medical mercenary work. It’s not merely to make money. Not merely to live a life of comfortable convenience. Not merely so we will be in health. God has given medical missionary work for us to be a channel of blessing to the world. It is a vehicle to touch people with the gospel. It provides opportunities to introduce people to Jesus the true Medical Missionary.

As a medical missionary, you have an incredible opportunity. As you lovingly reach out to touch people, and share the principles of health, hearts and minds will be opened to the gospel.

May we be faithful to our task. May we recognize the sacredness of our calling. May we see the health message as something God has given us so that we may have an abundant life. May we never become so busy in treating others that we fail to hear the Holy Spirit. May we not create static in our brains from overwork and overeating. May we sense the call to surrender everything in our lives. May we be ready for the coming of Jesus, and be the channels of blessing He longs for us to be in this crisis hour of earth’s history. This is our calling and this is our destiny. We cannot fail Him now.
Jesus is the great center of influence in all truly effective medical evangelistic work. His healing, empowering, forgiving presence is its attractive light. Constant connection with Christ makes the physician and dentist a center of influence in the home, the office, the church, the community, and the world.

Children
Children’s Programs will be offered throughout the weekend. Please visit amensda.org for more information.

CME Accreditation Statement
“The Kettering Medical Center is accredited by the Ohio State Medical Association (OSMA) to provide continuing medical education for physicians. The Kettering Medical Center designates this live activity for a maximum of 4 hours AMA PRA Category 1 Credit™. Physicians should only claim credit commensurate with the extent of their participation in the activity.”
Agenda

Thursday October 27, 2011
4:00 – 5:00 pm: Business Meeting
6:15 – 7:15 pm: Supper
7:30 – 9:00 pm: Phil Mills, MD – Whose Counsel?
9:00 – 9:45 pm: Exhibits Open

Friday October 28, 2011
7:30 – 8:30 am: Stephen Bohr – Our High Calling
8:30 – 9:30 am: Breakfast
9:30 – 10:25 am: Tim Howe, MD* – Every Practice a Life Style Center
10:30 – 11:45 am: Guthrie, Carney, Houmann, Whiting Center's of Influence – 4 Vignettes
11:45 – 11:55 am: Seminar Announcements
12:00 – 1:00 pm: Exhibits Open / Networking Time
1:00 – 2:00 pm: Lunch
2:00 – 3:00 pm: Seminar Session I
  • Mark & Teenie Finley – Making Your Church A Health Evangelism Center
  • Peter Landless, MD* – Relationships: the Secret Flavor in Freedom from Addictions*
  • Don Bovell, MD – The Power of Influence in the Emergency Room, Office and Beyond
  • Jeff McAuliffe, DDS – Reaching the Cities with Centers of Influence
3:05 – 4:05 pm: Seminar Session II:
  • Mark & Teenie Finley – Making Your Church A Health Evangelism Center (part 2)
  • Tim Arnott, MD – Your Office a Lifestyle Center – Making it Work
  • David Fernandez, MD* – Pain Management as an opportunity for Lifestyle Change
  • Patrick Im, DDS* – Changing Lives through Neuromuscular Dentistry
4:10 – 5:10 pm: Seminar Session III
  • Mark & Teenie Finley – Making Your Church A Health Evangelism Center (part 3)

• Nicolae Dan, MD – Sanitariums Thrive as Centers of Influence
• George Guthrie, MD, MPH, CDE, CNS* – Spiritual Mission and Medical Institutions
• Tricia Penniecook, MD, MPH – “Where is God When I Suffer?” The Role of Health Ministries in Disasters

5:15 – 6:15 pm: Exhibits Open / Networking / Sabbath Preparation
6:15 – 7:15 pm: Supper
7:30 – 9:00 pm: Neil Nedley, MD – Vacation Centers of Influence
9:00 – 9:45 pm: Non-commercial exhibits open

Sabbath October 29, 2010
7:30 – 8:30 am: Stephen Bohr – Our High Calling Part 2
8:30 – 9:30 am: Breakfast
9:45 – 11:10 am: Joe Nozaki, MD – Sharing Christ in Surgical Practice: My Experience
  • Wendell Lawrence, DDS – The Office as a Center of Influence for Health, Healing and Hope
11:20 am – 1:00 pm: Derek Morris: – Radical Apostleship
1:00 – 2:00 pm: Lunch
  Relax & enjoy the Sabbath on the beautiful South Carolina Coast
2:00 – 5:00 pm: Non-commercial Exhibits Open
5:00 – 6:00 pm: AMEN Short Term Missions & Musical Program
6:15 – 7:15 pm: Supper
7:30 – 9:00 pm: Des Cummings & Mark Finley – Reformers Once Again
9:00 – 9:45 pm: Exhibits open

Sunday October 30, 2011
7:30 – 8:30 am: Stephen Bohr - Our High Calling Part 3
8:30 – 9:30 am: Breakfast

*AMEN, in conjunction with Kettering Medical Center & Loma Linda University (dental only), is pleased to offer continuing medical education credits at the 2011 Annual Conference. One credit is being offered for each of the seminars labeled with an asterisk* (CME & Dental CE) enabling a total of 4 CME/CE credits.
Featured Speakers

Who's Counsel?: Phil Mills, MD
Phil Mills, MD is a board certified dermatologist, but his passion for evangelistic work was kindled years before his medical training when, as a 14 year old, he read Ellen White's book, Evangelism. Throughout his time as a clinician, Dr. Mills has always found his greatest joy in soul winning. Dr. Mills will share how, through prayer, biblical study and reading spirit of prophecy, God has led him to set up his new dermatology practice as a center of influence.

Vacation Centers of Influence: Neil Nedley, MD
Graduated from Loma Linda University and completed his residency in Internal Medicine at Kettering Medical Center. He has published, given medical lectures around the world in preventative health and depression. In addition to being a practicing physician, Nedley also serves as president of Weimar Center of Health and Education. On Friday evening, Dr. Nedley will motivate you to think more creativity about how you can turn your next vacation into a medical evangelism opportunity.

Our High Calling: Stephen Bohr
Pastor Bohr was born in Wisconsin but grew up in Venezuela and Colombia where his parents served as missionaries for over thirty years, and where he met his wife, Aurora. His heavy speaking schedule has taken him around the world. With a BA, MA, and MDiv, from Andrews University, his life passion is the study of prophecy and teaching others to seek the hidden gems throughout scripture. This weekend he will describe to us God’s ideal “full stature” physician/dentist living God’s influence in practice. He will challenge us to fulfill our high calling as a center of influence for the days in which we live.

The Office as a Center of Influence for Health, Healing and Hope: Wendell Lawrence, DDS
Dr. Lawrence has been in practice for over 30 years and has a passion for medical ministry. He holds weekly nutrition and bible study classes for his patients and their friends & family. He will share his experience with you highlighting the unexpected benefits and tremendous rewards in medical evangelism through the office.

Every Practice a Life Style Center: Tim Howe
Dr. Howe practices internal medicine in Brunswick, ME where he serves as Medical Director of Wellness and of Diabetes Education at Parkview Adventist Medical Center. His 10 day outpatient programs have helped hundreds to learn and apply biblical health principles. Dr. Howe will review studies revealing how well office based physicians’ educational efforts have actually changed patients behaviors and discuss the role of spirituality in lasting health practice change.

Radical Apostleship: Derek Morris
Dr. Derek J. Morris serves as the Editor of MINISTRY, an international journal for pastors, and an associate in the General Conference Ministerial Association. He is a prolific writer and a well-known presenter worldwide on the Hope Channel. He finds his greatest joy in helping people to experience a life-changing relationship with Jesus Christ.

Reaching the Cities with Centers of Influence: Jeff McAuliffe, DDS
Dr. McAuliffe is a practicing general dentist in Laurys Station, Pennsylvania. He is also a church planter and currently the Assistant to the President for Mission in the Pennsylvania Conference. In that role, he works with church plants and metropolitan ministries development. Dr. McAuliffe will speak about the critical role of centers of influence and how they fit into God’s plan to reach the cities. Together with you, he will look at scriptures and counsels that forecast a “mighty movement” before Jesus comes, as well as how you as medical professionals can actively take the lead.

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Reformers once Again: Des Cummings & Mark Finley
Dr. Des Cummings, Jr. is Executive Vice President at Florida Hospital, one of America’s largest hospitals. Dr. Cummings earned a Ph.D in Leadership and Management with emphasis in Statistical Forecasting from Andrews University. He also has a Master of Divinity degree and is an ordained minister of the Seventh-day Adventist Church. Dr. Cummings has authored or co-authored three books and numerous articles. He speaks to national and international conferences on the future of healthcare, specializing in strategies for whole person care, healthy communities and the hospital of the future.

Pastor Mark Finley serves as assistant to the President for the General Conference of Seventh-day Adventists. He has presented more than 135 evangelistic series around the world. In light of the current resurgence of interest in health in the United States, Pastor Mark Finley and Dr. Des Cummings will present how Seventh-day Adventists can be in the forefront of this health renewal. They will discuss how Adventists can recapture their position as health reformers for the nation.
Lift up Your Eyes!

We all know the story of Jesus and the woman at the well. Afterwards, when His disciples returned, Jesus said to them: “Do you not say there are still four months, and then comes the harvest? Behold I say to you, lift up your eyes, and look at the fields. For they are already white for harvest” (John 4:35).

Jesus is sitting at the well, looking at a field, and He said to the disciples, You guys say that this field is not ready for harvest for four months yet, right? But I say, open your eyes and see what is really out there.

In short, He told them to open their spiritual eyes and see the great need for winning souls.

Thus, for us, physicians, dentists, residents, I ask—are your eyes open to the mission before us? In other words, Lift up your eyes if you’re in the hospital. Lift up your eyes if you are in the classroom. Lift up your eyes if you are in your neighborhood. If you are in the supermarket, lift up your eyes. It may not seem like anything is there, but there is.

With this idea in mind, I want to share some of my own experiences about what it means to open your eyes and see the harvest.

Eyes Wide Open

After finishing my residency, I decided to go back to Tennessee. I arrived at work the first day and the radiologists were there. My first thought was, Lift up your eyes! These men represented the harvest to me. How could I reach them? Slowly but surely I entered into a spiritual discussion with one, whom I will call Dr. C, and we studied and eventually, after a year and a half, he was baptized into the Seventh-day Adventist Church.

So now I’m thinking, “OK, Dr. C is a Seventh-day Adventist. I have a partner. Now we have two here.” And so I continued lifting up my eyes, looking for someone else. I knew there was going to be another person. There is always going to be another person. Because I can’t see them yet, I set “traps.” In my office behind me, on the shelf, I had books like Answers to Difficult Bible Questions. I had The Almost Forgotten Day by Mark Finley. And I simply put reading material around the office.

One day a file tech said to me, “Hey, I hope you don’t mind, but I was working last night and you weren’t in your office, and I got this little book off your shelf there . . . .”

No, I don’t mind at all!
A year later, he was a baptized a Seventh-day Adventist Christian.

The harvest is all around us in unexpected places. I did not expect this particular file tech to be part of the harvest. It would take too long to explain his background – but he was not someone you would expect to become a Seventh-day Adventist. However, once Christ came into his heart, he became a new person, and he started all over again. The past is past. I didn’t see it coming with my eyes. I just knew the harvest was out there. I knew it would happen, and there he is.

So, now I am wondering who is next. After the file tech was baptized as a Seventh-day Adventist Christian, he got into conversations with his file tech colleagues, and the domino effect began. The file tech started a Bible study in the office, and when I held an evangelistic series in my local church, one of the men from the study came, with his whole family!

A Challenge

Last year was a challenging one for my group of Radiologists. Our hospital was bought by a for-profit organization. They asked us, as a radiology group, to do things that we couldn’t do from a professional or moral basis. We all decided to leave, though it was very hard. (I have five children, two in college) I had a partner, whom I call Dr. L, who had long roots in that town and that hospital. In a sense, it was his hospital.

In the previous year or so, Dr. L and I had been talking about spiritual issues. He was raised a Church of God Christian, but he had never tithed. So we had talked about that, along with the Sabbath and other issues he was interested in. Ironically, it was right about the same time we were going through this professional trial that Dr. L decided to start paying tithe. That is, right in the midst of not having a job he decided to start tithing.

Within a week of Dr. L telling me that he was going to start paying tithe, we get a phone call from a hospital that is thirty minutes from our hospital. They were losing their radiologists and needed a radiology group and we all got the job.

Then a medical multi-specialty group called us and said, “Hey, we are buying our own CT scanner, and ultrasound, and setting up an imaging department, and we want you to be our radiologists.”

And then another hospital called us and said, “Hey, we need another radiology group to help us up here.”

So shortly after we left our original hospital, in Cleveland, TN, we acquired our own PET CT imaging center, and, don’t miss this - we are making twice as much money as we made at the other hospital, with twice as much time off. And we’re getting calls every day.

There’s more to this story. I had talked a lot with Dr. L about Daniel and Revelation, and Dr. L told me I ought to write a book. After feeling convicted, I did just that, and though I first thought about sending it to the Review and Herald, I felt impressed to send it to a local publisher in Cleveland, TN. It’s called Pathway Press, which is the Review and Herald equivalent for the Church of God, Dr. L’s church.

Though I didn’t expect it, they printed the book and they decided sell it too. It’s called Understanding Revelation in One Day. It is the Adventist mainstream understanding of Daniel and Revelation. Incredible. Open up your eyes, look around you. Who would have guessed? It’s exciting!

Tourist “Trap”

We also started another ministry. We had finished a five-year stint in developing a new church in Benton, Tennessee. We now wanted to start something new, where no SDA church existed. We finally found a place, called McCaysville, Georgia. No SDA church was within thirty miles of it. Perfect!

The town was a drop-off location for a tourist train called the Blue Ridge Scenic Railway. Every day when the train pulls up in the town, suddenly, this place that is almost a ghost town, becomes packed with
people. They are milling around for two hours with absolutely nothing to do except go into a few little shops.

Therefore we seized the opportunity. We rented a section of the mall that has big glass windows right on the street, and placed a big sign in it that said: “Christian Resources Visitor Center – Welcome!” We filled it with all sorts of literature, books and brochures.

We had a painting by Nathan Greene for one of our eight displays. It’s called The first Sabbath in Eden. No one can walk by that window and not look at that. Underneath each of the paintings and displays, we have professionally made signs telling what they are. In this case it says, “The First Sabbath in Eden, by Nathan Greene.” That’s the first thing they see - a creation picture. And under that we have a professional sign that says, “Thousands of years before there was a Jewish nation, or a Christian Church, God gave mankind a very special gift – the Sabbath.”

God gave mankind a very special gift – the Sabbath.

We’ve been running the visitor’s center for three years. The people who ride that train in Georgia come from all over the world. It’s incredible. You’re sitting in this little town and all of a sudden you see all these people coming towards you. You find out that they are from Norway, from England, from Australia. They are visiting the United States, they took this train ride, and now they are taking these books back home. All of a sudden this little town becomes a distribution center for the world.

Only God could have arranged that! He’s the one that said, “Lift up your eyes!” It’s incredible.

Two Experiences

We had started a little health fair there: blood pressure, cholesterol, etc. We do not go to the visitor’s center every day. We’re just there on the weekend. So, one day a Mr. G. walked in and he said, “Listen, I’ve been coming by here several times. I haven’t caught you here, but I’ve gotten some of this literature – this is the greatest stuff I’ve ever read!”

We had books like The Almost Forgotten Day, and Steps to Christ, and a couple of other books available on the outside of the glass. He had read these. He said, “I want to get some more of these books! I’ve been taking more than my share whenever I come by here and I have been handing them out to people I know in town.”

Next thing we know he wanted more and more books and material to give out, such as tapes by Doug Batchelor from one of his Net series. We gave him Steps to Christ, and Great Controversy. He took them all.

Now, here’s the great part. We knew nothing about him until one day he gave us his card, and it said that Mr. G. was the associate pastor for the largest Baptist church in the area. The associate pastor for this large Baptist church was distributing our literature enthusiastically, without a salary.

Lift up your eyes!

Another one of God’s appointments was a year ago. I was coming out to Loma Linda to see my first grandchild born. My mind was focused only on that but just before leaving I grabbed a couple of my books, just in case. I got on the plane, next to a woman, and because we had problems with the overhead monitors not working, we got into a conversation. She told me that she worked for Delta Airlines. She also struck me as a well-prepared 21st century traveler. In one smooth move she pulled out an I-pod that has a full screen, and got ready to watch something.

It was a sermon by Charles Stanley, a
prominent pastor in Atlanta.

“Hey” I said, “do you know Charles Stanley?”

“What?”

“Do you know Charles Stanley?”

“Yes, I’ve met him. And I go to his church once in a while.”

“Well, I’ve heard him on the radio and on TV and he’s a really good pastor.”

And she said, “Yes, I like him a lot. You know, I just went to his church a few weeks ago, and we were talking about the book of Revelation.”

Remembering that on the way out of my house I had scooped up two of my books, I said, “Are you interested in the book of Revelation?”

“Yes, I really am. I am interested in the book of Revelation, and I am interested in getting back into spiritual things.”

She then told me how, though raised a Baptist, she fell away and recently she was going back to church. She was on her way to meet her sisters. They were going to talk about spiritual things.

“Listen,” I said, “I wrote a book on Revelation. Would you like to read it?”

“You’re kidding! You wrote a book on Revelation?”

“Yes, I’ve got it right here!”

I pulled it out and handed it to her. She said: “This is incredible! I’m going to read this right now.”

She got a highlighter from her briefcase, and started reading, and we had a five hour interaction on the book of Revelation. The book is only 130 pages, she poured straight through it until she reached about page 90 when eventually she put the book down for the first time.

“You know what?” she said. “The monitors not working was not an accident, was it?” Then, as an afterthought, she added, “This day has changed my life!”

“One Last Story

I just built a cabin for my folks to live in near our house. As I was working with the crew on the cabin, I told them: “None of you guys can work on the Sabbath.”

They answered, “What’s the Sabbath?”

When I explained, they agreed. Anyway at one point, as I was working with them, the lead carpenter’s brother, who helped on the job, came up to me and asked, “Do you know Doug Batchelor?”

“I don’t know him,” I said, “but I know who he is.”

“I’ve been watching his program on TV for a long time,” he said. “I heard him say something about the Sabbath.”

I found out later that Larry the carpenter was also the minister of an 80-member church and, to make a long story short,—they are all now keeping the Sabbath!

Meanwhile, as all this transpired, a stonemason on the job said to me, “I used to be a Seventh-day Adventist!”

Where that’s going to end I don’t know. All I know is what Jesus said, “Behold I say to you, lift up your eyes, and look at the fields. For they are already white for harvest.”

“This day has changed my life!”

Lift up your eyes!
The depressed economy, and its' impact on the auto industry, had a devastating effect on Detroit’s metro area. If anything could go wrong, it did. Lost jobs led to foreclosed and abandoned homes. Lost jobs meant lost medical insurance. Many people were left with untreated medical and dental issues and no resources to change that.

My heart was moved with compassion for those struggling and I knew something had to be done. I sensed God’s leading and was impressed that now was the perfect time to launch a health evangelism series. What better way to empower those who were being discouraged by the loss of treatment options?

Many of my patients were enthusiastic about the idea, so we scheduled the meetings, using my office as the venue. The title was “Health, Healing and Hope for These Trying Times.”

We shared the usual health lectures on the NEWSTART program, and added a full blown, old fashioned, Bible-based evangelistic series. There was music every night. A bible worker team consisting of two lay pastors, a nutritionist, and three elders greeted each guest, and followed up with interests during the week. Separate meetings and activities were arranged for the younger ones, and a food service team served a full vegan meal before each meeting.

It took several teams of workers to accomplish all of this. Where there is prayer there is power, so we took this to heart and each of our teams met for prayer during the week, and before the meetings. We knew that we couldn’t do anything of value without help from heaven. Everyone prayed that the Lord would maximize their gifts and open the hearts of those who attended to receive His truth.

We passed out prayer request cards during the meetings and encouraged people to write down their personal, spiritual, and medical needs. We met weekly and prayed over each name and each need. We asked the Holy Spirit to keep them coming, so we could point them to the Great Physician who could meet all of their needs.
FALL 2011

THE MEDICAL EVANGELIST

Week by week we introduced our standing-room-only crowd to new and healthier ways of eating and living. Most importantly, they gave us opportunity to introduce them to a Savior who cares about their every problem. Even though my reception room was crowded, nobody left or complained. The same power that drew the crowds to Jesus was in that room. Our only job was to lift Him up. He blessed us with the privilege of feeding His sheep.

Our team included three AMEN physicians who provided the health focus for the meetings. Dr. Sterling Thompson, who is a physician and a minister, presented during the early part of the meetings; Dr. Don Bovell and Dr. David Fernandez came later and closed out the meetings. The meetings concluded in November, and by God’s grace thirty-three people requested more intense Bible studies and further nutritional and lifestyle classes.

Our challenge now is to nurture and support these people through to a complete spiritual and lifestyle change. Many of these precious souls are still trying to deal with daunting personal challenges caused by the collapse of the local economy. Team members are providing emotional counseling and support. As needed, we go into the homes and take the people to the grocery store, showing them how to purchase ingredients and cook healthy vegan meals. Above all, we pray with them.

We are presently continuing to hold nutrition and Bible classes in my office each week. By the grace of God, many are now following a vegetarian diet and have adopted a complete lifestyle change.

One member of our class had some extreme medical challenges. She came to me one day and expressed her need for spiritual support to assist her in making a complete lifestyle change. The things she learned in the Bible class encouraged her to believe that she could receive the help she needed. Sensing her need for more intense medical intervention and nutritional counseling, I referred her to Weimar Institute.

Before this lady left for Weimar, we had a special season of prayer for her. Laying hands on her, we asked the Holy Spirit to protect her as she travelled, and to give her complete healing.

After 18 days, by the grace of God, our friend was able to come off of all of her medications. She lost weight, and her blood pressure was now completely normal. Let me not fail to mention that her diet is now vegan. She came back to our class a new person, praising the Lord, not only for her physical healing, but most of all, for her spiritual rebirth and regeneration.

An Evangelical minister came in as a new patient a few weeks ago. Because of his numerous medical challenges, he wanted to learn about the NEWSTART program. Now, he comes in each week to study what the Bible has to say about God’s principles of health. He is also learning about the blessings of the Sabbath. We will be starting an 8 week health series in his church in the fall.

God is working on many hearts in the Detroit area. Truth-seekers are finding Him. The members of our Health, Healing and Hope team are passionate about winning souls for God and are privileged to cooperate with Him in working for those He wants to bring into His kingdom.

Team members are providing emotional counseling and support.
REFLECTION 1:
In Romans 1:16, Paul states, “For I am not ashamed of the gospel of Christ; for it is the power of God unto salvation to every one that believeth.”

There exist forces that would persuade us to be ashamed of the gospel of Christ. Professional, academic, and societal expectations all combine to make us feel ashamed of wanting to share Christ through the medical profession. To stand against this tide of pressure while thinking you are the only one doing so is a daunting challenge. Even the prophet Elijah in his despair complained to God that he alone of the faithful was left (I Kings 19:10).

There is something about a support network, of knowing others are engaged in the same struggles as you, that makes it easier to stand up against the pressure. God’s response to Elijah showed there were 7,000 who had not bowed the knee to Baal; there were indeed other faithful people who were standing against the tide. For me, AMEN represents the 7,000 who have not bowed the knee to societal expectations of only delivering humanitarian aid, ignoring the gospel of Christ and the specific message given to the SDA church.

As a sophomore medical student, coming to the 2010 AMEN conference in San Diego was an encouragement, both from the messages heard and the ability to meet with fellow students who also have a desire to share Christ in the workplace. The generosity of AMEN shown by sponsoring medical students was tangible evidence that this organization is willing to invest in young doctors and dentists and to provide us with inspiration to do His work.

I am now a junior medical student, and actually seeing patients in the clinic. Therefore I am dealing with the nitty gritty of taking histories, performing exams, and thinking up potential diagnoses. Daily I am confronted with the importance of Godly role models that demonstrate what an effective, Adventist physician looks like in the workplace. AMEN has an incredible opportunity to provide this type of mentorship, and I look forward to learning from and contributing to this organization.

— Jonathan Martin, Junior Medical Student

REFLECTION 2:
My time spent studying in medical school has been greatly focused on physiology, the disease process, and modern treatment. The volume of information to be learned is enormous! Unfortunately, the reality of the daily grind makes it far too easy to neglect studying about how to do what I came into medicine for—sharing Christ with others. Being a part of AMESA has rounded out my education and helped me focus on using medicine to bring others to the Great Physician. As a group we studied the Ministry of Healing and I saw how offering the simple truths of healthful living to patients can lead them to learn the simple truths about salvation and ultimately be brought to the Great Physician. As a result of being involved with AMESA I will be better equipped to enter into medical ministry and use medicine as a tool for His kingdom.

— David Russell, Senior Medical Student
The Historical Perspective of Health Evangelism in the Adventist Church

(Adapted from the book Health to the People by P. William Dysinger, MD, MPH)

P. William Dysinger, MD, MPH graduated from the College of Medical Evangelists in 1955 and obtained his MPH degree from Harvard University in 1962. Was a co-founder of the School of Public Health at Loma Linda where he carries the title Professor and Associate Dean emeritus in the SPH and Clinical Professor emeritus of Preventive Medicine in the School of Medicine. Is the author of Health to the People (2007) the official history of public health, preventive and lifestyle medicine, and medical evangelism training and outreach at Loma Linda from 1905-2005.

In part one, we looked at the purchase of the Loma Linda property in 1905, and the early challenges the institution faced as it tried to implement Ellen White’s counsels regarding medical missionary training and evangelism.

Ellen White’s vision for evangelistic reform
During the night of February 27, 1910, Ellen White was shown new ways to work the cities. For this mission, she called for “companies (teams) to be organized and diligently trained to labor in our important cities.”

When news of this new approach to medical evangelism reached Loma Linda, John H. N. Tindall was chosen by the faculty to try out the new methodology in a pilot program in nearby San Bernardino where all previous evangelistic efforts had failed. Tindall, a relatively new convert to Adventism, was, at the time, a Bible student at Loma Linda.

John Tindall had grown up in a Methodist home in California, but the doctrine of hell-fire so deeply offended him that he became an atheist. While studying law in San Diego, he detoured to join a gold strike near the Mexican border. There he met one he called “a man of mystery.” That person read to him from the writings of Ellen White, leading Tindall from the “gold field rocks” to the “Rock of Ages.” Shortly after, in 1908, he enrolled as a “Bible and Special student” at the College of Evangelists.

When the call came to Tindall to pioneer this new approach, he faced a struggle. His wife had not yet become an Adventist and they had a young infant. His wife was unhappy about the arrangement because it meant her husband would be totally immersed in the campaign for six weeks.

One of the college teachers, Charles Garnsey, and his wife, Margaret—both nurses—completed this first medical evangelistic team. They pitched their tent next to a building where a prominent ladies’ club met. Overhearing one of the health talks, the president invited Tindall to address her club. Having thus gained access to influential city leaders, he rejoiced when the editor of the newspaper gave the Adventists much advertising space, gratis, through editorials and full-page reports of the meetings.

At the end of this pilot program in San Bernardino, 16 people were baptized, Tindall’s wife included. The results electrified Loma Linda. Suddenly, the cities had become a viable mission field. Thereafter, Tindall became a full-time church employed medical evangelist and did many other campaigns elsewhere.
Tindall’s approach to evangelism

Tindall’s usual plan involved gathering a team of “paid conference workers.” They included the evangelist and his assistant, Bible workers, doctors, nurses, a singing evangelist, and cooks. Then he organized local church members to give Bible studies and simple treatments. They also distributed announcements and ushered at the meetings. Always skilled at public relation and community involvement, Tindall interviewed prominent business firms and asked for contributions, which always came in.

Tindall usually secured the largest and best-equipped auditorium in town; he also rented a smaller hall to accommodate treatments, cooking classes and other training. His usual pattern was to convene three meetings each week, focusing Tuesdays and Thursdays on health and nutrition, ending with doctrine on Sunday.

In Oklahoma City, the audience of 1,700 swelled to more than 2,000 after the Sabbath had been presented. When the popular evangelical preacher Billy Sunday arrived in town, many predicted a greatly decreased attendance. After all, Billy Sunday had the support of major city officials as well as the leading newspapers. Amazingly, the audiences at the Adventist lectures increased. At the last meeting, 500 people stood to indicate their belief in the message presented.

“Billy Sunday got the crowds,” someone remarked, “but Tindall got the converts.”

Gratified by what Tindall had done, the Oklahoma state medical director declared: “If other religious people would do as practical a work [as Tindall], it would be a great help to people everywhere.”

Tindall’s many efforts brought exciting results and allayed much prejudice against Adventists. Conference workers received good training for future work, and church members savored a new, exhilarating sense of service. Financially, his campaigns carried their own weight and stimulated faithful tithe paying. Months later, it was reported that “every new convert had been thoroughly instructed in every doctrine and every reform in physical, mental, and spiritual habits.”
Today, interest in “religion and health” and “faith-based initiatives” is high, but Loma Linda was at least 30 years ahead of the current interest.

Perhaps the most significant results of Tindall’s medical-evangelism approach proved to be the solid long-term establishment of people “in the faith.” Most of Tindall’s public efforts, which always included major training efforts, took six months or more to complete. His Field School of Health Evangelism in San Francisco (1927-31) proved to be the largest evangelistic training effort ever undertaken by a CME medical evangelist.

Church Health Education

Unfortunately, the next phase of the church health education to ministers story is told too quickly. Discussing the attempt to merge health and religion education, J. G. Smoot of Andrews University stated to R. E. Cleveland of LLU: “Sometimes it takes a great deal of effort for an idea to be born.” To that piece of wisdom we must add another truth: “And the maintenance of the idea afterwards is seldom easy.” LRU conscientiously attempted to serve its sponsoring Church from the first day of classes in 1906. Although the ideal of medical evangelism training waxed and waned through the years, the original vision was never lost.

In 1947, the newly organized School of Tropical and Preventive Medicine’s first effort was to teach a six-week course “in health evangelism (that is, medical evangelism) and tropical hygiene to mission appointees, Bible instructors, ministers, and other educators seeking knowledge of basic health principles.” The Adventist Church provided an annual subsidy to the College of Medical Evangelists (CME) to encourage this kind of Church health education.

As dean of the new School of Public Health in 1967 and first chair of its department of Health Education, Dr. Mervyn Harding vigorously supported the church as an important site for health education. Today, interest in “religion and health” and “faith-based initiatives” is high, but Loma Linda was at least 30 years ahead of the current interest.

P. T. Magan in 1938 had dreamed that at Loma Linda a minister “of the right stamp” would be found to help unite medical ministry and the “preaching of the gospel.” In 1969, Wilbur K. Nelson, an ordained minister-missionary with a doctorate in Asian studies and an MPH degree, joined the faculty at Loma Linda. From his studies, Nelson was convinced that ministers as opinion leaders, with minimal guidance from health professionals, could readily adapt to community health education work. In 1970 he helped initiate the first two field schools of health evangelism jointly sponsored by both Andrews and Loma Linda University—one in Savannah, GA and the other in eastern Pennsylvania.

Ministerial training in health evangelism at Loma Linda in the 1970s

At this point, more than 20 ministerial students at the Theological Seminary at
Andrews University formally indicated a desire to take additional study at Loma Linda. Despite little enthusiasm in Michigan, an agreement was finally reached in 1973 for a conjoint degree that combined a master’s degree in public health with an MDiv. This “program in church health education offers the minister opportunity to supplement his [theological] preparation with information and skills essential for the promotion of total health in his church and community,” the academic bulletin proclaimed.

The program continued throughout the decade of the ’70s, with much interest from the theology students, but in 1980, without forewarning, James Crawford, then dean of the SPH at Loma Linda, received a letter from the Provost at Andrews University. It began affirming that the conjoint program had been “helpful to a group of our students.” It ended, however, with the suggestion that the “experiment” be discontinued.

Dean Crawford did not take the news passively. He appealed to Thomas Blincoe, then dean of Andrews University Theological Seminary: “Let’s not give up on this, Tom. Somehow God would have our ministers trained in the basic understanding of health ministry. They constantly deal with human beings—body, mind and spirit. We must find an appropriate way for them to receive more practical training in these lines.”

The sub-specialty of church health education disappeared from the Loma Linda bulletin in 1986, but the influence carries on through the many ministerial graduates from Loma Linda. These include the current president of the General Conference of SDA, Ted N. C. Wilson; the current general VP (and current Chair of the LLU Governing Board) Lowell Cooper; Matthew Bediako, retired Secretary of the GC; and many other leaders such as Philip G. Semaan and G. Edward Reid. Wilson states about his experience: “It has been a very valuable experience to use this training in the pastoral and departmental areas of church work. Health ministry provides multiple opportunities to encourage people to live life to the fullest.”

To be continued . . .
What is good health? The right numbers on a blood test? Stable emotions? A fine EKG?

Of course.

However, at Life+Health Network we believe good health must include a relationship with our loving Creator, who informs and empowers all other aspects of our being.

That’s why the Life+Health Network’s goal is to broadcast life-changing health principles that will impact people for Christ. God has truly blessed us with opportunities to accomplish this goal by allowing us to take a step by faith into new places. Which means we’ve made radical changes, centered on web-based multi-casting; that is, we’re using the Internet and broadband to deliver “television” programs to our viewers.

Studies show that people today are making significant changes in their viewing habits; in fact, an astonishing 70 percent of consumers are streaming, downloading or watching recorded broadcast TV on a weekly basis, and 50 percent are using internet-based on-demand TV/video every week.

Look at some of the new trends:

**USA**
- 39% of TV viewers watch TV online 1
- 335,000 households cancelled their cable subscription in 2010 2
- 22% of people aged between 18 and 34 consider switching from cable to VOD 3*

* Netflix gained 6 million new subscribers in 2010

**World**
- 1 billion people watch online video 5
- By 2014 online video will account for 91% of all Internet traffic 5

With changes like this, we have to stay ahead of the curve. Currently we are utilizing our website as the focal point of our Network operations, where one can watch VOD (video on demand), livestream (where programs play 24/7), and get updated information about the network and make donations. The Roku digital video player is an exciting way to watch our broadcasts on TV at home. If you have an HD large screen set, you can connect with us wirelessly through your home network or via ethernet.

Life+Health Network was the first Adventist ministry on Roku and the only exclusively health related programming on Roku (www.roku.com). The cost of Roku is as low as $59.95, and the majority of programs are free, including Life+Health. Our newest broadcast venue is the TVU Network, which currently broadcasts to 35,000,000 viewers worldwide. They’ve sold over 50,000,000 apps, which means it can be seen on your smartphone, iPad, tablet, laptop and desktop. In other words, just about anywhere in the world, people can view the TVU Network!

Where do we go from here? We’re working on a Life+Health Network Pro channel, which will be optimized for physician/dentist practice waiting rooms and also for hospital cable networks. When we think of the gospel being spread “like the leaves of autumn,” we know that the original context was the printed page but new technology has made outreach possible in ways our pioneers could never have imagined!
Will It Blend?

I had never heard of the BlendTec Company until I saw a viral YouTube, Will It Blend? Perhaps you have seen it, too. In an ingenious advertising campaign, Tom Dickson, CEO of BlendTec takes popular objects such as new iPhones or iPads and asks the question, “Will it blend?” He then places these objects into a blender which grinds them up into tiny bits. It can blend!

But the question “will it blend?” is more than a clever marketing slogan. It is also an important question for our medical and dental practices. Ministry to the body and ministry to the soul, will it blend?

“Those who care for the sick should be prepared to blend spiritual healing with physical healing.” LLM 78.5. The BlendTec blending is destructive. But God’s blending is restorative.

How can we blend spiritual and physical in our practices?

1. Blend by prayer

I received an encouraging call from a physician in the Northwest who has made every effort to blend the spiritual and physical in his practice. Yet he felt something was still lacking. Seeking more direction from God, he began to set aside special time in the morning to pray for his patients and his practice. He started noticing an immediate difference in his spiritual effectiveness—and he was shocked the next Sabbath at church when nearly a half-dozen non-Adventist patients and staff showed up at church. And they have kept coming and are receiving Bible studies at the time of this writing!

Ministry to the body and ministry to the soul, will it blend?

It should blend. “The ministry to the physical and the spiritual are to blend, leading the afflicted ones to trust in the power of the heavenly Physician. Those who, while giving the proper treatments, will also pray for the healing grace of Christ, will inspire faith in the minds of the patients. Their own course will be an inspiration to those who supposed their cases to be hopeless.” MM 248.1.

I have observed first hand how praying before surgery brings peace to the anxious patient.

A few weeks ago I had a patient hesitate when I told him I always offer to pray with my patients before I operate. I have not yet had a patient decline, though I know sooner or later it will happen. I thought this patient would be my first to decline. However, after a pause he indicated it would be acceptable to him for me to proceed with prayer. So I prayed. He said nothing further. I wondered what he really thought and why he seemed reluctant. I wondered if I had offended him. But thought I’d never know.
Then, a few days later, I learned the rest of the story from one of his relatives. The patient had been a self-proclaimed “atheist” and has had nothing to do with God for years. None of his family have been able pray with him. Following our encounter, he went home and told them of this doctor who prayed with him. He has no longer refused to let his family pray with him. Frankly I was amazed by this story, but then I reminded myself of the God we serve who is in the business providing amazing answers to prayer!

I wouldn’t want to do without this blending.

2. Blend with Bible study

The study of the latest medical information and the Bible, will it blend?

“The teachings given in medical lines should be blended with a study of the Bible.” LLM 341.1.

This summer, in Fallbrook, California, ER physician Tim Reisenberger, gave a unique evangelistic series blending science with the Word of God. This series was powerful and showed once again the potential of blending. Years ago when Washington Sanitarium was founded, the medical director Dr. Daniel Kress was advised, “Present the importance of present truth from the physician’s standpoint. The educated physician will find entrance in our cities where other men cannot. Teach the message of health reform. This will have an influence with the people.” CH 546.3.

I have observed many times how blending Bible truths with illustrations from our practice and from medical science keep the interest and attention of an audience. The late Dr. Mervyn Hardinge was a master at this and would attract and hold large crowds when lecturing on health and the Bible.

3. Blending Requires a Daily Conversion

Long before BlendTec, a husband and wife medical team were advised on how to blend the physical and the spiritual in their work. I believe this principle is still true for each one of us today:

“You are both to be led and taught of God. If you individually seek Him daily, you will have the Holy Spirit’s guidance. I can see that you greatly need divine wisdom to enable you to serve in two positions of responsibility, as a skillful physician, and also as a preacher of the gospel. There must be a daily conversion in order to blend successfully the work for body and soul…. I know that you can do an important work in the ministry of the Word, in instructing the souls for whom you labor to believe in Jesus Christ. Encourage the suffering ones to receive treatment from the great Physician, for the healing of both body and soul.” PC 42.4.

There is a disclaimer in the BlendTec YouTube “Will It Blend?” videos. Viewers are warned not to try this at home and not to breathe the fumes. But there are no such disclaimers to God’s blending of the physical and the spiritual, we should try this and the fumes are not dangerous!

The blending of the anointing oil and the perfumes of the sanctuary are an illustration of our blended work. “He also made the holy anointing oil and the fragrant incense, blending it as a perfumer would.” Exodus 37:29 (NJB). This holy blending makes our work fragrant and attractive.

Will it blend? Is it blending in our practices? By God’s grace it will blend.
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