

Religious factors in vitalistic practices of complementary and alternative medicine

Nataliia Ishchuk (ORCID 0000-0003-2291-1238)
Bogomolets National Medical University (Kyiv, Ukraine)

Olena Sadovnycha (ORCID 0000-0001-7031-7538)
Bogomolets National Medical University (Kyiv, Ukraine)

This article examines the vitalistic (holistic) foundation of modern complementary and alternative medicine (CAM). It substantiates that, according to the principles of holistic medicine, health is associated with the harmonization of the elements and forces that constitute human nature on both the physical and spiritual levels of existence. Regarding the religious foundations of CAM practices of Eastern origin, the systems such as yoga, Daoism, and Ayurveda perceive energy as an impersonal force that an individual can accumulate, balance, and influence through physical and spiritual exercises to achieve health, longevity, and personal self-improvement. These systems are vitalistic, as they recognize impersonal energy as the fundamental basis of existence. In contrast, the conceptual foundation of CAM practices of Western origin differs fundamentally from Eastern approaches. These practices are not rooted in Christianity, despite having emerged in countries belonging to Christian civilization. This is because, in Christianity, the source of existence is God-Person, which significantly diminishes the ontological status of impersonal energy. As a result, Western CAM practices have developed an instrumental approach to vitalistic methods, adapting many Eastern techniques to the Western cultural and anthropological context. Additionally, they are based on various personal quasi-scientific systems, such as Mesmer's magnetism, Hahnemann's homeopathy, Palmer's chiropractic methods, and others. To an external observer, these methods may appear impressive. However, whether a physician chooses to incorporate them into their practice depends entirely on their personal experience and convictions.

KEYWORDS

*vitalism,
holism,
life energy,
God-Person,
complementary and
alternative medicine,
CAM practices,
quasi-science*

Introduction

The constant and persistent progress of modern medicine towards evidence-based medicine raises several questions regarding the role of medical practices that do not rely on clear quantitative evidence. On the one hand, their effectiveness has not been definitively proven, yet on the other, it is impossible to completely dismiss certain effects arising from their application. These factors allow us to identify them as quasi-scientific practices or, more precisely, as alternative medical practices.

These practices encompass a broad range of phenomena that are utilized to varying degrees in the treatment of specific pathological conditions. Notably, some of these practices have been recognized by modern psychology, including exposure therapy and desensitization, which have demonstrated effectiveness in treating phobias and post-traumatic stress disorder (PTSD).

This highlights the relevance of studying the role of alternative medicine in post-war Ukraine, where it may contribute to psychological resilience, alleviate physical and emotional suffering, and promote well-being in communities affected by this barbaric war. The integration of tradi-

tional healing methods with modern healthcare approaches can help address war-related trauma, bridge gaps in mental health services, and foster the reconstruction of a healthier and more resilient society.

Literature review and Research methods

Scholarly discussions on the religious underpinnings of vitalism explore its connection to spiritual traditions and metaphysical concepts of life force. Authors such as Hans Driesch and Henri Bergson advocated for vitalism, emphasizing the philosophical necessity of a non-material life principle. Paul Tillich also acknowledged the theological dimensions of life energy within Christian existentialism. In contrast, critics like Rudolf Virchow and George Sarton dismissed vitalist theories as pseudoscientific, dismissing them as superstition and charlatanism. This polarity reflects a longstanding tension between empirical science and metaphysical explanations of health and healing, which continues to shape contemporary debates on alternative medicine.

Modern approaches to vitalism and integrative models of being have been developed by Ken Wilber and David



Bohm. An American philosopher known for his integral theory, Wilber emphasizes a holistic approach to understanding consciousness and reality. His work integrates insights from psychology, philosophy, and spirituality, proposing a comprehensive framework that encompasses various dimensions of human experience (Wilber, 2005). David Bohm, a theoretical physicist and philosopher, introduced the concept of “wholeness and the implicate order,” suggesting that the universe is an undivided whole. His ideas have influenced holistic thinking in both science and philosophy, challenging fragmented approaches to understanding reality (Bohm, 1980; Bohm, & Hiley, 1993).

Religious aspects of vitalism are explored in Goodrick-Clarke's *The Western Esoteric Traditions: A Historical Introduction*, which systematically examines the influence of vitalism on Western esoteric traditions and practices, analyzing how vitalistic ideas penetrated various esoteric teachings (Goodrick-Clarke, 2008). Smith's *Prana: The Secret of Yogic Healing* analyzes the role of prana as a life force in Ayurvedic medicine, discussing methods of using prana for healing and maintaining health, as well as its connection to spiritual practices (Smith, 1996). Liu and Stalling's *Ancient Chinese Qi Medicine: The Secrets for Holistic Health, Well-Being and Modern Life* examines the concept of “qi” as life energy in traditional Chinese medicine, drawing parallels with other vitalistic traditions such as prana in Ayurveda and analyzing its significance for health (Liu, & Stalling, 2024).

A suitable methodological framework for examining the vitalist origins of alternative and complementary medicine comprises cultural-historical, comparative, integrative, and phenomenological approaches. The cultural-historical approach provides a retrospective view of the evolution of vitalist concepts in medicine, tracing their roots in religious, philosophical, and natural-scientific teachings. The comparative and integrative approaches aid in identifying both the distinctions and the dynamic interplay of vitalist ideas within scientific and non-scientific knowledge and practice. The application of phenomenological methods is particularly important for capturing the subjective, empirical perception of these practices by patients, therapists, and other stakeholders.

Results and Discussion

In English-language scientific literature, researchers employ the concept of “Complementary and Alternative Medicine” (CAM) to categorize these medical practices. The term “complementary” is understood in the discourse of adjunctive treatment, meaning it is intended to supplement conventional medical treatment, while “alternative” is viewed within the discourse of non-inclusion in clinical treatment protocols. With a few exceptions¹ there is a consensus among most researchers in this field regarding the necessity of respectful collaboration between traditional, complementary, and biomedical practices (von Schoen-Angere et al., 2023).

Both the list of such practices and the criteria by which particular health-improving methodologies are classified as CAM remain unsettled. Notably, the National Center for Complementary and Alternative Medicine (NCCAM), headquartered in the United States as a subdivision of the National Institutes of Health, classifies CAM practices into

four groups while recognizing potential intersections between them. These groups include **holistic medical systems, mind-body therapies, biological-based practices, manipulative and body-based practices** (National Center for Complementary and Integrative Health, N.d.).

One of the key criteria for the classification of these health-improving methodologies is their vitalistic (holistic) component. All of these practices are based on a belief in a special life energy present in the organism, as well as in objects and phenomena that are not considered living in the conventional sense. As a philosophical and scientific concept, vitalism asserts that living organisms are fundamentally different from inanimate objects due to the presence of a “life force” (Latin: *vis vitalis*) that governs life processes. Vital processes cannot be fully explained by physical and chemical laws alone, as living beings possess unique properties that cannot be reduced to those of inanimate matter (*Encyclopaedia Britannica, n.d.*). The core tenets of vitalism (holism) include purposiveness, indivisibility, non-mechanistic development, and systemic behavior. This implies conclusions about the rationality, integrity, and interconnectedness of all processes and phenomena in the world. Vitalism presupposes various ontologies, including immaterial causes, special combinations of matter, or even mental forces (*Stanford Encyclopedia of Philosophy, n.d.*). In summary, vitalism represents a heterogeneous philosophical stance united by skepticism toward a mechanistic view of life.

The doctrine of a vital force, inaccessible to simple mechanical influence, underlies vitalist theories, which have dual roots in both philosophical and religious systems. The origins of the European philosophical tradition of vitalism are linked to Plato, who substantiated the existence of an immortal soul (Greek: *ψυχή*) in living beings, and Aristotle, with his doctrine of the entelechy (Greek: *ἐντελέχεια*) of the body, which emphasized the inseparable unity of body and soul. The Aristotelian worldview, also shared by Claudius Galen and Theophrastus Paracelsus, dominated Europe until the 16th century. In the 16th and 17th centuries, René Descartes introduced a dualistic and mechanistic approach to consciousness (soul) and body, which was incompatible with classical vitalism. Meanwhile, the German physician Georg Ernst Stahl developed the theory of animism, according to which the soul controls physiological processes in the body. During the 17th and 18th centuries, vitalist theories gained popularity among scientists such as Francis Glisson and Caspar Friedrich Wolff, who proposed the existence of a “formative force” (*vis essentialis*) governing the development of organisms.

Thanks to the efforts of representatives of the “philosophy of life” – Friedrich Nietzsche, Wilhelm Dilthey, Georg Simmel, and Henri Bergson – the 19th century became the era of vitalism's triumph. Proponents of the “philosophy of life” criticized mechanistic and reductionist approaches to life, proposing concepts of the life force, the will to power, and other similar ideas. Vitalist themes were also observed in certain schools of physiology in the 19th and early 20th centuries, when scientists reiterated that life could not exist without a life force, entelechy, or “soul atoms.” For example, Louis Pasteur defended this view, considering fermentation not only a metabolic but also a “vital process” Johann Reinke

¹ The perception of these practices as quackery, in particular, was characteristic of the official Soviet medicine, which consid-

ered them atavisms, negative consequences of religious beliefs and folk superstitions. Decisive criticism of these practices is also characteristic of such modern scientists.

and Hans Driesch, attributed to entelechy characteristics of timelessness, spacelessness, and unknowability.

Nevertheless, by the 19th century, an opposing perspective, which firmly denied the existence of the soul or vital energy, was gaining momentum – specifically, the vulgar materialist tradition of understanding human life. The experimental foundation for this tradition was laid by Friedrich Weller, who in 1828 successfully synthesized organic compounds, such as urea, from inorganic substances, demonstrating the possibility of generating organic matter without the involvement of a “life force.” With the development of biochemistry and molecular biology, vitalism has become an obsolete explanatory concept and has been pushed to the margins of natural sciences.

One of the founders of naturopathy, H. Lindlahr, effectively elucidated the essence of the vitalist approach in medicine. He associated health with the normal and harmonious vibrations of the elements and forces that constitute human existence on physical, mental, moral, and spiritual levels. From this perspective, healing is understood as a process of self-organization in living systems, and the role of the naturopathic physician is to facilitate and enhance this process by removing obstacles to health (*Coulter et al., 2019*). Whereas conventional medicine asserts that a physician's duty is to treat the patient, CAM promotes the concept of self-healing, where the physician merely guides the individual on their journey from illness to health. This principle is reflected in the core tenets of the American Association of Naturopathic Physicians, which include recognition of the healing power of nature (*Vis Medicatrix Naturae*), a holistic approach to the individual (*Tolle Totum*), the principle of non-maleficence (*Primum non Nocere*), treating the root cause rather than symptoms (*Tolle Causam*), the prioritization of prevention and health promotion (*Preventir*), and the physician's role as a teacher (*Docere*) (*Lipman, 1967*).

The philosophical and religious origins of complementary and alternative medicine (CAM) are particularly evident in the vitalist practices of the East. Examples include Qigong, a component of traditional Chinese medicine that integrates movement, meditation, and controlled breathing to regulate the flow of blood and Qi; Reiki, a therapy in which a practitioner seeks to transfer universal energy to a patient either remotely or through the laying on of hands, aiming to heal the spirit and, consequently, the body; and Therapeutic Touch, a method in which a practitioner moves their hands over a patient's body to detect energy imbalances and restore health using their own healing energy. Similarly, acupuncture is believed to remove blockages in the body's life-energy flow, while Feng Shui seeks to balance and optimize vital energies in the surrounding environment through architecture and interior design.

For example, yoga, as one of the ancient Indian systems of self-regulation, combines physical, breathing, and mental practices to achieve harmony between body and mind. One of the key aspects of yoga is working with energy centers (chakras) and channels (nadis), which has a potential therapeutic effect in modern medicine. According to yogic philosophy, the human body is permeated by an energy network. The main energy centers – chakras – are responsible for various physiological and psycho-emotional functions. For instance, the heart chakra (Anahata) is associated with emotional balance, while the solar plexus (Manipura) is linked to the digestive system. The practices such as pranayama (breathing techniques) help regulate the flow of prana (life energy) through the nadis

(channels). This contributes to stress reduction, normalization of heart rate, and improved metabolism.

Vitalist motifs are particularly evident in Kundalini Yoga. This type of yoga focuses on awakening the Kundalini energy, which, according to the tradition, “sleeps” at the base of the spine. Through a combination of dynamic asanas, intensive pranayama, mantras, and meditations, this energy rises through the central energy channel (sushumna-nadi), activating and harmonizing all chakras. (*Frager, Fadiman, 2012:125*). Certain modern scientific studies confirm the effectiveness of yogic practices in treating chronic pain, anxiety disorders, and cardiovascular diseases. These studies highlight that meditation and asanas reduce cortisol levels – the stress hormone – while regular yoga practice improves heart rate variability, which is a marker of heart health. Yoga is also used in oncology as an adjunct rehabilitation method. Mindfulness practices help alleviate symptoms of depression, improve sleep quality, and reduce chronic fatigue in patients.

Another ancient Indian healing system, Ayurveda, considers health as a state of balance between the three doshas – fundamental energy forces that regulate biological processes. Similar to yoga, the goal of this system is harmonization of prana – the vital energy responsible for breathing, circulation, and nerve impulses.

A major contribution of Ayurveda is its holistic teaching on the balance of substances in the body. It identifies doshas as types of substances present in both the body and mind. These include Vata, Pitta, and Kapha. Vata combines ether and air and regulates movement, breathing, and the nervous system. An imbalance in Vata can lead to anxiety, insomnia, and joint pain. Pitta, representing a combination of fire and water, is responsible for metabolism, digestion, and body temperature. Excess Pitta can cause inflammation, ulcers, or aggression. Kapha, a blend of water and earth, ensures stability, hydration, and immunity. An imbalance in Kapha often leads to stagnation, excess weight, or depression. Consequently, Ayurvedic healing aims to restore dosha balance through diet, herbs, yoga, meditation, and cleansing procedures (*Panchakarma*).

A similar principle underlies the ancient Chinese philosophical-religious system of Daoism, which views health as a harmony between internal energy (Qi) and natural cycles. Daoist medicine formed the basis of traditional Chinese medicine and includes energy practices aimed at restoring and balancing the flow of Qi in the body. According to Daoist teachings, Qi is the life energy that circulates through the body's meridians (energy channels). When Qi flows freely, a person remains healthy, whereas blockages or stagnation of energy can lead to illnesses.

Chinese healing techniques such as Qigong, Tai Chi, and meditation aim to clear the channels and enhance Qi flow. Qigong is an ancient Chinese practice that combines slow movements, controlled breathing, and focused attention to regulate the flow of life energy (Qi) within the body. The foundation of Qigong is the idea that a harmonious Qi flow through the meridians supports health, whereas imbalances can lead to diseases. Qigong works with three main energy centers (Dantian): the abdomen—an accumulator of life energy; the heart – a center of emotions and blood Qi; and the forehead – a center of consciousness and spiritual energy. Qigong practices focus on clearing meridians, dissolving energy blocks, and enhancing Qi circulation.

In Eastern medicine, energy is seen as a subtle substance circulating through the body, with its balance considered the foundation of health. In contrast, Western alternative medicine describes energy as an invisible force that can be “transferred” or harmonized to improve well-being, often understood in a more intuitive or metaphorical sense. Vitalism in Western alternative medicine has its own distinct characteristics. Some variations of this approach postulate the existence of an energy or substance that cannot be detected by physical means, but can be manipulated through physical methods, including pills, dietary supplements, and touch therapies. Compared to its Eastern counterpart, Western vitalism places less emphasis on the philosophical and mystical aspects, focusing instead on external manipulations, making it more functionally oriented.

In terms of religious foundations of Western CAM practices, the situation here is fundamentally different. In Christianity, God is a Person (The Trinity: One God in three persons) which shifts the focus in the understanding of life energy. It is not self-sufficient, and its role in healing is considered derivative of Divine Grace. Human ability to manipulate energy is limited—one cannot accumulate or redistribute it as is believed in Eastern traditions.

Of course, Christianity does contain some theological reflections on the issue of energy. For example, in Eastern Christianity, the doctrine of energy is relatively clearly outlined by the 14th-century theologian-mystic Gregory Palamas. In his work *The Triads: In Defense of Those Who Practice Sacred Quietude*, he wrote about God as a unity of Essence and Energy, dividing the latter into uncreated and created. He understood uncreated energy as the eternal Divine energy that proceeds from God, but is not His essence, while created energy referred to the temporary, limited energy created by God, including human activity, physical forces, and thought processes (*Meyendorff, 2010:48*). This perspective led to his doctrine of the possibility of theosis (deification) in one’s lifetime, which mystical Christian movements later sought to achieve.

For example, in Orthodoxy, the Hesychasts developed a nine-phase path toward theosis, each corresponding to a series of essential transformations in human personality. Each stage was accompanied by specific ascetic practices aimed at harmonizing the energies of the soul and body. The ultimate goal was to achieve mystical ecstasy – a direct experience of God’s energy (*Ishchuk, 2012: 41-42*). In some ways, the Hesychasts mirrored principles of working with energy found in Eastern religions and spiritual practices. However, their groups (like other mystical movements in Christianity) remained small, and their experience of energy harmonization never became widely accepted among believers.

Notable European vitalist practices include magnetism, dietary supplements, homeopathy, and various touch-based therapies (*National Center for Complementary and Integrative Health, n.d.*).

Magnetism, or magnetic therapy, dates back to the 1770s when Franz Mesmer proposed his theory of animal magnetism. He described it as an invisible magnetic fluid (energy) flowing through the human body, asserting that blockages in this flow could cause emotional distress and illness. Mesmer believed that these energy blockages could be resolved through special ceremonies involving magnetized rods. Although this concept was later discredited, its cyclical resurgence is remarkable. At the turn of the

20th and 21st centuries, magnetic bracelets, shoes, mattresses, and other energy-infused items gained popularity, being marketed as cures for various ailments, particularly those related to the cardiovascular and musculoskeletal systems.

However, it is important to distinguish between pseudoscientific claims and scientifically validated practices. In modern medical diagnostics, magnetic resonance imaging (MRI) is widely used to examine internal organs and tissues through nuclear magnetic resonance. Furthermore, one form of magnetic therapy has been proven effective for treating depression: repetitive transcranial magnetic stimulation (rTMS) (*Smith, 2009: 466*). This technique involves applying strong, short magnetic pulses to specific areas of the brain for several minutes a day over several weeks, helping patients overcome depressive states.

The traditions of dietary **supplements and homeopathy** are also based on the inherently holistic ancient Greek humoral theory, which posits that all diseases arise due to an imbalance among the four fundamental bodily fluids (blood, phlegm, black bile, and yellow bile). These bodily substances were believed to be balanced by counteracting symptoms with their “opposites.” For instance, high fever was treated through bloodletting. Homeopathy emerged as an opposition to this barbaric approach. Instead, the German physician Samuel Hahnemann proposed influencing symptoms with “similar” substances using homeopathy. His “law of infinitesimal doses” asserted that the more a medicine is diluted, the more effective it becomes. For example, treating arsenic poisoning involved diluting a tiny amount of arsenic one hundred times until no trace of the poison remained in the solution, which was then administered to the patient. According to homeopathy proponents, the solution retained a “trace” or “memory” of the poison, which was believed to have a healing effect. Conceptually, this is the same mysterious energy thought to heal the individual.

Approaches related to touch. A significant number of Western energetic practices involve touch. Among the most well-known are chiropractic, reflexology, Reiki, and therapeutic touch. Chiropractic, or manual therapy, was first declared a healing method in 1895 by Daniel David Palmer. This approach aims to improve health through manual manipulation of the spine and joints. Its mechanism of action is based on the assumption that such manipulation eliminates nerve compression, which is believed to obstruct the transmission of nerve impulses and internal energy flows (*National Center for Complementary and Integrative Health, n.d.*). Hence, the fundamental method for preventing and treating these issues is spinal massage, known as manual therapy. Currently, a small fraction of manual therapists emphasizes the vitalist origins of chiropractic, combining it with massage, acupuncture, acupressure, physical exercises, proper nutrition, and other practices. This integration enhances effects such as muscle relaxation, toning, and psychological benefits. While manual therapists continue to claim that subluxations are a cause of illness, these assertions lack objective evidence and remain experimentally unverified.

Another well-known touch-based healing method rooted in vitalist principles is **reflexology**, which is based on massage techniques purported to harmonize the flow of life energy. Unlike chiropractic, reflexology focuses on the hands and feet. This method was introduced in 1930 by J. Ingham, who developed the idea that each organ and body part correspond to a specific point (or area) on the soles of

the feet or the palms of the hands. For example, the brain is represented by the tip of the big toe, the anus by the lower part of the right foot, and the shoulders by an area just behind the little toe. Reflexologists believe these correlations create diagnostic and therapeutic possibilities. Treatment involves stimulating blood flow, nutrient supply, nerve impulses, and, most importantly, life energy to the affected organ or body part – an approach that remains highly questionable from the perspective of evidence-based medicine.

A similar situation exists with the *practice of therapeutic touch*, as proposed in the Reiki system. As with the previous examples, hands serve as the healer's tool. However, the distinction lies in the gentleness of the technique: therapeutic effects are supposedly achieved by simply placing the healer's hands on the patient. Reiki emerged and evolved throughout the 20th century. This technique was developed by the Japanese businessman Mikao Usui, while the specific sequence of healing touches was proposed by the nurse Dolores Krieger. This sequence consists of 12 specialized hand positions that are either placed on or held above affected areas of the body to open a channel for the infinite flow of healing energy (Qi) from the universe into the patient's body (Smith, 2009: 469). Through these movements, the practitioner is believed to restore the patient's energy field, enabling self-healing and regeneration.

Thus, most methods of European vitalist (energetic) medicine are rooted in religious, mystical, and philosophical teachings not only from European traditions but also from Eastern cultures such as Japanese, Chinese, and Indian. European vitalist medicine has assimilated a substantial portion of Eastern techniques, adapting them to the Western cultural and anthropological context. These methodologies appear highly impressive to an external observer. However, from the standpoint of evidence-based medicine, their effectiveness often fails experimental validation and is primarily linked to the placebo effect.

Conclusions

Thus, both Eastern and Western CAM practices consider energy an important factor in health, and their holistic approach integrates work with the body, mind, and spirit. Regarding the religious foundation of Eastern Complementary and Alternative Medicine practices, systems such as Yoga, Daoism, Ayurveda consider energy to be an impersonal force that individuals can accumulate, balance, and influence through physical and spiritual exercises to achieve health, longevity, and personal self-improvement. These systems are vitalistic because they recognize energy as the fundamental basis of existence.

In contrast, the conceptual foundation of Western CAM practices is fundamentally different. These practices cannot be rooted in Christianity, even though they originate from countries within Christian civilization. This is because, in Christianity, the source of existence is God-Person, which diminishes the significance of energy. With some exceptions, Christianity lacks a holistic view of energy, and human control over it is limited. As a result, Western CAM practices have developed a more instrumental approach to vitalistic methods, including those borrowed from Eastern medicine. Furthermore, they rely on quasi-scientific systems developed by specific individuals, such as Mesmer's magnetism, Hahnemann's homeopathy, and Palmer's chiropractic methods, and others.

Although scientific methods cannot directly measure life energy, *entelechy*, *prana*, *Qi*, etc., they have been recognized as beneficial in some cases and are used in therapeutic interventions on the human body. Despite numerous scientific experiments confirming their health benefits, some positive outcomes may be attributed to the placebo effect, activation of the parasympathetic nervous system, or subtle neurobiological adjustments. Nevertheless, CAM medicine offers a promising synthesis of religious, philosophical, and scientific knowledge, paving the way for so-called integrative medicine.

It is also important to note that vitalism aligns with the contemporary scientific concept of "organismic" understanding of nature, which extends to all subsystems of the natural organism—organism, species, biocenosis, biogeocenosis, their forms, and levels (stages) of organization. In modern scientific thought, nature is seen not as a conglomerate of isolated objects, but as a holistic living organism whose changes occur within certain limits. A disruption of these limits leads to systemic changes and, under certain conditions, can destroy the system. Thus, there are grounds to believe that vitalism (holism) in a transformed form can be integrated not only into the worldview of contemporary individuals, but also into scientific knowledge.

REFERENCES

- Bohm, D. (1980). *Wholeness and the implicate order*. London, Routledge and Kegan Paul.
- Bohm, D., & Hiley, B. (1993). *The undivided universe: An ontological interpretation of quantum mechanics*. London, Routledge.
- Coulter, I., Snider, P., & Neil, A. (2019). Vitalism – A worldview revisited: A critique of vitalism and its implications for integrative medicine. *National Center for Biotechnology Information*. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7217401/>
- Encyclopaedia Britannica. (n.d.). *Vitalism*. <https://www.britannica.com/topic/vitalism>
- Ishchuk, N. (2012). Sotsialni motyvy isykhazmu. *Visnyk Natsionalnoho aviatsiinoho universytetu. Filosofiia. Kultura*, 40–44.
- Frager, R., & Fadiman, J. (2012). *Personality and personal growth* (7th ed.). Pearson.
- Lipman, T. (1967). *The response to Liebig's vitalism*. <https://philpapers.org/rec/LIPVAR/>
- Liu, Z., & Stalling, B. (2024). *Ancient Chinese Qi medicine: The secrets for holistic health, well-being and modern life*.
- Meyendorff, J. (2010). *A study of Gregory Palamas*. St. Vladimir's Seminary Press.
- National Center for Complementary and Integrative Health. (n.d.). *Home page*. <https://www.nccih.nih.gov/>
- Smith, J. C. (2009). *Pseudoscience and extraordinary claims of the paranormal: A critical thinker's toolkit*. Wiley-Blackwell.
- Smith, V. A. (1996). *Prana: The secret of yogic healing*. Vedic Books.
- Stanford Encyclopedia of Philosophy. (n.d.). *Life*. <https://plato.stanford.edu>
- Tido von Schoen-Angerer, R. K. Manchanda, I. Lloyd, J. Wardle, J. Szöke, I. Benevides, N. S. A. Martinez, F. Tolo, T. Nicolai, C. Skaling-Klopstock, T. Parker, D. L. Suswardany, R. van Haselen, & J. Liu. (2023). Traditional, complementary and integrative healthcare: Global stakeholder perspective on WHO's current and future strategy. *BMJ Global Health*, 8, e013150. <https://doi.org/10.1136/bmjgh-2023-013150>

Wilber, K. (2005). Introduction to integral theory and practice: IOS basic and the AQAL map. *AQAL Journal*, 1(1).

Goodrick-Clarke, N. (2008). *The Western esoteric traditions: A historical introduction*. Oxford University Press.

Релігійні чинники віталістичних практик комплементарної й альтернативної медицини

Наталія Іщук (ORCID 0000-0003-2291-1238)

Національний медичний університет ім. О.О. Богомольця (Київ, Україна)

Олена Садовнича (ORCID 0000-0001-7031-7538)

Національний медичний університет ім. О.О. Богомольця (Київ, Україна)

У статті досліджено віталістичну (холістичну) основу сучасної альтернативної й комплементарної медицини (СМ). Обґрунтовано, що відповідно до принципів холістичної медицини здоров'я пов'язане з гармонізацією елементів і сил, що утворюють людську природу на фізичному і духовному планах існування. При розкритті релігійних основ СМ-практик східного походження показано, що такі системи, як йога, даосизм, аюрведа тощо вважають енергію безособовою силою, яку індивід може накопичувати, балансувати та впливати на неї через фізичні та духовні вправи для досягнення здоров'я, довголіття і особистісного самовдосконалення. Ці системи є віталістичними, оскільки визнають імперсональну енергію фундаментальною основою буття. Натомість концептуальна основа СМ-практик західного походження принципово відрізняється від східних. Ці практики не вкорінені у християнстві, хоча й виникли у країнах, що належать християнській цивілізації. Це сталося тому, що в християнстві джерелом буття є Бог-Особа, що значно зменшує онтологічний статус імперсональної енергії. Як результат, західні СМ-практики розвинули інструментальний підхід до віталістичних методів, адаптуючи значну частину східних технік до західного культурно-антропологічного контексту. Крім того, вони спираються на окремі персональні квазінаукові системи, такі як магнетизм Месмера, гомеопатія Ганемана, методи хіропрактики Палмера та інші. Для зовнішнього спостерігача ці методи можуть здаватися вражаючими. Проте, чи вирішить лікар використовувати їх у своїй діяльності, повністю залежить від його особистого досвіду та переконань.

Ключові слова: віталізм, холізм, життєва енергія, Бог-Особа, альтернативна і комплементарна медицина, СМ-практики, квазінаука.

Received (Надійшла до редакції): 08.01.2025,

Accepted (Прийнята до друку): 01.03.2025

Available online (Опубліковано онлайн) 30.03.2025