

Dispelling Dr. John MacArthur's Mental Illness Myth

 pamweb.org/critiques-of-the-biblical-counseling-movement/dispelling-dr-john-macarthur-mental-illness-myth

Martin and Deidre Bobgan

October 29, 2024

Before critiquing Dr. John MacArthur's article titled "Dispelling Myths About Mental Illness,"[1] we set forth our reason and even obligation to do so. Dr. Jay Adams aptly describes the need for pointing out error in the following statement:

Any Christian who sets himself up as a teacher in the church of Christ and publicly teaches anything thereby opens himself up for criticism by others (cf. James 3:1). If they think what he is teaching is harmful to the church, they have an obligation to point it out just as widely as it was taught. Such public warning or debate on a topic should not be considered a personal attack at all.... What a critic of a public teaching does in pointing out his disagreement with that teaching has nothing to do with personal affronts or lack of reconciliation; he is simply disagreeing at the same public level as that on which the teaching was given in the first place.[2]

A myth is usually "a widely held but false belief." In his article "Dispelling Myths about Mental Illness," MacArthur himself holds to a major myth, which will have a catastrophic effect on all of his ideas as he blatantly transmogrifies medical problems into moral/spiritual problems. MacArthur says, "We differentiate between physiological brain diseases, which have clear biological markers, and subjective 'mental disorders,' which lack objective diagnostic criteria." The fatal flaw in MacArthur's mental illness myth is dispelled by the truth that: **NOT ALL "PHYSIOLOGICAL BRAIN DISEASES" HAVE "CLEAR BIOLOGICAL MARKERS"!** MacArthur's entire article, with its 29 footnotes and over 20 references on his "Bibliography" list, is a house of cards that rests upon his mistaken assumption that if there is no identifiable "biological marker" found by whatever means attempted, the problem is spiritual.

MacArthur fails to realize the serious flaws of his mental disorders conclusions for "biblical" counselors. Moreover, one of his worst failures is his dreadful neglect to issue a needed warning at the very beginning of his article. Even though MacArthur does not directly advise people to discontinue their psych meds, the **implication to stop taking psych meds is seen throughout his article** as he describes cases in which drugs had negative effects and even drastic results. Any article that is critical of the use of psychotropic medications should responsibly preface the article with a bold warning about the dangers of discontinuing the medication. We have known of cases in which individuals independently and suddenly stopped taking a psychotropic drug and suffered dire consequences even to the point of suicide!

Psychotropic Medications

At the beginning of our book *Christian Response to Mental Illness*, we say the following, which is an example for MacArthur to follow:

We want to make it clear that we do not recommend that individuals get on or off psychotropic medications. We generally do not write about psychotropic medications, but we do say that such medications are grossly over prescribed and greatly over used. Through the collaboration of psychiatrists and pharmaceutical companies, psychotropic drugs have been unnecessarily foisted upon millions of naïve individuals. Mental disorder labels are often recklessly and fecklessly applied by doctors to people who are undeserving of them. Moreover, based upon recommendations from friends and pharmaceutical advertising, consumers request such psychotropic medications from their doctors, and doctors who are on tight timelines too readily prescribe them. There are many skeletons in the psychiatric closet of the past and too many questionable practices of today, including sometimes clandestine relationships between psychiatry and the pharmaceutical industry. **Nevertheless, all decisions regarding whether to take or stop psychotropic medications should be made only under the supervision of a medical doctor.**

Physiological Brain Diseases

MacArthur's view of "clear biological markers" is the lynchpin for his house-of-cards theory about what constitutes "physiological brain disease" in contrast to "nonmedical problems." The mental illness lynchpin is pulled by a scientific exposé of its fallacious foundation and correspondingly his house of cards, which is built around it, comes tumbling down. **MacArthur's article is predicated on no "PHYSIOLOGICAL BRAIN DISEASE" being found through a complete physical exam or any other means.** Worse yet, his article serves as a model for all biblical counselors to read and follow after their counselees have had a complete medical exam or any other means that reveals no bodily illness related to the resulting mental symptoms. A dreadful aspect of MacArthur's fallen house-of-cards mental-illness idea is what is communicated to biblical counselors and pastors who will follow his lead because he is a well-known, respected, and popular leader among Evangelicals. We accuse MacArthur of coming to **an irresponsible conclusion.**

In Chapter 1 of *Counseling the Hard Cases*,^[3] Dr. Heath Lambert favorably quotes Jay Adams, who says:

Organic malfunctions [physiological brain diseases] affecting the brain that are caused by brain damage, tumors, gene inheritance, glandular or chemical disorders, validly may be termed mental illnesses. But at the same time a vast number of other human problems have been classified as mental illnesses for which there is no evidence that they have been engendered by disease or illness at all.... [The problem with the "mentally ill"] is autogenic; it is in themselves.... **Apart from any organically generated difficulties, the "mentally ill" are really people with unsolved personal problems.** (First ellipsis and brackets Lambert's, second ellipsis and bold ours.) ^[4]

MacArthur would agree with what Lambert says later: **“Biblical counselors believe that Christians possess everything necessary to help people with their nonmedical problems (2 Pet 1:3-4)”** (p. 13, bold added).[5] However, a person cannot always know whether a mental, emotional, or behavioral symptom is caused by a medical problem.

The statements by Adams, MacArthur, and Lambert, and similar ones by others imply that one can determine whether a person has a “physiological brain disease” or “nonmedical problems” and thereby lead many biblical counselors to conclude that all one needs to do is to recommend that a counselee have “a complete physical exam” to supposedly rule out a “physiological brain disease.”

Serious errors result from this type of reasoning. **First is the mistaken idea that one can know whether or not mental disorders that are not clearly “physiological brain diseases” are actually “nonmedical problems.”** One of the most difficult issues to deal with in counseling is the cause and treatment of mental disorders. There are numerous varieties of such disorders mentioned in MacArthur’s article. The big question is whether such “cases” are “physiological brain diseases” or “nonmedical problems.” **The sum and substance of MacArthur’s assumption is: Unless there are proven biological diseases that can account for the usual symptoms of mental disorders, the root causes and cures are spiritual and can be resolved biblically.** Lambert, a leader in the biblical counseling movement declares the same error succinctly: **“Receiving a full medical work-up allows us to rule out organic issues.”**[6]

Since one cannot always know whether or not there is a “physiological brain disease,” one should not conclude, as MacArthur does, that the mental disorders are spiritually driven, thereby only needing biblical remedies. We quickly add that those with life issues, whether a “physiological brain disease” or not, should also be ministered to biblically as the occasion arises.

Biologically Driven Mental Disorders without Physical Proof?

The *Diagnostic and Statistical Manual of Mental Disorders (DSM-5)* lists almost 300 mental disorders, most of which are based upon subjective reports by the clients because there are no obvious or clear organic, physical origins to support the diagnoses. Without clear biological proof, MacArthur assumes that they are spiritual problems that must be treated with the methods of the biblical counseling movement.

The University of California *Berkeley Wellness Letter* reports:

Mental illness is both extremely common—one in five Americans will experience a mental disorder in any given year—and extremely hard to diagnose in some cases, since no simple biological tests exist to detect them. There’s no blood test for, say, depression or a personality disorder; no scan that can reveal attention-deficit hyperactivity disorder (ADHD). Instead, a clinician must rely solely on a patient’s symptoms and observation of his or her behavior to reach a diagnosis.[7]

Dr. Jeffrey Lieberman, who is chairman of psychiatry at Columbia University and the current president of the American Psychiatric Association, says: “With rare exceptions such as narcolepsy, which can be diagnosed by testing cerebrospinal fluid, there are no objective biological measures for mental illness.”[8]

According to MacArthur’s major theme, biblical counselors can counsel all but a few exceptions from the *DSM-5* because “there are no objective biological measures for mental illness.” MacArthur believes that aside from a few exceptions *DSM-5* mental disorders are not “physiological brain diseases” because they lack objective diagnostic criteria and are therefore “nonmedical problems,” which means they have spiritual roots and can be resolved biblically.

MacArthur, as well as others in the biblical counseling movement, are woefully naïve about the biological possibilities of those who are suffering from problems of living. Dr. E. Fuller Torrey, MD, a research psychiatrist says, “Psychiatric disorders can be caused by genetic, infectious, metabolic, and other organic etiologies, some of which are detectable by a physical exam and blood tests, but **many cannot be**” (bold added).[9]

“Nothing Found versus There Is Nothing”

Most competent practicing medical doctors who see patients regularly and any book written by a capable medical doctor on this subject will debunk MacArthur’s extremely erroneous idea and his medical illness position. For example, Erno Daniel, MD, PhD, an internal medicine doctor who has been at a large medical clinic for 30 years and seen patients on a regular basis, has written a book titled *Stealth Germs in Your Body*. In his chapter “What Else Could It Be?” he has a section titled “We Found Nothing” versus “There Is Nothing.” Daniel says:

Clearly there is a difference between “we found nothing (abnormal)” and “there is nothing (abnormal).” In general “we found nothing, so far” means that the screening examinations and tests that were ordered to look for particular conditions yielded negative results at the time they were done. In other words, nothing truly abnormal was found on the examination or on the tests that were chosen to be performed thus far. Clearly, that doesn’t prove conclusively that you are not harboring stealth germs in your body, as there **is no foolproof test that can find everything. The absence of a large number of possible conditions does not exclude the presence of some other previously undetected or evolving condition** (parentheses his; bold added).[10]

Daniel later explains why exhaustive testing is not done in a section titled “Cost-benefit Considerations in Testing.” He says:

Most likely, you were only tested for conditions that were suspected to be causing your symptoms, and conditions for which there is specific effective treatment available. One of the main reasons why tests for many “nontreatable” conditions are not routinely ordered is because ethical doctors try not to incur unnecessary expenses. Although information obtained from some tests might be interesting, the tests usually won’t be ordered if the results are not expected to yield direct benefit in correcting or managing your condition as demonstrated by evidence-based medical practices.[11]

Anyone reading the entire chapter of Daniel’s book would see the reasons why one cannot rule out a medical condition when a complete physical finds nothing and **why MacArthur’s mental illness theme is a mental illness myth.**

Complexity of Mental Disorders

The blunt truth is that no one, no matter how expert, educated, and experienced in the field of medicine, can say for sure about the cases where there are no medical markers whether or not there are “psychological brain diseases” involved or whether they are “nonmedical problems”! Thomas R. Insel, MD, director of the National Institute of Mental Health says:

Mental disorders are among the most complex problems in medicine, with challenges at every level from neurons to neighborhoods. Yet, we know so little about mechanisms at each level. Too often, we have been guided more by religion than science. That is, so much of mental health care is based on faith and intuition, not science and evidence.[12]

Likewise, for MacArthur, “so much of mental health care is based on faith and intuition, not science and evidence.”

An article in *Psychology Today* reports that there are “100 billion neurons in the human brain” and that it would take 32 million years “to count each synapse in the human brain at a rate of one synapse per second.”[13] An article in the *Psychotherapy Networker* describes the human brain as “the most complex biological entity known on earth.” The author adds, “The number of possible interconnections among its neurons exceeds the estimated number of atoms in the universe.”[14] The brain is obviously central to the mind-body relationship because it controls every organ system in the body. In addition, the brain also responds to every organ system within the body. This interaction of body to brain/mind and brain/ mind to body is a complex process, and the enigma of it prevents us from knowing much truth about the underlying causes of mental symptoms. Knowledge is limited because the secrets of human behavior are locked up in the brain-mind-body relationship and particularly in the brain.

Michael Chase, in an article entitled “The Matriculating Brain,” wrote, “The human brain, for all our intimacy with it, has surrendered less to scientific research than have the distant moon, stars and ocean floor, or such intimate processes as genetic coding,

immune reactions or muscle contraction.”[15]

Misdiagnosis

We begin with the axiom that humans have a brain/ body (biological) and a mind (nonphysical). The intimate relationship between the brain/body and the mind has led to misunderstanding and misdiagnosis during the entire history of psychiatry and psychotherapy. The problem of biological disorders that were thought to be psychological problems and treated as such is a grim skeleton in the therapeutic closet. Most psychiatrists and psychotherapists would like to ignore or forget about this history of looking at and treating psychological symptoms that were really the result of physical diseases not identified at the time.

At one time in this history there were undetected physical diseases that were treated as mental disorders because of the accompanying mental symptoms, and that is still true today. Two examples are general paresis, caused by the spirochete of syphilis invading the brain, and pellagrous psychosis, caused by a dietary deficiency of nicotinic acid. In both cases multitudes of people who have suffered from these diseases were labeled schizophrenic and treated accordingly.

This raises the whole problem of misdiagnosis and the tendency to refer people to psychotherapists or psychiatrists. And, it opens the door for biblical counselors to assume that no “physiological brain diseases” or medical problems exist when none are found and therefore the person has a spiritual problem in need of biblical answers. There have been and still are great numbers of individuals wrongly referred to psychotherapists or psychiatrists who are really suffering from physical disorders. Also there are a number, we know not how great, who are counseled by biblical counselors because bodily disorders have not been found.

Sydney Walker III, a neuropsychiatrist, says:

Each year, hundreds of thousands of Americans who are actually suffering from common medical conditions such as hyperthyroidism, Lyme disease, and even poor nutrition are misdiagnosed with psychiatric disorders. Studies show that the rate of misdiagnosis is more than 4 in 10.[16]

In the *Scientific American Mind*, an article titled “Ruled by the Mind” says, “Many common ailments and physical conditions can influence the brain, leaving you depressed, anxious or slow-witted.” The article discusses some somatopsychic disorders in which “the root of the problem [mental disorder] lies in the body— and in particular the immune system.”[17]

There are many bodily disorders that doctors do not relate to the mental symptoms that result from them. An article in the *Wall Street Journal* titled “Confusing Medical Ailments With Mental Illness” refers to “more than 100 medical disorders” that “can masquerade as psychological conditions or contribute to them, complicating treatment decisions.” The article states, “Recognizing an underlying medical condition can be particularly difficult when there is also a psychological explanation for a patient’s dark moods.”[18]**Think**

about the possible prolific personal harm that can result from assuming a spiritual cause and biblical cure for the almost 300 mental disorders listed in the *DSM-5* as can often happen with the individuals counseled by biblical counselors!

There is a whole range of bodily disorders that have mental symptoms. Some of these biological disorders are in their embryonic stages—not yet detectable. These symptoms can result in mental disorders that would be diagnosed by biblical counselors as spiritual problems requiring biblical solutions. There is a whole class of diseases called “idiopathic.” According to the dictionary, “Idiopathic is an adjective used primarily in medicine meaning *arising spontaneously or from an obscure or unknown cause.*”^[19] In other words, there are **no biological markers** for such diseases; there are **only symptoms**. There are many such diseases of the body and brain that occur, and we assume that biblical counselors would have to agree that there are idiopathic diseases of the body that are known only by their symptoms. Just as diagnosing idiopathic **bodily** diseases that lack biological markers must rely upon symptoms, diagnosing idiopathic brain diseases that lack biological markers must also rely upon symptoms.

Diseases Yet to be Discovered

What about true bodily or brain disorders or **diseases yet to be discovered**, whose symptoms are mental, emotional, or behavioral? As we just noted, there are all sorts of mental disorders that have been treated in the past by psychiatrists as psychological disorders that later were found to have physical causes. Because “organically generated difficulties” were not found at the time, those disorders would have been diagnosed as psychological by psychologists, but spiritual by biblical counselors, needlessly and foolishly foisting unneeded counseling on unsuspecting counselees.

Just as there may be **no biological markers** that clearly reveal the etiology of various mental disorders there are also **no spiritual markers** for them. In regard to **spiritual markers**, all of them are symptomatic, e.g., church membership, personal testimony, words, actions, financial giving, teaching, Christian family, Bible college or seminary degree, being a pastor, etc., none of which can be said to be a certain sign that one is a believer. It is as serious an error to assume that those with mental disorders without biological markers are suffering exclusively for spiritual reasons as it is to assume that those with mental disorders without biological markers are suffering exclusively for biological reasons.

How sad it is when a Christian diagnoses a fellow believer’s mental disorder as spiritually caused when, indeed, there may be hidden biological reasons for the symptoms. To be fair-minded one needs to avoid categorically placing individuals who are without biological markers into a spiritual, psychological, or a medical box because only God knows the nature and extent of each. Beyond the obvious cases, such as brain tumors, etc., **the ones who are biologically afflicted but do not have biological markers are known only by God.** Only God knows for sure when biological markers are absent whether there is a spiritual or biological cause and whether a spiritual or medical solution is all that is necessary.

Spiritualizing Mental Disorders

In the absence of biological markers, spiritualizing a mental disorder and prescribing a biblical regimen alone can be a serious mistake, because **counseling based on such wrong assumptions could induce guilt and greater suffering even for the most godly individuals, especially if there is no change in symptoms..** Wouldn't it be much better to admit that one may not know what underlies an individual's mental symptoms and yet provide spiritual helps that may alleviate the suffering and promote spiritual growth? Everything in life has spiritual overtones. However, every illness in life is not solely the result of our spiritual choices and that includes mental disorders, which can be the result of genetics, hormones, diseases, injuries, and circumstances, all of which can affect one's state of mind. And, of course one will respond to the issues of life biblically more and more as one grows in the spirit and matures in the faith. Therefore, one should seek to minister the things of the Spirit and build individuals up in the Word. Whether the problem is biological, spiritual, or both, believers may minister God's mercy, grace, and truth to fellow believers, because **every occasion of suffering can be used for comfort and spiritual growth—unless the one who ministers thinks he can diagnose another person's heart attitude.** There must be much humility in personally ministering to those who are suffering, even if they have brought this suffering upon themselves.

Let's say a woman who is suffering from a mental disorder is not a believer. Let's say by the mercy and grace of God she is converted, but her mental disorder remains. In such cases, **some** may be delivered from mental disorders. However, others, because of biological impairment not yet discovered, will continue to suffer as long as the body/brain is affected. Yet, during that time a believer who continues in depression may draw close to the Lord and find comfort and encouragement in time of need.

While biblical counselors and pastors may wonderfully bring forth the use of Scripture, they woefully leave their readers in danger of suffering from mental symptoms believing that their current spiritual life is causing these distressing symptoms and is responsible for their current state of mind and that, as soon as they "straighten out" spiritually, their mental disorder will be over. **This will surely cause many such believers to feel guilty about their own "spiritual lack" when they may be as spiritually sound as MacArthur himself. His article is a great discredit to those godly individuals and a great disservice to the church.**

Often times only God knows if the mental disorder is caused in whole or in part by a spiritual problem, and therefore only God truly knows if a spiritual solution is all that is necessary. MacArthur's conclusion that a mental disorder is spiritual under the conditions he sets encroaches upon God's territory. He needs to repent of claiming to have knowledge that only God can truly know. It can be said that every mental and bodily disorder should include biblical ministry to the one who is suffering, but **not** to confront sin unless it is necessary and surely not to be flossicking around for idols of the heart as many biblical counselors do.

Most practicing Christian medical doctors would not agree with MacArthur's conclusion that physiological brain diseases have clear biological markers and if none are seen, there is no medical condition, but only a mental one that is actually a spiritual problem that one can diagnose and treat biblically. **There is no one on earth who can tell for sure whether a physiological brain disease that has no known biological markers is a spiritual problem or a biological problem or a combination of the two!**

Limitations of Brain Imaging In Relation to Mental Symptoms

Furthermore, brain imaging is still in its early stages of usefulness in diagnosing mental disorders. Certain problems, such as cell damage through tumors, strokes, and other mishaps, can be identified through brain imaging. But other activities in the brain having to do with neurotransmitters vary during the day and from day to day so that a specific diagnosis through brain imaging is definitely limited. Disease can be extensive, but not identifiable. Some diseases can be rampant and horrible but not even identified.

Therefore, it is worse than naïve to state definitively that “physiological brain diseases” that cannot be discovered through existing means of medical tests, no matter how thorough, are spiritual problems.

Let's take this no “physiological brain diseases” shown for the mental disorders to its logical conclusion. First we know that there are no medical markers for most cases. The cases MacArthur claims can be cured biblically are ADHD, Bipolar disorder, schizophrenia, depression, and PTSD. **No clear biological markers that would be revealed through a most extensive medical examination would mean, from his perspective, that everyone, without exception, who suffers from one or more of these conditions is merely suffering from spiritual problems of living rather than any biologically driven conditions!**

Logical Fallacy

We repeat, because mental disorders often have no biological markers to reveal their cause, MacArthur concludes that both the cause and cure of such disorders must be spiritual. We are concerned about the way biblical counselors are rigidly set in their spiritual/biological dichotomy, contending that mental illnesses are either the result of a **spiritual** problem or a **detectable** biological disorder. Biblical counselors are probably unaware of the fact that they are involved in an either/or logical fallacy. One logic book describes the either/or fallacy as follows:

The *either/or* fallacy, sometimes called *false dichotomy*, consists of mistakenly assuming that there are only two possible solutions to some problem or that solving some problem consists of choosing between only two alternatives. The argument moves by showing that one of the alternatives is false or unacceptable and concludes that the other must be true.[20]

Based upon his naiveté about true diseases and his bogus either/or fallacy of true diseases and spiritual disorders, MacArthur's article encourages Christians to rush in "where angels fear to tread" to counsel individuals for whom no true bodily or brain disease has yet been found. **It may never have occurred to him that a mental disorder could be the result of a combination of a true disease and a spiritual disorder, or a true disease not discovered during a complete medical examination or other means.**

Mental symptoms can be related to a person's spiritual life, but to categorically say that it is either physical or it is spiritual is just plain wrong reasoning. There are many other bodily symptoms that consistency would demand that they be labeled spiritual disorders when no physical disease can be found. Backaches resulting in mental symptoms are frequent complaints that often escape a specific disease diagnosis to relate them to the brain. Are those backaches spiritual problems? Likewise for sinus and respiratory disorders that result in mental symptoms where no true disease is found to connect the two—are these spiritual problems? And how about the controversial disorders of fibromyalgia and chronic fatigue with doctors arguing on both sides of the body/mind issue. Also, how about headaches related to mental disorders where all the possible medical testing has been done, but the headaches persist? Since they affect the brain absent any biological markers, are these spiritual problems as well? What do biblical counselors do with the fact that women have "twice the risk of depression as men"¹⁷ and two-thirds of those with General Anxiety Disorder are women?[21]

Discoveries Yet to Be Made

A recent article indicates that the "first blood test to diagnose major depression in adults has been developed."¹⁹ Prior to this there was no such medical marker. Without knowing about this recent discovery and thus assuming the problem is spiritual, MacArthur and other leaders in the biblical counseling movement would assume the depression to be solely a spiritual problem if nothing is found in the usual "complete physical exam" or other means. Through the years the list of true diseases has expanded and will continue to expand as more cause and effect relationships are discovered. **Many disorders labeled "psychological" by the psychotherapists and "spiritual" by biblical counselors may be identified in the future as true diseases resulting in mental, emotional, or behavioral symptoms, thus bringing embarrassment to those who follow this foolishness.**

We repeat, in the past, when a reason for a symptom could not be found, psychiatrists jumped in with their psychiatric diagnoses. And, people were told that their symptoms were all in their head. In fact, there was a time when asthma was thought to be caused by family relationship problems. The biblical counselors have simply shifted the blame from the psychological to the spiritual, which for Christians becomes a hopeless cycle of condemnation and guilt on top of the symptoms already being experienced.

Some diseases creep in subtly, and some, which can cause mental symptoms in their early stages, are not identified for years. Because of the limitations of a physical exam, no matter how extensive, one may never know for sure if the mental symptoms have a physical base. Leaping to a conclusion that it is a spiritually related, as with an either-or fallacy (bodily or spiritual), after a complete physical that reveals nothing is naïve at best and cruel at worst when put into practice.

There are many examples we could provide from our own ministry experience and from other testimonies of overlooked physical causes of mental disorder symptoms. There are two cases of Christian women, with whom we are personally acquainted, who were diagnosed with psychiatric disorders because no known physical disease was discovered even after numerous physical tests and examinations by a variety of doctors. Both women were diagnosed as having a psychiatric disorder. In the first case, it was suggested that the woman's husband might possibly be involved in her disorder. After several years of struggling, she was finally found to be a victim of Lyme disease, which is caused by a deer tick. The second woman reported a number of psychiatric symptoms and was diagnosed with schizophrenia. Months later, after she had continued to suffer from the various symptoms, an astute doctor revealed that her symptoms were due to a viral pathogen. Can you imagine the damage the biblical counselors could cause with these two Christian women and many others?

During the period of time prior to the discovery of Lyme disease in the one and the virus in the other, with accompanying psychiatric symptoms in both, these two women would probably have been labeled as having spiritual problems by biblical counseling standards. They would probably tell these two women who had thorough physical examinations by a variety of doctors, "Your mental problems are simply spiritual problems that we can diagnose and treat biblically, because no 'physiological brain diseases' have been found." After the discovery of their true diseases, the biblical counselors would be regarded as false teachers.

Physical, Psychological, or Spiritual?

Psychiatrist Barbara Schildkrout sees the shortcomings of simply diagnosing according to the *DSM*. She has written two books to encourage her fellow practitioners to look beyond psychological symptoms. They are titled *Unmasking Psychological Symptoms: How Therapists Can Learn to Recognize the Psychological Presentation of Medical Disorders*^[22] and *Masquerading Symptoms: Uncovering Physical Illnesses That Present as Psychological Problems*.^[23] At the beginning of *Masquerading Symptoms* she quotes E. K. Koranyi:

Non-specific behavioral and mood alterations often represent the very first and, occasionally for prolonged periods of time, the one single and exclusive sign of an undetected physical illness. Flagrantly and convincingly "psychological" in nature on presentation, such masked physical conditions frequently mislead the examiner and obliterate any further medical consideration, resulting in misdiagnosis and thus, inevitably, in treatment gone astray.^[24]

Schildkrout then says:

Many medical conditions can produce mental symptoms as their dominant clinical feature. This creates a diagnostic problem. How is one to know whether an underlying medical disease might be the cause of a patient's presenting psychological symptoms? This question is a serious one for all mental healthcare practitioners, indeed for all clinicians.[25]

In her book, Schildkrout describes seventy different illnesses that may have psychological symptoms and may therefore elicit a misdiagnosis based on the categories of symptoms in the *DSM-5*, rather than a diagnosis associated with the actual illness. With many of the disease descriptions, she lists "Possible Presenting Mental Signs and Symptoms," and in another section she lists diseases "that may present with anxiety," a "depressed mood," "episodes of fear," and so on. [26]

Such misdiagnosis has been a long-standing concern with us. In our first book, *The Psychological Way/The Spiritual Way*, published in 1979,[27] we have a brief section titled "Body/Mind: Misdiagnosis and Mistreatment," in which we describe cases in which people were misdiagnosed as having a mental problem when they were actually suffering from debilitating physical diseases. Schildkrout's book is a step in the right direction, and we hope many psychotherapists and medical doctors, particularly psychiatrists, internists, and family practice physicians, who are often the first to see a patient who is suffering mental distress, will read it.

In addition to known diseases, there may be excruciating mental-emotional symptoms for diseases not yet discovered. In fact there is a growing body of research indicating that mental, emotional, or behavioral symptoms may be caused by stealth germs in the body. Research is bringing to light the possibility that OCD (obsessive compulsive disorder) has its pathogenesis in certain viral organisms. The authors of "Viral Antibodies in Blood in Obsessive Compulsive Disorder" say:

Obsessive Compulsive Disorder (OCD) is a relatively chronic disorder characterised by repeated thoughts, actions, impulses, ideas, images or actions, which are recognised as being irrational and are resisted. Although most of the earlier theorists regarded OCD to have a psychodynamic basis (Freud, 1909), recent work has focused on its biological correlates (Jenike, 1984).[28]

Harvard Medical School posted a warning to parents of young children who suddenly develop strange behavior:

With evidence mounting about the connection between infection and sudden-onset OCD, as the executive director of the International OCD Foundation, I helped coordinate two new public service announcements to help raise awareness that OCD and tic disorders can be triggered by infections in children. For many of these children, quick treatment with antibiotics can be the key to reversing OCD, tics, and other symptoms.[29]

At the International OCD Foundation, we have heard heart-wrenching stories of well-adjusted children who develop sudden onset OCD. I have seen chilling before and after videos. One clip, with a time stamp of August 10, 2010, shows a typical, happy go lucky kid. The next clip, dated August 12, 2010, shows a screaming, terrified child and bewildered parents.[30]

This problem of misdiagnosis and maltreatment is not confined to medical doctors and psychotherapists. This serious problem has now ensconced itself in churches that refer their people to mental health systems and churches that do psychologically tainted biblical counseling. Unfortunately, it will be a long time, if ever, before pastors and other church leaders quit referring their people out to psychotherapists and psychologically influenced biblical counselors. If any referral is to be made at all, it should be to the person's own primary care doctor in case there is an underlying disease. Then, in addition to that referral, the body of Christ in the local fellowship should minister to the person, not with the assumption that the cause is spiritual, but rather to pray and bring biblical and practical help. When members of the body of Christ are suffering, others in the body need to encourage, comfort, pray, and respond through practical acts of mercy and help.

A Humble Look at Ourselves

As scientific research reveals more and more about the mind-body connection within the context of living, we hope that more and more people will be helped. In the meantime, all of us need to take a humble look at ourselves and one another and not jump to conclusions about anyone's emotional problems. We are indeed "fearfully and wonderfully made" and we live in varying circumstances, all in the context of a universe created by God. We pray that as medical knowledge increases, there will be less misdiagnosis in the realm of the mind, emotions, and behavior. We pray that Christians will seek God for solace in all these things, for He is the one who made us. He is the One who knows exactly what's going on in every individual and uses all for our spiritual good. We pray that referrals to psychotherapy (psychological talk therapy) will be replaced by mutual care among believers to help one another endure through trials and grow spiritually. Throughout every trial we are in our Father's care and He uses various trials, including illness, to conform us to the image of Christ (Rom. 8:28-29), until that day when we are given glorified bodies and see Jesus face to face.

Because of the vast spiritual needs of people who are enduring trials, medical doctors, psychiatrists, and psychotherapists would do well to refer their patients to the church for spiritual help and sustenance. As it is now, doctors and therapists refer patients to various

religious practices in addition to the secular religion of psychotherapy. Patients are sometimes urged to participate in Yoga, Eastern forms of meditation, and guided imagery, but not Christianity.

Nearly 40 years ago one of the world's best-known psychiatrists, Dr. Thomas Szasz, recommended taking mental health care away from the professionals, such as M.D.'s and Ph.D.'s, and giving "this whole business back to the ministers and priests and rabbis."^[31] This also would have meant taking it away from the Christians who are psychotherapists. If this had been done, both the mental and spiritual health of the nation could have dramatically improved—that is, if the church had not already fallen in love with psychotherapeutic theories and therapies. However, having lost much of its birthright through worldliness, much of the church would have been ill prepared, because the seminaries were already including too many of the ideas and techniques from the world of counseling psychology.

Where's the Warning?

MacArthur's article deals with ADHD, Bipolar disorder, schizophrenia, depression, and PTSD. His article communicates to those who have such labeled disorders and to others that the Bible is sufficient to deal with such mental disorders as long as they are not medically shown to be "physiological brain diseases" affecting behavior. MacArthur describes dealing with these disorders in such a way as to give hope by presenting a biblical alternative to those readers who have been diagnosed with one or more of these mental disorders and may be taking or considering taking psychotropic medications.^[32] MacArthur's article could lead them to question or change their use. **Unfortunately, the necessary and usual responsible warning about psychotropic medications is entirely absent at the beginning, which is a major mistake of his article,** may put some readers at risk, and may also leave MacArthur and those who lack pastoral protection open to a potential lawsuit! **When describing cases regarding ordinary problems of living for which people seek counseling, such a warning is not necessary.** However, when describing and specifically naming cases covered in MacArthur's article and listed in the *DSM-5*, **a warning is a dire necessity.**

Dr. Peter R. Breggin, who is probably the best-known psychiatrist in America for his opposition to psychotropic medications, has a full-page warning at the beginning of his best-known book, *Toxic Psychiatry*.^[33] His very first words, emphasized by italics, are: "*Do not abruptly stop most psychiatric drugs!*"^[34] Note the exclamation mark!

Dr. Laura Hendrickson, a psychiatrist and a "diplomate, American Board of Psychiatry and Neurology,"^[35] authored the first case in *Counseling the Hard Cases*. We have previously critiqued her writing and speaking.^[36] In her coauthored book *Will Medicine Stop the Pain?* Hendrickson says she was "diagnosed bipolar disorder" and was on psychotropic medication. She describes herself as having had "suicidal thoughts," but after having met with her pastor she experienced rapid recovery and says, "In fact, it was the medicine that went off the bridge instead of me."^[37] Despite this veiled possibility for others to do likewise, Hendrickson does give "A Word of Caution," which is lacking at the

beginning of MacArthur's article. Although we have ministered to many difficult cases over the years, we have never written about such cases to demonstrate that the Bible can be used exclusively in such circumstances. However, if we had, knowing that some of those who would read what we write would either be on psychotropic medications or consider using them, we would certainly issue a warning as did Breggin and Hendrickson.

As we said earlier, the *DSM*, the psychiatric bible for mental illnesses, has almost 300 mental maladies in its latest edition (*DSM-5*).^[38] **According to the standard set forth by MacArthur**, biblical counselors can counsel most of them. Considering almost 300 different mental disorders for biblical counselors to tackle and the fact that psychotropic drugs are available for nearly all of them, one would expect MacArthur would be especially careful to sound the warning that is normally given by professionals.

However, there is no early warning, and that needs to be corrected, because it is a serious omission, a great disservice to the readers, and could have serious consequences for the counselees. They do not have a "warning" introductory page as Breggin did in his book and "A Word of Caution" as done by Hendrickson in her coauthored book. Such a caution should be at the beginning since readers might not read the entire article before they toss their medications "off the bridge," as Hendrickson did. Because of this lack of warning next to the implied promises of what biblical counselors can do with the cases mentioned, **MacArthur's article is a potentially litigious bomb that may be exploded on individuals and biblical counselors who naively follow MacArthur's lead.**

Conclusion

Just as psychological counseling and psychotropic drugs have been erroneously used over the years when no biological illness has been found, MacArthur now mistakenly assumes that sin or needed spiritual growth are the cause of problems when no "physiological brain diseases" are found. Just because no "physiological brain diseases" are found does not mean that none exist. Just because there is no known cause and effect relationship between the brain/mind and many of the mental disorders does not mean that one will not eventually be found. When more becomes known about the brain and its affect on the mind/body and about how various brain activities can affect thinking, feeling, and even behaving, these new discoveries will make fools of those who have been following the either/or fallacy and concluding that the mental disorders are for certain spiritually caused.

We must all be open to the possibility that some of the metaphorically speaking "Mental Illnesses" will have known organic causes in the future, regardless of what remedy is used. The brain, because of its enormous complexity, can have things organically wrong with it that cause mental disorders. Instead of using the symptoms as a means of ministry MacArthur relies mostly on psychiatric terms and psychological labels, such as ADHD, Bipolar disorder, schizophrenia, depression, and PTSD. Many of God's people have difficult decisions to make. Many have taken the full physicals provided by their clinics and recommended by biblical counselors. They have waited months with mental

symptoms. They have painfully gone to work at times and stayed home at other times, doing the best they could under the prevailing, painful symptoms. Their loved ones have perhaps drawn alongside and helped to bear the awful burden of those so afflicted. No one should add to their burden by using an either/or fallacy resulting in spiritual blame that does not fit the facts or history.

The best, most sensible position for a Christian to take, even after a complete physical examination that reveals nothing, is neither to imply nor state that a mental symptom is necessarily due to a spiritual problem. But, regardless of whether a brain disorder is a spiritual or biological problem, the correct thing to always do is to minister biblically in addition to any other medical treatment that may be necessary and helpful.

There is always a place for biblical encouragement, counsel, and even rebuke, but such should be done in great humility (Gal. 6:1-3) and with consideration for the possibility of biological involvement. Sometimes the best one may say is, "I don't have a clue, but God knows, and He is faithful to His promises to be with His children (Heb. 13:5), to enable them to endure trials (Phil. 4:13), and to use all for their good (Rom. 8:28-29)." **Christians who desire to minister to fellow believers should beware of the temptation of becoming like Job's counselors—adding to a person's pain through fallacious conclusions based upon no "physiological brain diseases" or "medical problems" existing followed by condemnation by spiritualizing the causes for most of the nearly 300 mental disorders in the *DSM-5* plus any others where no apparent medical markers appear.**

[1] Dr. John MacArthur, "Dispelling Myths About Mental Illness," <https://www.gracechurch.org/news/posts/3982>.

[2] Jay E. Adams. *Grist from Adams' Mill*. Phillipsburg, NJ: Presbyterian and Reformed Publishing Co., 1983, p. 69.

[3] Stuart Scott and Heath Lambert, eds. *Counseling the Hard Cases*. Nashville, TN: B&H Publishing Group, 2012, p. 8.

[4] Jay E. Adams. *Competent to Counsel*. Grand Rapids, MI: Baker Book House, 1970, pp. 28-29.

[5] Scott and Lambert, *op. cit.*, p. 13.

[6] Heath Lambert, "Can Jesus Heal Mental Illness?" Part 3, Biblical Counseling Coalition, May 16, 2014, <http://biblicalcounselingcoalition.org>.

[7] "4 Controversial Mental Disorders," Paula Derrow, *Berkeley Wellness*, 9/10/2015, www.berkeleywellness.com.

[8] "*DSM-5*: Psychiatrists' 'Bible' Finally Unveiled," *Huffington Post*, 05/16/2013, www.huffingtonpost.com.

- [9] E. Fuller Torrey, email 9/13/2014.
- [10] Erno Daniel. *Stealth Germs in Your Body*. New York: Union Square Press, 2008, p. 195.
- [11]*Ibid.*, pp. 196-197.
- [12] Thomas. R. Insel, "Atonement," www.psychiatrictimes.com.
- [13]*Psychology Today*, Vol. 35, No. 3, p. 17.
- [14] Mary Sykes Wylie and Richard Simon, "Discoveries from the Black Box," *Psychotherapy Networker*, Vol. 26, No. 5, p. 26.
- [15] Michael Chase, "The Matriculating Brain," *Psychology Today*, June 1973, p. 82.
- [16] Sidney Walker III. *A Dose of Sanity: Mind, Medicine, and Misdiagnosis*. New York: John Wiley & Sons, Inc., 1996, back cover.
- [17] Erich Kasten, "Ruled by the Body," *Scientific American Mind*, Vol. 22, No. 1, p. 53, 54.
- [18] Melinda Beck, "Confusing Medical Ailments With Mental Illness," *Wall Street Journal*, August 9, 2011, p. D-1.
- [19] Idiopathic," www.en.wikipedia.org/wiki/Idiopathic
- [20] Robert M. Johnson. *A Logic Book*, 2nd Ed.. Belmont, CA: Wadsworth Publishing Company, 1992, p. 248.
- [21]*Harvard Mental Health Letter*, Vol. 19, No. 7, p.1.
- [22] Barbara Schildkrout. *Unmasking Psychological Symptoms: How Therapists Can Learn to Recognize the Psychological Presentation of Medical Disorders*. Hoboken, NJ: John Wiley & Sons, Inc., 2011.
- [23] Barbara Schildkrout. *Masquerading Symptoms: Uncovering Physical Illnesses That Present as Psychological Problems*. Hoboken, NJ: John Wiley & Sons, Inc., 2014 (Kindle Edition).
- [24] E. K. Koranyi (1979), "Morbidity and rate of undiagnosed physical illnesses in a psychiatric clinic population." *Archives of General Psychiatry*, 36(4), 414.
- [25] Schildkrout. *Masquerading Symptoms*, *op. cit.*, p. xi.
- [26]*Ibid.*, pp. 15ff.
- [27] Martin and Deidre Bobgan. *The Psychological Way / The Spiritual Way*, Minneapolis, MN: Bethany House Publishers, 1979.

- [28] Sumant Khanna, et al, "Viral Antibodies in Blood in Obsessive Compulsive Disorder," *Indian Journal of Psychiatry*, 1997, Vol. 39, No. 3, pp. 190-195, <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC2967113/pdf/IJPsy-39-190.pdf>.
- [29] Jeff Szymanski, Harvard Medical School blog posted 2/27/2012, <http://www.health.harvard.edu/blog/can-an-infection-suddenly-cause-ocd-201202274417>.
- [30] *Ibid.*
- [31] Thomas Szasz, "Nobody Should Decide Who Goes to the Mental Hospital," *Co-Evolution Quarterly*, Summer 1978, p. 60.
- [32] "A psychoactive drug, psychopharmaceutical, or psychotropic is a chemical substance that crosses the blood-brain barrier and acts primarily upon the central nervous system where it affects brain function, resulting in alterations in perception, mood, consciousness, cognition and behavior," en.wikipedia.org/wiki/Psychoactive_drug.
- [33] "Peter Breggin," en.wikipedia.org/wiki/Peter_Breggin, 8/24/2014.
- [34] Peter. R. Breggin. *Toxic Psychiatry*. New York: St. Martin's Press, 1991.
- [35] Elyse Fitzpatrick and Laura Hendrickson. *Will Medicine Stop the Pain?* Chicago: Moody Publishers, back cover.
- [36] Martin and Deidre Bobgan, "Review of *Will Medicine Stop the Pain?*" *PsychoHeresy Awareness Letter*, 2009, Vol. 19, No. 5.
- [37] Hendrickson, *op. cit.*, p. 14.
- [38] "DSM-5: Psychiatrists' 'Bible' Finally Unveiled," *Huffington Post*, 5/16/2013, www.huffingtonpost.com.