

Book Reviews

and temperance. Risk management is useful only when governed by prudence and virtuous practice. It is a pity that the reader has to work hard at following his closely knit arguments, but for those who do so, there is a great deal of rich material here.

What came through to me is that, in being prepared to accept risks, we begin to acknowledge our own mortality. These are Christian themes we would do well to take seriously, even if we would like to have seen more space devoted to the host of ethical issues raised by specific technological developments in the biomedical area. I recommend this book for readers willing to engage with a thoughtful and nuanced Roman Catholic approach to public health ethics.

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A THEOLOGY OF HEALTH: Wholeness and Human Flourishing by Tyler J. VanderWeele. University of Notre Dame Press, 2024. 392 pages. Hardcover; \$45.00. ISBN: 9780268208332. Ebook; \$2.99. ISBN: 9780268208325.

A Theology of Health is a book that epidemiologist Tyler VanderWeele wrote for a course he teaches at Harvard School of Public Health. Rather than writing from a neutral pluralistic perspective, he elected to write from a Roman Catholic perspective, the religion that he currently practices. (He had been a Presbyterian and an Anglican in the past.) He found that material presented from a coherent Catholic perspective was well received by his students, whether they were persons of faith or not.

The bulk of the book is divided into three parts: Health and Wholeness; Ill Health and Sin; and Healing and Salvation. Within each part, there are multiple chapters that are divided into a series of propositions. Supporting evidence is provided to justify them. The final chapter in each part is devoted to the implications of truths considered in the prior chapters. VanderWeele combines evidence from Scripture, Catholic doctrine, and peer-reviewed science to create a rational, integrative understanding of health, wholeness, sickness, sin, redemption, and healing. He respects all three epistemologies without being too dogmatic. He also recognizes the minor differences between traditional Protestant and Catholic theology, such as the number of sacraments and the mechanisms of their efficacy. His high view of Scripture, which he regards as solid truth, might be an irritant to those with “progressive” theological viewpoints. He also includes a brief nontheological postscript, which

argues that many of the measures that improve health of the body or health of the person apply to Christians and non-Christians alike. Love, hope, forgiveness, and pious character are marks of a healthy person. Communities rich in opportunity, justice, peace, and neighborly love contribute to the health of its members regardless of their faith.

Part I begins with the World Health Organization’s definition of health as “a state of complete physical, mental, and social well-being and not merely the absence of disease” (p. 12). VanderWeele rightly defines physical health as not only the absence of disease but also a state of physical fitness. Mental health is more than a healthy brain; it entails stimulation, proper use of the mind, and intervals of rest. Health (or what might be considered by some to be human flourishing) extends beyond physical and mental health. It requires healthy relationships, purpose, balanced work and leisure, character development, and spiritual health.

In Part II, the author explores how illness can result from sinful behaviors, such as drunken driving, immoral sexual encounters, and poor exercise and eating habits. We may also suffer ill health because of an abusive spouse, societal injustices, pollution, or lawless behaviors. Certainly, illnesses and suffering occur that are not directly preceded by a sin of the victim or an offender or by injustices in society. These illnesses and sufferings should be recognized as a part of the curse we are all under because of original sin. Perhaps the most easily recognized effect of original sin is the frailty that comes to all humans because of the aging process. VanderWeele traces the presence of sin to a historical or a metaphorical Adam. He does not take sides on this question, conceding that there are faithful Christians on both sides of this controversy. Probing this topic would distract from the book’s purpose of giving a clear theology.

The central thesis of the final part of this book is that restoration and fulfillment of health is “salvation.” This is the most theological of the sections. In this regard, he follows the Christian concept of the redemptive-historical timeline: creation, fall, redemption, and restoration. He believes that complete restoration will occur after death (and purgatory). In heaven, believers will be fully united with God and experience the elimination of sin, of suffering, and of any illness. During this life, complete wholeness is not possible, but one should strive toward achieving this ideal by recognizing sin and its effects. Healing of the person will require communion with God. The direction of one’s life should be toward less sin and greater love for God and one’s neighbors.

Empowerment for such healing will come from loving God and living in friendship with him. Spreading love in the community, including to one's enemies, will lead to wholeness in the community.

A Theology of Health is written as a textbook and is not written for a casual reader who might be interested in a book on health or preventive medicine. This book is not illustrated with captivating stories that would lighten the text while still making moral arguments. It is intended to be systematic; some might be bothered by repetition that is intrinsic to this format. Other books in this genre include Jean-Claude Larchet's *Theology of Illness* and Neil Messer's book *Flourishing*. VanderWeele acknowledges the contribution of these books to the writing of his own book. Larchet's 1991 book was written from an Orthodox perspective. Messer writes from a Reformed theology perspective, publishing his book in 2013. Compared to VanderWeele's work, these earlier books more directly address controversies in medical ethics.

I admire the author for his scientific work in epidemiology methods and his publication of other textbooks more germane to this book, most notably his co-editorship of *Handbook of Religion and Health* (third edition, 2024) along with Harold Koenig and John Peteet. Peer-reviewed studies on which he is a co-author are among the many public health studies cited.

I know many Christian physicians and medical professionals who would benefit from reading this book. Pastors and chaplains who minister to the spiritual needs of the sick would be better able to appreciate their work as an important part of healing. I plan to use this book in a study with the three young physicians I am mentoring.

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PSYCHOLOGY/NEUROSCIENCE

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THE IMMORTAL MIND: A Neurosurgeon's Case for the Existence of the Soul by Michael Egnor and Denyse O'Leary. Worthy Books, 2025. 272 pages. Hardcover; \$29.00. ISBN: 9781546006350.

The existence or nonexistence of a nonmaterial soul or mind cannot be proved or disproved. All that can be done is to muster evidence that seems to imply one answer or the other. Egnor and O'Leary have written

what they believe to be a case for the existence of a non-material soul/mind. The question remains whether the evidence provided, and their interpretations of that evidence, prove compelling.

The authors begin with Egnor's religious experience and his commitment to prove that science can create space for the supernatural. While science writer O'Leary serves as co-author, Egnor appears to rely on his own expertise to then assert a difference between the brain and the mind, assigning the mind both an independent status that later moves to the assertion of the mind's independence of death. The authors use these assertions to advance a case for the immortality of the soul, a free will that acts independent of causation, and ultimately the mind as evidence of God's design. To address a more contemporary concern, Egnor and O'Leary conclude by asserting that this understanding of the mind also challenges the possibility of artificial intelligence.

They present a "soul of the gaps" argument that begins with the assumption that if you cannot demonstrate a localized place in the brain where a mental function is specifically processed, then that mental process must be accomplished by a nonmaterial soul (or mind). Even though Egnor is a professor of neurosurgery, the neuroscience and neuroanatomy discussed appear outdated and/or selectively presented in ways that mislead the reader. In essence, this book constitutes not a rational argument based on a weighing of evidence, but a polemic treatise.

A striking example occurs through the authors' descriptions and conclusions regarding the outcome of "split brain" surgery. These patients have had all or part of their cerebral commissures (the connective pathway between the right and left cerebral cortex) severed to control the spread of epileptic seizures. The authors propose that since these persons, despite a "split brain" (commissurotomy), continue to act and think as a unified person, the mind (conflated with soul) cannot be a product of the functioning of the brain. For example, they write, "Even when the brain is split in half, many important aspects of the mind remain unified. Thus, *the mind is something that the brain isn't*" (p. 19).

However, as I presume neurosurgeon Egnor must understand, the *brain* is not split in half. Although the surgery is colloquially labeled a "split brain," only the cerebral cortex is split. The majority of the brain is not split. The diencephalon, midbrain, and brainstem are all still unified with bilateral interactions. For example, the cerebellum in the brainstem has right-left commissures