

SPRING / SUMMER 2013

THE MEDICAL EVANGELIST

A PUBLICATION OF ADVENTIST MEDICAL EVANGELISM NETWORK



Overseas Missions

Altruism and Health - Part 2

Enhancing the Patient Experience
A Team Approach to Holistic Care

9TH ANNUAL AMEN CONFERENCE

FOLLOWING THE LEADER

OCTOBER 31 - NOVEMBER 3, 2013
AIRPORT MARRIOTT • ORLANDO, FLORIDA

*What would Jesus' office look like today if He were a health care professional? How would He organize the front office?
How would His billing department work? What would the waiting room look like?*

This year at the AMEN conference we will explore how our practices can better reflect our Eternal Leader. Pastor Mark Finley and Dr. Des Cummings of Florida Hospital will lead us in this interactive exploration. We will again have an opportunity to learn from colleagues who have successfully integrated spiritual with physical healing. The AMEN program committee is pleased to present another opportunity to stimulate growth in Christian Medical Ministry.



VISIT
WWW.AMENSDA.ORG
TO REGISTER

THE MEDICAL EVANGELIST

A PUBLICATION OF ADVENTIST MEDICAL EVANGELISM NETWORK

The Medical Evangelist is the official publication of the Adventist Medical Evangelism Network. The purpose of the publication is to equip physicians and dentists to be effective medical evangelists.

EDITORS:

Brian Schwartz, MD - EDITOR IN CHIEF
Rebecca Barnhurst - ASSISTANT EDITOR

EDITORIAL COMMITTEE:

Brian Schwartz, MD - CHAIRMAN
John Chung, MD
Robert Hunsaker, MD
Neil Nedley, MD
David Otis, DDS

The Medical Evangelist is provided to AMEN members. Institutions and individuals who are not members wishing to receive the journal may request copies or a subscription by contacting AMEN at (530) 883-8061 or barnhurst@amensda.org.



ADVENTIST MEDICAL EVANGELISM NETWORK

PO Box 1114
Collegedale, Tennessee 37315
(530) 883-8061
www.amensda.org

contents

- 4 / Editorial
- 5 / Altruism and Health - Part 2
- 9 / Mission Opportunities
- 10 / AMEN Board discusses "Why"
- 12 / Enhancing the Patient Experience
- 14 / Pioneer Medical Missionaries
- 18 / Lest We Forget
- 20 / A Time of Redemption
- 21 / The AMEN Conference: A Time for Sharing
- 23 / This Little Light of Mine...
- 27 / The Daniel Challenge and The New Life
- 31 / President's Report





BRIAN SCHWARTZ, M.D.

Jesus came in personal contact with men. He did not stand aloof and apart from those who needed His help. He entered the homes of men, comforted the mourner, healed the sick, aroused the careless, and went about doing good.

The Fast Food Approach to Health Care

American healthcare is in crisis. We have the costliest care in the world, yet our life expectancy comes in about 50th for longevity. Many countries that spend half what we do on health care still exceed us in longevity. Commentators note that American “health care” is less about health and more about disease. This is not surprising, because procedures and tests are highly valued but time spent counseling patients isn’t. With our fast paced lives and fast food and high-energy drinks, our culture pushes most Americans toward unhealthy choices. Unfortunately, our healthcare system is little better. The fast food approach to healthcare makes testing and specialty procedures rapidly available, but with virtually no time for reflection on how we developed the disease in the first place, and then how we might prevent that same disease and others in the future.

In my cardiology practice, I spend a lot of time on procedures for treating disease, but I also educate my patients and encourage them in lifestyle changes. While it’s frustrating that so few will embrace real changes, some do. Occasionally I find a patient who whole-heartedly embraces a radical lifestyle change, such as Daniel. Two weeks after his heart attack, he returned to my office, excited to tell me that he hasn’t eaten meat in two weeks and fully intends to remain vegan. That was quite a change for a man who likes fast food and doesn’t know a single vegetarian. He also wants to begin regular exercise and is looking for ways to reduce his stress. I suggested a Bible study group as a stress reliever, and he was very receptive. With other patients, for whom change is hard, I may focus only on cutting back on red meat or on smoking cessation as initial steps. Little by little, they become receptive to further changes.

In order to tailor these recommendations to each patient, we must get to know them. We have to win their confidence and be perceptive enough to understand what can motivate real change and how to encourage them without pushing too hard. Every patient is different. The same is true of spiritual ministry. Without the leading of the Holy Spirit, we might push too hard or be insensitive. Jesus was the greatest physician, and He often first attended to physical and health needs before imparting spiritual blessings.

We know the quotes; the key is to apply them:

“Christ’s method alone will give true success in reaching the people. The Saviour mingled with men as one who desired their good. He showed His sympathy for them, ministered to their needs, and won their confidence. Then He bade them, ‘Follow Me.’”—*The Ministry of Healing*, 143.

“Jesus came in personal contact with men. He did not stand aloof and apart from those who needed His help. He entered the homes of men, comforted the mourner, healed the sick, aroused the careless, and went about doing good. And if we follow in the footsteps of Jesus, we must do as He did. We must give men the same kind of help that He gave.”—*The Review and Herald*, April 24, 1888.

Change is coming to the American healthcare system; it has to. Those willing to meet people’s needs will still find a place to work and, perhaps, will be on the cutting edge of leading the change from disease-focused care to true healthcare.

Brian Schwartz, M.D.

by Robert Hunsaker, MD

Altruism and Health – Part 2



ROBERT HUNSAKER, MD
A graduate of Loma Linda University, Dr. Hunsaker specializes in cardiac anesthesiology. He is currently living in the Boston area with his lovely wife Andi.

In our Science and Inspiration article, “Altruism and Health” Part 1 (The Medical Evangelist – Fall 2012), we considered the Biblical axiom, “it is more blessed to give than to receive” (Acts 20:35). This sounds like good motivation for conducting one’s life more or less by the golden rule. We learned that the “blessing” spoken of in Acts is not limited to heavenly rewards. There is a wealth of scientific data which demonstrates that giving is, quantifiably, better than taking, even in the here and now.

The Medline search term for “giving,” or “benefitting others without concern for consequences to the self” is “altruism.” In study after study, as well as in various business models, we saw that altruism actually leads to a longer, healthier, more satisfactory quality of life. Let me reiterate that the Bible is not just telling us how we are supposed to live if we want God to let us into heaven. Inspiration is giving us a fundamental principle regarding the way our Creator designed us to function at our full potential.

In Part 1 we saw that the writings of Ellen White illuminate and expand upon the biblical concept of unselfish giving, or altruism, as the principle of life in God’s universe:

All things both in heaven and in earth declare that *the great law of life is a law of service*. The infinite Father ministers to the life of every living thing. Christ came to the earth “as He

that serveth” (Luke 22:27). The angels are “ministering spirits, sent forth to minister for them who shall be heirs of salvation” (Hebrews 1:14). *The same law of service is written upon all things in nature*. The birds of the air, the beasts of the field, the trees of the forest, the leaves, the grass, and the flowers, the sun in the heavens and the stars of light—all have their ministry. Lake and ocean, river and water spring—each takes to give.

As each living thing in nature ministers thus to the world’s life, it also secures its own. “Give, and it shall be given unto you” (Luke 6:38), is the lesson written no less surely in nature than in the pages of Holy Writ.

--E. G. White, *Education* p. 103, (emphasis mine)

While we understand that the principle of altruism is written into the fabric of reality by God’s hand, secular humanism would have us believe that altruism is merely a veiled form of self-preservation. Humanism assumes that altruistic behavior is actually a façade that covers a conscious, or unconscious, or instinctual drive to preserve ourselves by helping others. In other words, “I’ll scratch your back because I assume that you’ll respond by scratching my back in the future.” In this materialistic worldview, altruism is nothing more than a subtle form of bribery.

Finally, in Part 1, we saw that there is one way to tell the difference between truly altruistic behavior, and giving which is a veiled means of self-preservation. Circumstances where

the eternal destiny of the self is put at risk reveal the true motives. Calvary is where God revealed that He is altruistic to the core.

In the light from Calvary it will be seen that the law of self-renouncing love is the law of life for earth and heaven; that the love which “seeketh not her own” has its source in the heart of God.

--Ellen White, *Desire of Ages*, p. 21

The Savior could not see through the portals of the tomb. Hope did not present to Him His coming forth from the grave a conqueror.

--Ellen White, *Desire of Ages*, p. 753.

In the book of Job, the scriptures show that this question of the real motives for altruistic behavior will be made plain. Satan’s charges against Job can be summed up this way: the accuser said that Job was only following God and helping others for the purpose of receiving blessings from God. He implied that Job’s motivation

The results of the CLOC study demonstrated that individuals who reported providing tangible forms of help to friends, relatives and neighbors, reduced their mortality risk by 50%!!



was not heart – love for God, but rather selfishness. That scenario is replayed in our own lives every day as Satan seeks to discredit the motives of each of God’s servants.

Because there is so much more to be said about this fundamental topic, we decided to devote another “Science and Inspiration” article to the study of genuine altruism.

One of the best studies in the area of altruism research and mortality risk is the Changing Lives of Older Couples (CLOC) Study. This study followed over 400 older married couples for 5 years.

One of the factors that made the CLOC one of the most highly respected studies in altruism research is the wide variety of variables that it followed, including physical health, health behaviors, mental health, and personality traits. This allowed the study investigators to control for many confounders in the study’s conclusions.

The results of the CLOC study demonstrated that individuals who reported providing tangible forms of help to friends, relatives, and neighbors, reduced their mortality risk by 50%!! Imagine a pill that you could prescribe that would reduce mortality by 50% over 5 years in older individuals! It would make



Crestor and Viagra seem like small change to the pharmaceutical companies.

The relationship between mortality and the providing of support for one's spouse and others was impressive. The more time one spent providing support for others, the greater the reduction in mortality. Interestingly, in this study there was no positive association between receiving support and a reduction in mortality.

The beneficial effects of giving remained after controlling for a variety of other potential confounding factors that are typically associated with mortality such as: age, gender, socio-economic status, race, self-rated health, functional health,

It truly was the giving, the altruism, the unselfishness that resulted in the reduction in mortality.

smoking, drinking, exercise, depression, anxiety, subjective well-being, social contact, dependence on one's partner, and individual differences such as extroversion, agreeableness, openness, locus of control,

self-esteem, and emotional stability. This makes the conclusions more significant in that there weren't any obvious differences between the receivers and the givers of support – except that one was giving and the other was receiving! It truly was the giving, the altruism, the unselfishness that resulted in the reduction in mortality.

A sub-study of CLOC tested the relationship between giving and depression. Did the benefits of giving social support to others extend to coping with spousal loss, as indicated by faster recovery from depressive symptoms following bereavement? "Results showed an interaction between giving and grief. For respondents experiencing high grief, reports of giving were significantly associated with faster recovery from depressive symptoms. The benefit of giving was not found for individuals experiencing low levels of grief after spousal loss." Again, none of the confounders explained the reduction in depressive symptoms after spousal death except the amount of giving engaged in.²³

Another interesting area of altruism research is in HIV positive patients. In a retrospective study of HIV patients, "volunteering was related cross-sectionally to long survival with HIV. In this analysis, a group of 79 long-term survivors of AIDS were compared with a group of people who had HIV with a normal course of the illness (N=200). Those in the long survivor group were significantly more likely to have volunteered than those in the normal course comparison group ($r = .18, p < .01$). Interestingly, those who volunteered had better mental health: Volunteering was significantly associated with less depressive symptoms, less anxiety, and less perceived stress."⁴⁵

It was shown that actively caring for others predicted slower disease progression in HIV over 2 years (both slower loss in CD4



counts and slower increase in viral load). But expressing concern for others merely, while not actively caring for them did not predict either CD4 or viral load change.⁶ I guess actions don't just speak louder than words, they empower you to keep on acting in the future!

The conclusions of the HIV and altruism researchers was, "Thus, there is some indication that volunteering, giving to charities, and displaying caring for others are related to indicators of better physical health (i.e., long survival, higher CD4, lower VL) and less distress in HIV. In addition, altruism measured as a personality variable was associated with better control of viral load over 4 years. The behaviorally oriented variables appear to have the stronger relationships (i.e., caring for others rather than concern for others)."⁶

I hope all this empirical data convinces you of the truth that God's law is not an arbitrary set of rules made up at random by God to test our sincerity, our will power, or to prove His authority over us. God's law of love is established as a set of physical realities as real as the laws of gravity and health. It actually is true that the law of

God's law of love is established as a set of physical realities as real as the laws of gravity and health.

love is the law of life for us and for the universe.

There is in fact a law of life (altruism, giving, unselfishness, love) and a law of death (taking, selfishness, sin) as Paul describes it in Romans 8:2. Jesus told us that in losing (giving) our lives we will actually save them. "Whoever seeks to save his life will lose it, and whoever loses his life will preserve it" (Luke 17:33). This doesn't merely mean that if we're martyrs for Jesus He will raise us up at the resurrection, at the 2nd coming. It also means that when we expend our time, money, and energy for the benefit of others, we are actually building ourselves up (saving ourselves) physically, mentally, and emotionally. We are better off personally

when we give of ourselves altruistically for the good of others. The motivation isn't to get the benefits for ourselves, but the result and blessing is that benefits come.

When we step back and think about how God has structured the world, and the universe, to function on the basis of altruism and giving, we see that God did things the best way. Even when my focus shifts back towards myself, I'm glad that the best results actually come from giving. I feel better when I'm giving. We all feel better when we're giving. In giving, we are just following in the footsteps of the Great Giver Himself – God and His Son Jesus. May we renew our altruistic energies in light of what we've learned from inspiration and science. May we accurately represent the goodness of God as we give of our time and money and energy to tell others about the law of life for the universe, and its wonderful Author, Jesus Christ.

1. Brown, S.L., et al. (2003). *Providing support may be more beneficial than receiving it: Results from a prospective study of mortality.* *Psychological Science*, 14, 320-327.
2. Post, S.G. *Altruism and Health.* 2007. 307.
3. Brown, S.L., et al. *Coping with spousal loss: The buffering effects of giving social support to others.* *Pers Soc Psychol Bull.* 2008 Jun;34(6):849-61
4. Post, S.G. *Altruism and Health.* 2007. 75.
5. Ironson, G, et al. 2002. *The Ironson-Woods spirituality/religiousness index is associated with long survival health behaviors, less distress, and low cortisol in people with HIV/AIDS.* *Annals of Behavioral Medicine*, 24(1), 34-48.
6. Post, S.G. *Altruism and Health.* 2007. 76-78.

Mission Opportunities

Mexico Missions and Beyond

Mexico Missions and Beyond is looking for one dentist and one doctor to assist with clinics from December 21-January 6. Each year they have health clinics, VBS, evangelistic seminars, and construct several churches.

For more information, please go to www.mexicomissionsadventista.org

Amazing Facts Center for Evangelism

Amazing Facts Center for Evangelism is teaming with Water of Life to drill wells and install water pumps in Guatemalan villages to provide clean water. This May they need volunteer healthcare professionals to both teach and minister to the health needs of the Guatemalan people. Doctors, nurses, ophthalmologists, and dentists are greatly needed for this work.

For more information, see www.amazingfacts.org and http://www.youtube.com/watch?v=TveXip_cNko. Please contact Cathy at 916-209-7286 or e-mail her at cathyq@amazingfacts.org.

Maranatha Mission Projects

Physicians, nurses, dentists and other healthcare professionals are needed on the following Maranatha mission trips.

Please contact Maranatha directly for more information:

www.maranatha.org,
email: volunteer@maranatha.org
or call: 916-774-7700.

1. **Young Adult Project** - August 1-14, 2013 - Dominican Republic; Age range 18 - 34
2. **Ultimate Workout 23** - July 16-29, 2013 - Ecuador
3. **Dominican Republic Open Team** - November 7 - 19, 2013

Dine Outreach: Jul 26 - 27, 2013

We are holding a free medical and dental clinic in Page, AZ among the Navajo people together with the Granite Bay SDA church (Sacramento area church). For two days, on Friday and Saturday, we'll be needing dentists, medical doctors and nurses to assist with a free clinic.

Please contact dkwon@amensda.org for more information.

Bangalore, India:

Sep 29 - Oct 8, 2013

Obesity in India is skyrocketing. We need doctors, dentists, therapists and nurses to conduct free clinics, health expos and to be involved with the development of a lifestyle clinic and education center. Non-medical volunteers are needed as well!

Please contact dkwon@amensda.org for more information.



AMEN Board discusses “Why”



DR. EDWIN NEBBLETT

currently practices family medicine in New Mexico. His passion for sharing the principles of good health is surpassed only by his desire to live and share the practical gospel. Dr. Nebblett and his family regularly speak at churches and campmeetings, helping families to embrace Jesus Christ as an ever-present help in life's challenges. Edwin is married to Maria; the couple have four young-adult children.

Typically in the spring, the AMEN Board meets for face-to-face discussions, and to plan for the year. This year, on February 22 & 23 the board met at beautiful Weimar Center of Health and Education in northern California. A lot of ‘usual business’ was covered, including the financial status of the organization, updates to the bylaws, and creation of committee guidelines. The Board also received reports from Life and Health Network, our Journal, and from our annual conference planning committee. In addition, we were blessed on Sabbath by invited guest speaker Dave Fiedler who spoke about the power of “influence.”

One exciting new report is the rapid pace of our growth internationally. Specifically, we discussed the new chapters of AMEN in Australia, England, Nigeria (already in place) and Germany (in the planning stages). We also discussed potential AMEN involvement with the General Conference of Seventh-day Adventist’s NY13 evangelistic thrust. We discussed methods and strategies AMEN can help with health evangelism among our members and within the church as a whole.

The greatest energy, however, was focused on two discussions. One involved student membership. Invited to our spring board

meeting for the first time was the student AMEN representative for Loma Linda University, School of Medicine, third year student John Shin. We discussed at length how to support the students that have an interest in missionary and medical evangelism work. Ideas such as a mentorship program, rotations by students through AMEN member practices and how to reach medical students outside of LLU were discussed. Mr. Shin also blessed us with his testimony during Friday night vespers.

We discovered that understanding our “Why” is critical to why we do what we do, and how we do it.

The second dealt with the question “Why”. Why does AMEN exist? Why do clinicians join AMEN? Why do members do what they do? We explored the “Why, What, and How” of our work. We discovered that understanding our “Why” is critical to why we do what we do, and how we do it. When we understand our “why”, it inspires, energizes, ignites



passion, and brings commitment, focus and direction. The group had an engaging discussion that was helpful in bringing the board together in a better understanding of “Why” AMEN exists at this time of earth’s history.

Here is the challenge for every medical professional. Why do you do what you do? Are you driven by a desire to hear the words “Well done, good and faithful servant?” What motivates you to get up every day and do the work that is before you? How is “what” you do, furthering your “Why”?

Ellen White tells us, “the true physician is an educator. He recognizes his responsibility, not only to the sick who are under his direct care, but also to the community in which he lives. He stands

as a guardian of both physical and moral health. It is his endeavor not only to teach right methods for the treatment of the sick, but to encourage right habits of living, and to spread a knowledge of right principles.” Ministry of Healing p. 125.

But there’s more. “The Christian physician should regard his work as exalted as that of the ministry. He bears a double responsibility; for in him are combined the qualifications of both physician and gospel minister. His is a grand, a sacred, and a very necessary work.” Ellen White, Gospel Workers p. 360

How do we see ourselves in our day-to-day routine? Do we see ourselves involved in a “grand” and “necessary” work? The AMEN board took a hard look at our organization, and our lives. We want to be about our

Father’s business. We have a responsibility to educate, encourage and equip ourselves, and others, to finish the work. Each one of us left the meeting with a desire to be about our “Why”, and to accomplish the work that God wants us to do—individually and as an organization— as we wait for His soon return. Won’t you join us?

Why do you do what you do? Are you driven by a desire to hear the words “Well done, good and faithful servant?”

Enhancing the Patient Experience

A Team Approach to Holistic Care



MARK FINLEY, D.D. *has served as a Vice-President for the General Conference of Seventh-day Adventists, Speaker-Director of It Is Written Television, medical evangelist and pastor. He is a renowned evangelist, having presented more than 150 evangelistic series around the world. Medical evangelism is near and dear to Finley's heart. He began integrating smoking cessation, health expos, mini health talks, etc into his evangelistic meetings early in his ministry. He routinely brings physicians and dentists as part of his team. Pastor Finley and his wife Teenie, have 3 grown children and 5 grandchildren.*

Just over one year ago I had knee replacement surgery. It was not the most pleasurable experience I have ever been through. There was one thing my orthopedic surgeon shared with me that may seem insignificant to some but to me it was huge. In one of our early visits he explained how he had performed hundreds of knee replacement surgeries but now had a new perspective on the “patient experience” because he recently had knee replacement surgery too. He then described what he had gone through, the stages of healing, the anticipated recovery time and the outcomes I could expect. I felt confident in a physician who had been through what I was going to experience. He was thinking like a patient. Of course I am not suggesting every healthcare provider must get as sick as their patients to really impact their lives. Here is my point. It may be helpful to completely rethink the patient experience. What is it like to be the patient and not the health care provider?

What do patient's experience from the time they enter your office or practice until the time they leave? Does the office environment contribute to the overall message of healing or is the “waiting room” just that, a place where patients wait bored, idly flipping through a magazine until they can see their physician or dentist? How many meaningful interactions will each have with

the healthcare team to improve the quality of their life and health? Most physicians and dentists are extremely busy. The average time for a primary care patient visit is between 15-16 minutes per patient. Are there ways that physicians can enhance the time with their patients to make a more meaningful impact on their total health? How can the entire office team develop a holistic vision of health which is patient focused and concerned about each individual's total well being? Are there ways for healthcare providers to support their patients outside the office with only minimal effort and expense?

During the AMEN Conference in Orlando, Florida from October 31 to November 3, Des Cummings, President of the Florida Hospital Foundation and I will tackle some of these persistent questions and attempt to provide meaningful answers. We will simulate the patient experience and share practical concepts of enhancing every aspect of the patient's experience with particular emphasis on nurturing an interest in physical, mental, emotional and spiritual health. We will also set up an office prototype as an “Imagination Station” where ideas generated in the seminar can be pasted on the walls to allow each participant to contribute creatively. There will also be short testimonies from practicing physicians and dentists who are implementing the principles of



comprehensive health in their practices. Additionally, innovative ideas on sharing holistic health principles will be presented for physicians and dentists who may not practice in an office setting but may serve as specialists in a hospital or an academic institution. There are aspects of Florida Hospital's Creation Health model that apply to all disciplines of healthcare in all settings.

This seminar will be supported by four central pillars: identity, facility, processes and follow-up. Identity relates to the corporate branding of the entire practice. When patients think of your practice do they immediately think of it as a place of both health and healing – a place to get well and stay well? Enhancing the patient's experience through the facility relates to what Disney calls archa-theming.

Archa-theming is reinforcing the mission of the practice through the atmosphere in the facility. Processes focus on all aspects of interactions with the patient both from a treatment and business perspective. Follow up relates to the continued service to, and relationship with, the patient after they leave the physician's or dentist's office. This practical, participatory learning experience will enhance your practice and enrich your life personally. It has the potential of opening new vistas of understanding on how to lead your healthcare team to more deeply understand and implement the ministry of Christ in the 21st century.

9TH ANNUAL AMEN CONFERENCE FOLLOWING THE LEADER

OCTOBER 31 – NOVEMBER 3, 2013
ORLANDO AIRPORT MARRIOTT
7499 AUGUSTA NATIONAL DRIVE • ORLANDO, FLORIDA 32822

Are you a physician or dentist interested in learning how to effectively share Christ with your patients? Then the AMEN conference is for you! Attend plenary sessions and small group workshops where speakers will share their own journey to becoming a medical evangelist and how a passion for sharing Christ has enhanced their daily practice.



The Adventist Medical Evangelism Network (in connection with Kettering Health Network) is pleased to offer up to 8 hours of continuing medical education credits at the 2013 AMEN conference.

Kettering Health Network Accreditation Statement

The Kettering Health Network is accredited by the Ohio State Medical Association (OSMA) to provide continuing medical education for physicians. The Kettering Health Network designates this live activity for a maximum of 8 hours AMA PRA Category 1 Credit™. Physicians should only claim credit commensurate with the extent of their participation in the activity.



We encourage you to attend the AMEN conference with your family. Children's programs will be offered throughout the conference. Please visit amensda.org for more information and to register yourself and your children.

REGISTER ONLINE TODAY! amensda.org

Pioneer Medical Missionaries: *Doctors Daniel and Laretta Kress*



DR. FRED BISCHOFF

worked as a preventive medicine physician for 21 years, and is a clinical faculty member of the School of Medicine and the School of Public Health of Loma Linda University. He is the secretary of Health Ministry Foundation, Inc.

They were a young couple in their mid-twenties, with two young daughters, when they first met Dr. John Harvey Kellogg. It was 1887. Daniel and Laretta Kress' life in Michigan the last four years had been one of rapid changes—marriage, moves, births of children, Daniel's becoming a Baptist preacher then pastor, Laretta's finding the Bible Sabbath and embracing it, Daniel's accepting it some months later. Daniel attended his first Seventh-day Adventist camp meeting in Grand Rapids that year, met some of the old pioneers of the church, heard Dr. Kellogg speak on diet, and decided to discard meat, tea, coffee, and condiments. By the summer of 1888 they were baptized into the SDA Church in Flint.

Their involvement in the evangelistic, educational, and health ministries developed rapidly. Laretta took cooking classes from Mrs. E. E. Kellogg. Daniel began front-line evangelism, raising up new members and churches with a more seasoned worker. They were asked to take charge of a new French-German school opening in Battle Creek. Laretta began teaching in a health and temperance course at the Sanitarium. Daniel attended the 5-month Ministerial Institute conducted in Battle Creek after the Minneapolis 1888 Conference. Daniel recounted these meetings, and the vital heart

work that in a sense launched their medical careers:

During this time I formed the acquaintance of Elders A. T. Jones, E. J. Waggoner, and Uriah Smith, who were principle instructors. It was at this institute that I formed the acquaintance of Mrs. E. G. White. Some very precious truths on the subject of righteousness by faith and religious liberty were brought out by Elders Waggoner and Jones. More than once the Spirit of God so rested upon us that many were in tears. With hearts subdued and sins confessed, it was not difficult for God to teach important truths.... Hearts were made tender, sins were confessed, and the way was prepared for the reception of truth. At the close of the institute, many were rebaptized. We were experiencing a new conversion. Sins appeared exceedingly sinful. We considered it a duty again openly to confess that from then on we would walk in newness of life. My wife and I were among the number who were rebaptized.

Dr. Kellogg invited them both to take the medical course he was beginning, a four-year program, with its first year at Battle Creek, and the last three at Ann Arbor. What was the doctor's vision in this fledgling training program? He must have caught the picture that Ellen White would write of five years later, while the Kresses were in the midst of their training.

It is important that everyone who is to act as a medical missionary be skilled in ministering to the soul as well as to the body.

In almost every church there are young men and women who might receive education either as nurses or physicians. They will never have a more favorable opportunity than now. I would urge that this subject be considered prayerfully, that special effort be made to select those youth who give promise of usefulness and moral strength. Let these receive an education at our Sanitarium at Battle Creek, to go out as missionaries wherever the Lord may call them to labor. It should ever be kept before them that their work is not only to relieve physical suffering, but to minister to souls that are ready to perish. It is important that every one who is to act as a medical missionary be skilled in ministering to the soul as well as to the body. He is to be an imitator of Christ, presenting to the sick and suffering the preciousness of pure and undefiled religion."

The Battle Creek medical facility, barely 20 years old at the time, had been build up through sacrifice from very simple beginnings, at the clear direction of God. Ellen White spoke of its standing and purpose nine years before the Kresses first visited it.

Oct. 9, 1878, I was shown that the Sanitarium at Battle Creek has been established by the providence of God, and that his blessing is indispensable to its success. The physicians



Order in the picture: Standing: William A. George, Fred E. Braucht, Edgar Caro, David Paulson, Arthur W. Herr, Dr. John Harvey Kellogg, F. B. Moran, Alfred B. Olsen, George W. Burleigh; Sitting: Howard F. Rand, Miss Abbie Winegar, Mrs. Laretta Kress, Dr. J. H. Neale, Daniel Kress

are not quacks nor infidels, but men who are thoroughly educated, and who understand how to take care of the sick; men who fear God, and have an earnest interest for the moral and spiritual welfare of their patients.

The Kresses' four years in medical school included duties outside of study. When the twenty Battle Creek students (from Arkansas, Kansas, Maine, Michigan, Minnesota, New York, Ontario, New Brunswick, Australia, and New Zealand) went to Ann Arbor for the last three years, they all roomed together in the same house, with Laretta the matron, and Daniel the dean of men and residence chaplain. During summer breaks they were busy. One summer Laretta worked at two camp meetings, in charge of the dining tent. The summer of 1893 they both went to Chicago "to take charge of the exhibit in the Anthropological Building at the World's Fair for the Battle Creek Sanitarium; also to have charge of the Sanitarium headquarters at 33 Cottage Place." During the fair Dr. Kellogg opened a medical mission in Chicago to help the poor. The fair had brought a great influx of people into the city. Daniel was one of

three who volunteered to work at Kellogg's Chicago mission for several months in a basement back of Pacific Garden Mission. His work there was one of the brightest experiences of his life, with many cases of "brands plucked from the burning."

They graduated June 21, 1894, from the University of Michigan Medical School. Laretta was vice president of the class. Thirteen Battle Creek students had their pictures taken with Dr. Kellogg: Fred E. Braucht, George W. Burleigh, Edgar Caro, William A. George, Arthur W. Herr, Daniel Kress, Mrs. Laretta Kress, F. B. Moran, Dr. J. H. Neale, Alfred B. Olsen, David Paulson, Howard F. Rand, Miss Abbie Winegar.

The Kresses returned to Battle Creek, and worked there for almost five years, Laretta in obstetrics and gynecology, and in charge of the Haskell Home for Children, and Daniel in gastro-intestinal disorders, and treating drug addiction with physiological means and the gospel. He testified that he never saw a permanent cure of drug addiction without the gospel. Daniel recorded at length the healing of



Family Picture as We Left Australia
Ora and Paul (adopted son) standing, John in center sitting

Mr. S. M. I. Henry, a national evangelist of the Woman's Christian Temperance Union, her struggle to understand the significance of Ellen White's testimonies, and the amazing understanding God gave her. He wrote of his work with her after her healing:

After this Mrs. Henry and I attended camp meetings and together conducted revival services. These meetings were very much out of the ordinary and were witnessed by an outpouring of God's Spirit and corresponding reforms in the habits of living of those who were converted there.

Daniel and Laretta responded to a call to begin medical work in England in 1899, moving there with their two daughters, and an adopted son, even though their oldest daughter was sick with endocarditis. They spent their time lecturing until demand became great enough to warrant creating a constituency and an institution, which happened within the year. The London sanitarium "Dunedin" was opened September 2, in Meadvale, Surrey Hills, in what had been a women's college. The next month they buried their oldest, and continued working. Laretta conducted

He was at death's door, when a day of prayer was appointed, and he was anointed, and recovery came.

cooking classes and gave lectures. Daniel began a new health journal *Life and Health*, editing it at the London city office. The next year Daniel's health failed, and pernicious anemia was diagnosed, a death sentence in the years before Vitamin B12 was discovered. The Kresses returned to Battle Creek, and Daniel improved.

They responded to a call to Sidney, Australia, to help open the developing sanitarium there. Daniel's RBC count was their sign to go! However, before the end of 1901, he relapsed. He was at death's door, when a day of prayer was appointed, and he was anointed, and recovery came. He also received a letter from Ellen White

advising him not to go to extremes in health reform, and to use eggs (cooked or raw) and take them uncooked with grape juice. "This will supply that which is necessary to your system. Do not for a moment suppose that it will not be right to do this." The new sanitarium was opened December 1, 1902 in an orchard 7 miles outside Sydney, the same year their son John was born. They combined nurses training and inpatient work with public lecturing. "These lectures brought the knowledge to many who needed help which the institution could give. There were the rich and the poor alike gathered for the benefits we could give them. Again and again the question was asked, 'Where did you get such excellent nurses?'"

Daniel traveled extensively, speaking at camp meetings and in public venues. He collaborated closely with church leaders, working with G. A. Irwin and O. A. Olsen. 1905 was a peak year for correspondence from Ellen White, with the Kresses receiving 15 letters from her that year. (They received 77 in total from Ellen White between 1900 and 1911.) At some point Daniel began collecting some 40 letters (only two addressed to him) and manuscripts from Ellen White, in what has become known as the Kress Collection in Ellen White's Miscellaneous Collections in her published writings.

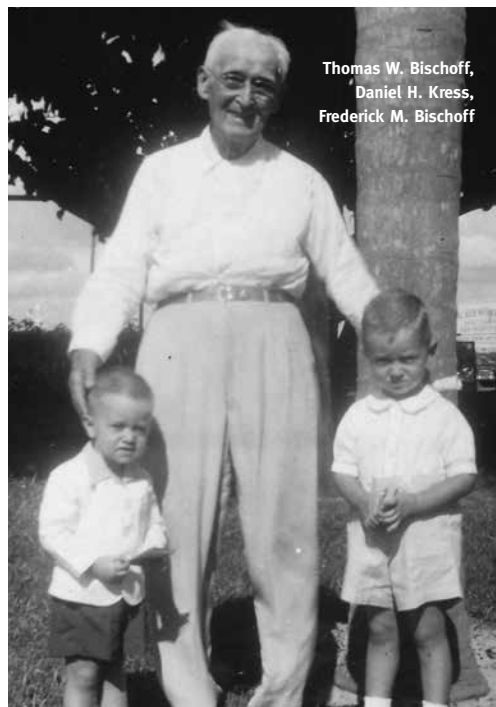
In 1907, during a tumultuous decade that saw their mentor and alma mater sanitarium lost to the mission of the church, they were called to Takoma Park, Maryland, to assist in the new sanitarium that was opening near the nation's capital. Daniel was to be the first medical superintendent of the new facility. On leaving Australia, Daniel received a letter from the health commissioner of New South Wales, in which he acknowledged his public health impact with the words,

“... you have done more to help the people of Australia than any other man that has ever visited this country.”

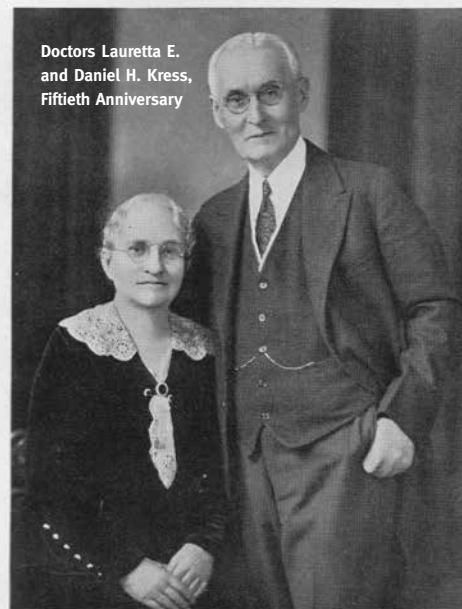
The Kresses spent most of the rest of their practice years in Maryland. Daniel served as medical secretary for the GC and for the Atlantic Union, and traveled extensively. Ellen White encouraged him to combine sanitarium work with public lecturing in the large cities in the East. By 1926, Laretta had a large obstetrics practice, delivering about 3450 babies. For a brief time in 1911-1912 she taught at the College of Medical Evangelists in Loma Linda, California. In 1932 on the occasion of Daniel's 70th birthday, W. W. Prescott recalled the Kresses' time with him in England. “This was the first time, to my knowledge, that the health work and evangelical work were united in the organized work, all workers being paid by the mission.” It was during this final decade of theirs in Takoma Park that my father, Martin E. Bischoff, trained in nursing (1930-1933), and became acquainted with Dr. Daniel Kress.

The Kresses retired to Florida in 1939 and remained active for some years traveling, writing, and speaking. The Kress Memorial Church in Winter Park

Never has my confidence in the spirit of prophecy been more decided than it is at the present time.



Thomas W. Bischoff,
Daniel H. Kress,
Frederick M. Bischoff



Doctors Laretta E.
and Daniel H. Kress,
Fiftieth Anniversary

Doctors Laretta E. and Daniel H. Kress
Fiftieth Anniversary

was named in their honor in 1954. In the early 1950s Dr. Kress would occasionally travel to Avon Park, where my father, by then also trained as a Physical Therapist, would treat him with the old modalities he learned in Takoma Park—fomentations, contrast sprays, Russian bath, electric light bath, and massage. He would tell Dad each time, “Inasmuch as you have done it unto one of the least of these, you have done it unto Me”, and shake his hand. Sometime around 1952/3 Dr. Kress' picture was taken with my brother and me.

They died a year apart, Laretta in 1955 and Daniel in 1956. At the end of his collection of Ellen White's writings, he penned these words--

I am fully convinced that the medical work today would advance more rapidly among our own people as well as on the outside by placing it in its proper setting in the message.

Never has my confidence in the spirit of prophecy been more decided than it is at the present time. I have witnessed to some extent the possibilities of our health message, when combined with the third angel's message of which it is a vital part.

Themes from the Kress Collection (from Ellen White's letters and manuscripts Dr. Daniel Kress collected during his life)

Unselfishness is the Core

“The physicians connected with our Sanitariums and medical missionary work have by God's providence been bound to this people, whom he has commanded to be a light to the world. Their work is to give all that the Lord has given them -- to give, not as one influence among many, but as the influence through God to make effective the truth for this time.” {KC 54.1}

Truth is Paramount

“The medical practitioner should in all places keep his religious principles clear and untarnished. Truth should be paramount in his practice. He is to use his influence as a means of cleansing the soul by the healing beams of the Sun of Righteousness. When a time comes that physicians cannot do this, the Lord would have no more medical institutions established among Seventh-day Adventists.” {KC 60.1}

Lest We Forget



PHIL MILLS, MD is a dermatologist in private practice. Throughout his time as a clinician, Dr. Mills has always found his greatest joy in soul winning. For him, nothing else compares. One of the founders of AMEN, Dr. Mills is convinced that God is using this organization to catalyze a revival of medical missionary work that will impact outreach on every level - family, church, clinic, and community. He prays for the descent of the Holy Spirit upon medical evangelists all over the world to empower them to do their part in the finishing of the gospel commission.

Without the constant support of Ellen White, there would not be an extensive medical evangelistic work by Seventh-day Adventists. She played a pivotal role in raising awareness and funds for the establishment of medical institutions. By her letters and judicious counsels the work grew and prospered.

Medical evangelism was a major focus of Ellen White. She wrote more columns inches on medical missionary work than any other single topic. Post-humanously there have been a number of compilations of her writings in this area.

The following quiz will give you an opportunity to review your knowledge of some of the medical evangelism books written by Ellen White or compiled from her writings, as well as their history. This quiz was developed as the introduction of a talk reviewing the book Ministry of Healing. It was presented at the spring AMEN board meeting in 2011.

1. Which of the following books was specifically dedicated to nurses?

Select the one best answer:

- A. Christian Temperance and Bible Hygiene
- B. Counsels on Diet and Foods
- C. Counsels on Health
- D. Healthful Living
- E. The Health Food Ministry
- F. Medical Ministry
- G. The Ministry of Healing

2. Which of the following books was specifically dedicated to physicians?

Select the one best answer:

- A. Christian Temperance and Bible Hygiene
- B. Counsels on Diet and Foods
- C. Counsels on Health
- D. Healthful Living
- E. The Health Food Ministry
- F. Medical Ministry
- G. The Ministry of Healing

ANSWERS: 1. G 2. G 3. A 4. D 5. D 6. B 7. A 8. C 9. C 10. B

3. Which of the following books was compiled by Dr. John Harvey Kellogg?

Select the one best answer:

- A. Christian Temperance and Bible Hygiene
- B. Counsels on Diet and Foods
- C. Counsels on Health
- D. Healthful Living
- E. The Health Food Ministry
- F. Medical Ministry
- G. The Ministry of Healing

4. Which of the following books was compiled by Dr. David Paulson with the assistance of medical students?

Select the one best answer:

- A. Christian Temperance and Bible Hygiene
- B. Counsels on Diet and Foods
- C. Counsels on Health
- D. Healthful Living
- E. The Health Food Ministry
- F. Medical Ministry
- G. The Ministry of Healing

5. Which of the following books did Ellen White specifically recommend for a school textbook?

Select the one best answer:

- A. Christian Temperance and Bible Hygiene
- B. Counsels on Diet and Foods
- C. Counsels on Health
- D. Healthful Living
- E. The Health Food Ministry
- F. Medical Ministry
- G. The Ministry of Healing

6. Which of the following was compiled for a class taught at the College of Medical Evangelists (now LLU) after Ellen White died?

Select the one best answer:

- A. Christian Temperance and Bible Hygiene
- B. Counsels on Diet and Foods
- C. Counsels on Health
- D. Healthful Living
- E. The Health Food Ministry
- F. Medical Ministry
- G. The Ministry of Healing

7. Which of the following books was a compilation of both James White's writings and Ellen White's writings?

Select the one best answer:

- A. Christian Temperance and Bible Hygiene
- B. Counsels on Diet and Foods
- C. Counsels on Health
- D. Healthful Living
- E. The Health Food Ministry
- F. Medical Ministry
- G. The Ministry of Healing

8. Ministry of Healing is an update of which prior health volume?

Select the one best answer:

- A. An Appeal to Mothers/A Solemn Appeal
- B. A Call to Medical Evangelism
- C. Christian Temperance and Bible Hygiene
- D. Counsels on Diet and Foods
- E. Counsels on Health
- F. Healthful Living
- G. The Health Food Ministry
- H. Medical Ministry

9. Which of the following books has a chapter devoted to dress?

Select all that apply:

- A. An Appeal to Mothers/A Solemn Appeal
- B. A Call to Medical Evangelism
- C. Christian Temperance and Bible Hygiene
- D. Counsels on Diet and Foods
- E. Counsels on Health
- F. Healthful Living
- G. The Health Food Ministry
- H. Medical Ministry
- I. The Ministry of Healing

10. What physician did Ellen White ask to assist with the preparation of the book Ministry of Healing?

Select the one best answer:

- A. John Harvey Kellogg
- B. David Paulson
- C. Percy Megan
- D. Edward Sutherland
- E. None of the above

Please visit www.amensda.org for more information on Dr. Mills' talk reviewing the book Ministry of Healing.

A Time of Reflection, A Time of Redemption



DR. DICK MILLER

graduated from Loma Linda University School of Dentistry in 1976. He practices general dentistry near Calhoun GA. Dr. Miller has been married to his wife Patti for 32 years. He has 5 sons.

After turning 66 years old this past December and still in excellent health, I realize my professional career is coming to an end. I can look back and thank God for the blessed life He has given me. I can also be grateful for some painful years, as they provided wisdom and an arena for spiritual growth.

And though I desire to continue working, I increasingly anticipate the time when God will provide his appointed designate to step into my practice. Though the context is completely different, I well understand John the Baptist's words in reference to an associate/new owner: "He must increase but I must decrease." It is, I have learned, a principle of life.

Since joining AMEN in 2007 and attending my first AMEN conference near Orlando, Florida, both my personal and professional lives have been impacted. Especially precious has been my time attending AMEN meetings and developing a mentored relationship with one of AMEN's leaders.

Looking back I must confess I never felt a "calling" to go into dentistry. Yet, I can clearly see the Lord's provision and leading from the time of my acceptance to dental school (LLUSD '76), through the years of personal wandering in the wilderness, to these more recent years where I sense a purpose that extends far beyond the "bottom line." I did perhaps what many of you did: I simply decided, probably even without the token lip service of asking God, to become a dentist, since that was where my gifts were. How wonderful to know that even in the ignorance of God's divine purpose, He blends our self-centeredness with His will to restore us to Himself. As I look back over the last 47 years, which includes ten years as a dental technician, and 37 years in dentistry, there is no doubt that the hand of God not only preserved my life, but He also made a way for me, not giving up on me, but growing me "from glory to glory" into His image.

And God's "calling" on my life? His "calling" was intertwined with another foundational principle that has provided a far greater dimension to my life than any new dental procedure or the

latest dental gadget could ever provide, and the joy experienced freely moves me to tears. This second principal of life is the necessity of being actively involved in Christian service. In 1996, I began doing weekly evangelism in a maximum security prison, and since becoming a member of AMEN, my "calling" has extended into my dental offices. I recognize this journey as God's opportunity to fulfill His will in my life.

But I don't just want this article to look backward. As I transition from one season of life to another, I can see God has already begun to open other doors for ministry during my second childhood! Those doors include providing opportunities for revival evangelism within our own denomination. Who better could God use than someone to whom He was long suffering. Unfortunately, we live in an age when even within the leading evangelical churches the general consensus, along with the usual statements of personal belief, is that you can't keep the Ten Commandments. But you see, I have experienced the Gospel, the supernatural power of God to change my life, to put new desires in my heart and then provide the power to perform. (See Phil. 2:13, Rom. 8:11) And then, to appropriate the salvation truth of Romans 8:1 into my mindset and accept the promise of Romans 8:14, that "now" I am a child of God. True freedom comes in accepting the truth as it is in Jesus. That truth is experienced by the acceptance of God's righteousness in you by faith. It's true, friend! Please accept this!

There is one more principal that needs to be expressed. Solomon asked the question in the book of Ecclesiastes 1:3, "What profit hath a man of all his labor which he taketh under the sun"? My answer... "all is vanity" unless your life is lived at the foot of the cross.

My hope, my desire for you, is that as you experience a new calling, or the refreshing of a previous calling, that you would delight yourself in the Lord, knowing your life is surrendered to God and that, one day you will be able to look back on your professional life and find only words of praise to God, and utter, as I have: "This was the Lord's doing; It is marvelous in our eyes". (Psalm 118:23)

The AMEN Conference: A Time for Sharing



DR. DOUG PLATA

received his MD and MPH degrees from LLU and then went on to complete his residencies in Family Practice and Preventive Medicine. He currently works in Rancho Cucamonga for Concentra Medical Centers as an Urgent Care and Occupational Medicine physician.

From October 25-28, 2012, AMEN held its annual Conference in San Diego, CA. Although San Diego is blessed with good weather and many attractive features, it wasn't the weather or the beaches that drew this year's attendees. Rather, physicians, dentists, and medical and dental students came to learn not only about health evangelism, but also to network with other medical professionals and learn from their peers how to integrate medical evangelism into their daily practice.

460 people pre-registered with more than 100 of those being students. The conference started with over 250 people attending and, by Sabbath that grew to approximately 500. Ten attendees came from international countries including: Armenia, Canada, England, Germany, Guam, Italy, Northern Ireland, and Romania. Additionally, about 50 children participated in the children's program led by Linda Lawrence.

The conference opened on Thursday night with the Seventh-day Adventist world church president, Elder Ted Wilson, presenting on the subject of the unique role that health care professionals play in relation to the work of the Church especially in light of the work to be done at the close of time. Following the inspiring message, many lingered to meet and talk with Elder Wilson.

Before breakfast each morning, devotional thoughts were presented by Pastor Dale Leamon. His emphasis each morning was to draw our attention to the healing ministry of Jesus by reminding us all that, without having the presence of Jesus in our life, we cannot share Him with others. To be connected to this source of life and health, we must know Him personally, as a friend.

These presentations highlighted the theme of the weekend which was, "Testimony". In addition to being encouraged to have a testimony for ourselves, throughout the conference, a variety of speakers inspired the audience as they shared their own experience of how God was working through them in their practices. Speakers shared strategies of how they are sharing Christ with patients. Various ministries were highlighted as they told about their ongoing work.

If you would like to listen to any of the plenary sessions or seminars, audio files are available for download on our website: amensda.org/events.

So, what impact did the AMEN conference have on those who attended?

Jacqueline Romero (SOM'13) said, "I would like to thank the AMEN members for making a way for students to attend this year's



conference. I was blessed by the many messages.”

Another attendee says, “I was inspired by the testimonies of physicians and other healthcare professionals and it was a blessing to be surrounded with so many like-minded individuals. I am challenged to share with my patients the only true physician: Jesus Christ”.

Another student shared how important these meetings were to her personally. “Thank you again for the chance to attend

this conference. It was a wonderful reminder of why I am in school. I get so bogged down with all the material day after day and I sometimes ask myself if it’s all going to be worth it in the end. The testimonies I heard about how much these professionals, alongside with God, have impacted their patients and even community was such a needed boost from my discouragement. Thank you!”

Mark Brown, DDS said, “I’ve attended four or five conferences now, and every time I am amazed with how much of a

personal revival I experience as a result of the meetings. Not only is it spiritually rejuvenating, but it is also an important reminder to keep pressing forward in our efforts to incorporate medical evangelism in all possible forms, as well as connect with others who share the same values and goals. ... Whether you are a healthcare professional or minister, and whether or not you are interested in medical evangelism, I highly recommend that you attend the next AMEN conference.”

The AMEN 2012 Conference in Graphics

Surveys administered at the end of the conference gave helpful insights into the perspective of attendees.

HOW MANY TIMES HAVE YOU ATTENDED AN AMEN CONFERENCE?

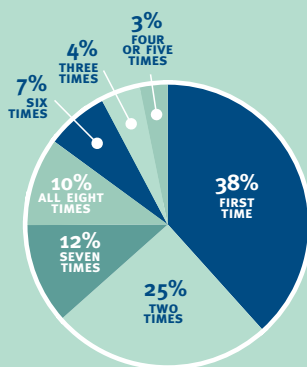


Figure 1 reveals that most attendees were relatively new to the AMEN conferences with nearly two-thirds of them indicating that they had attended the AMEN conference only once or twice.

WHY DID YOU ATTEND THE AMEN CONFERENCE?

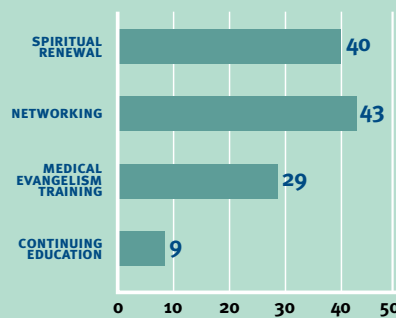


Figure 2 shows what the attendees were looking for while attending the conference. It seems to confirm the goal of the AMEN conferences to be a highly spiritual setting where attendees learn about and encourage each other to share Christ in their practices.

HOW DID YOU HEAR ABOUT THE AMEN CONFERENCE?

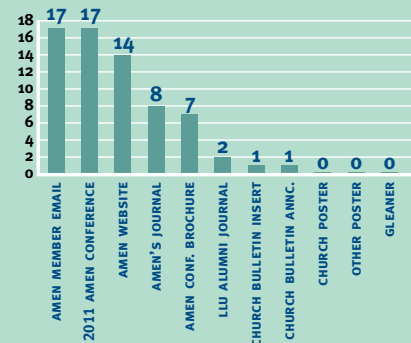


Figure 3 shows that the main ways that members learned was either from the previous conference or through their member e-mails. Since so many were first-time attendees, they may have been reached by the other means listed.

A series of articles introducing you to your fellow AMEN Members. If you have a member you would like us to feature please email barnhurst@amensda.org.

by Eddie Ramirez, MD

This Little Light of Mine...



EDDIE RAMIREZ, MD

Dr. Francisco Eddie Ramirez, is currently conducting research and doing hospital rotations with Dr. Neil Nedley. He also consults patients in Mexico on a regular basis. He is preparing to take his USMLE boards and will begin his residency program in the near future. Dr. Ramirez is planting a Spanish branch Sabbath school at his church. He and his family are looking forward to what God will continue to do through them.

For many years I worked at lifestyle centers in Europe and America. Lifestyle Medicine became my passion, and I wanted to be more effective at sharing the good news of the gospel and of health. That's why, after counseling with godly people, I decided to become a physician.

A Medical Missionary, Literally

When I started medical school, I was the eldest student in the classroom. I soon realized that I was not just studying; I was, instead, to be a light. I prayed that God would make me a blessing in the medical school that He had chosen for my mission field.

One event during a class stands out in my memory. The professor assigned a student to facilitate a discussion on human origins; it would be for the next class period. I felt impressed to start gathering and organizing a lot of the information that I had at home on the assigned topic.

On the day of the discussion, after about ten minutes the student in charge ran out of things to say about evolution, which left a big and awkward silence in the classroom. I broke the silence, raised my hand and said, "Professor, could I continue with the class?"

She was happy that somebody had taken the initiative, so I connected my laptop to the projector and began the presentation. I showed scientific evidence from journals and anthropology books that destroyed every argument for evolution. By the end of the class, the room was silent. The professor just said, "Are there any questions?" No one said a word. I know that some of the students began to understand that there is another feasible theory to explain human origins other than evolution.

A New Project

Another interesting experience came in the third semester. A new student joined the class. He had failed a previous class, and they gave him another chance. I simply was nice to him, nothing more, and one day out of the blue he came to me after a class and said, "What church do you go to?"

I had not talked to him about spiritual things, but I answered, "I go to the Seventh-day Adventist Church."

"I want to come to church with you," he said.

So this student became a mission project for my family. Faithfully, every Saturday, we would pick him up, and he would come to church with us.



At a Sunday Church

Then, soon afterwards, an opportunity arose. A local pastor from a Sunday keeping church had a positive encounter with a Seventh-day Adventist canvasser. As a result, the pastor became interested in learning more about Seventh-day Adventists. In addition, the pastor offered the canvasser free access to the church facility to be used however he wished as long as the pastor himself was not using the church.

About this same time people from the Conference came and wanted to organize a student association combining students from all the local universities. When the group chose me as the president, I decided to challenge our team to make use of the church that was offered to the literature evangelist. Our goal was to plant a church.

It is very interesting because, at that same time, without me knowing it, the Conference in their annual planning had assigned that particular area as a target area for a new church. All of the other denominations had a presence there

– Catholics, Evangelicals, Methodists, Baptists, etc. But there was no Seventh-day Adventist Church. I didn't know how it would work out because I had two extremely hard classes that were known to have a high failure rate, and yet, at the same time, I was to be leading out in this church plant? How could I do it all? But I said, "I am going to put the Lord in the first place." So, after much prayer, the Student Association decided to go forward.

We prayed, funds came in, workers came to help, and many lives were touched as a result of that church plant that we started, all thanks to the help of the pastor from the local Sunday keeping church.

The Daniel Example

The Lord presented numerous opportunities for me to witness during my time in medical school. One such time I was able to organize a meeting in which all the students of the university heard the health message. For the first time, the university decided to establish an ethics committee and I was invited to be a part of it. I exposed the committee to the biblical



side of ethics in a way that helped to shape the policy of ethics for research and other standards at the university.

Despite all my extra-curricular witnessing activities, and the Lord blessing my wife and I with two beautiful children during medical school, the Lord blessed once again giving me the privilege of graduating first place in my class. Along with this honor came another wonderful opportunity to witness because the valedictorian is invited to give the speech during graduation. I prayed, and asked the Lord what he wanted me to speak on. I felt impressed that I should share from the first chapter of Daniel, and how in this story were principles that helped me graduate at the top of my class.

This is only the beginning, though.

Serving God and Government

After finishing, I was required to do one year of government service. Because of my standing in my class, I was allowed to select first from the list of options. I felt impressed to talk to the Conference

The church was happy to have us there since it was in need of a leader.

President. When I got him on the phone I explained my situation and gave him the list of locations for government service and asked where he needed me.

He quickly told me, “I need you in San Felipe (located between Baja and the mainland of Mexico).” This area is unusual in that it is home to a large number of Americans and Canadians. Someone with bilingual skills was needed to minister there. So that is where I went.

The challenges were abundant. One of the more daunting ones was the fact that the government salary was a meager \$80.00 per month. But I knew that God was in control. The church was happy to have us there since it was in need of a leader. So I was the physician during the week, and on the weekend I was the “pastor”. In addition, the Conference was trying to run a pilot program for a health expo. Since I would be joining the church there, I helped run the program with the conference leaders and the youth of Baja.

Very quickly I noticed that the health habits of my church members were not the best, so we began to run a very strong health program. This consisted of health lectures presented every week between Sabbath School and the Worship service. This was a big blessing in two ways: first, the members were beginning to make crucial changes in their health habits; second, I was recruiting for these lectures at the office during the week.



I would see up to 40 patients every day. Every one of these patients received an invitation to church. I would say, “At 10:45, on Saturday, I am going to give a health lecture on such-and-such a topic. I want to see you this Saturday so you can learn more about how to resolve your health issues.” Many who had never even heard of the Seventh-day Adventist Church came to the lectures and many stayed all the way through the divine service.

My 14 years of experience in different lifestyle centers around the world enabled me to implement community-wide lifestyle changes. The Lord opened the door so that I could start the first diabetic club in town. The mayor was very supportive, because diabetes is destroying so many lives in Mexico. The Rotary Club decided to sponsor a huge advertisement inviting people to come to our diabetic club, and many of those who came saw a regression of their diabetes. I also invited people from the diabetic club to come to the weekend health lecture every Sabbath at the church.

There was also a big English speaking non-denominational Sunday church in San Felipe. The pastor heard about my health lectures and came. He then invited me to come to his church every single Sunday so that I could teach the principles of healthful living to his congregation as well!

I was surprised to see how receptive those people were. They implemented various programs that helped improve their health through lifestyles changes. Even the pastor was convicted to stop drinking coffee and switched to a complete plant-based diet. Additional lifestyle adjustments allowed him to get off his blood pressure medications. He became on fire for the health message, encouraging his church members to choose a plant-based diet.

In fact, when I finished that year of service, the last thing I did was to give a lecture at his church about the principle of rest, in particular the blessings of keeping the Sabbath.

A Little Mexican Revolution

I give the glory to God, but that little town of San Felipe was revolutionized as



a result of God's choice to put us there. When we arrived, the small stores that carried groceries did not have anything that resembled health food: no soymilk, no tofu, and very little fresh produce. So I went to the owners and said, "Look, you start to carry good healthful products and I'll promote those products so the people will come and buy them."

In the beginning, they were reluctant but they agreed to try it with a few items. They were amazed at the results – indeed, people did buy health food products. One time a few people even complained to the storeowners, "Hey, the doctor said that you had such-and-such product, how come you don't have it?" Finally the merchants took me seriously and started stocking sufficient amounts of healthful food. Customers began going into the restaurants and saying, "Hey, I don't eat this stuff that you have on the menu. Don't

Finally the merchants took me seriously and started stocking sufficient amounts of healthful food.

you have anything else to eat?" So even the restaurants began changing their menus.

During my service I got a hold of a fantastic magazine called "Radiant Living" which nicely summarizes the health message. I began handing it out to my patients. Most patients loved it, but one complained, thinking it was the "Watchtower" or the like. I was chided by the local director, who said that because I was there working for

the government, I shouldn't be promoting any religion. Then, a few days later another patient told the director how this physician had given her a magazine and was excited because it was so helpful to her.

What happened? The director called me back, apologized for the rebuke, and ended the conversation with these words: "Doctor, by the way, do you happen to have an extra one of those magazines that I could have? I am very interested in learning these things."

At the end of our year of service, God had blessed us with baptisms, and with a church that made changes for the good, spiritually and physically. We have been given a wonderful message, and what I have learned over all these years is that if we are willing to spread it, the Lord will do great things through us.

The *Daniel Challenge* and The New Life



DR. JEREMY BECKWORTH
is a Physical Medicine and Rehabilitation specialist at the Emory Spine Center in Atlanta, GA. He and his family have a passion for health and they are actively involved in the ministries of their local church.



“Why?”

That’s the question Rico Hill and Jared Thurmon kept asking themselves.

“Why can’t the Seventh-day Adventist health message be as innovative and popular as it should be, considering its effectiveness? Even the world has come to see the value of the health principles we’ve known for so long. With all the innovative technology and gadgets available to us, why doesn’t somebody do something?”

Then, a few years ago, Rico and Jared looked in the mirror and realized that the ones who should do something were looking back at them. They decided to find a unique way to take the health message and turn it into something so engaging and life changing that even secular college students would get excited about it. The result was The Daniel Challenge (www.thedanielchallenge.com).

If this was going to work, it had to get people’s interest and hold it long enough to see significant improvement in their health. At the same time, it had to be simple, straight-forward, and “doable.” People need to believe that they can succeed or they are not going to start. So The Daniel Challenge

was designed to offer small challenges that increase gradually over a ten-week program. Education is important too, so each challenge needed a carefully designed information segment that is short, easy to understand, and related to the current challenge.

The biblical Daniel’s challenge lasted ten days, but he had a life-time history of healthful living behind him. It was decided to make The Daniel Challenge into a ten-week program for those who have years of bad habits to unlearn.

There was another challenge for Rico and Jared. Their target audience was university students. Clearly, the students at Arizona State University (ASU) where they ran their pilot program were not going to sit through ten weeks of boring health lectures. The Daniel Challenge had to meet the mindset of busy, tech-loving young adults. Rico, Jared and their team designed engaging presentations loaded with many current videos and the latest scientific studies showing the benefits of lifestyle change. Their team also helped put together a program that helped students keep track of their challenge points on a weekly basis. To add a little extra motivation, the student with the most points was awarded an iPad at the end of the ten weeks.

The ASU experiment was so successful that



churches, corporations, and other schools wanted to host The Daniel Challenge. Before long it was being hosted in over 200 locations around the world by students, pastors, medical professionals and more.

At the October 2012 AMEN Conference, interventional cardiologist, Dr. Brian Schwartz heard about The Daniel Challenge. Back at work a few days later he met Bobby, who was referred to him because of high blood pressure that was not controlled despite being on two medications. Bobby is a teacher at a Christian school in Cincinnati. He didn't know a thing about health. All his life he had eaten "normal" food. Now, at 68 years of age, Bobby weighed 217 lbs. He was already taking Lisinopril and Hydrochlorothiazide and his blood pressure was still 230/120.

Dr. Schwartz talked to Bobby about the chances that his high blood pressure could lead to congestive heart failure or stroke. He explained the complications involved in treating high blood pressure with medications. Then he told Bobby about The Daniel Challenge.

As a Christian, Bobby understood the biblical origins of The Daniel Challenge. He was interested to learn that his doctor was a vegetarian who makes time in his busy schedule for regular exercise. Just for good measure, Dr. Schwartz had Bobby watch *Forks Over Knives*. By this time, Bobby was very interested. Dr. Schwartz shook hands with Bobby as he was leaving

the office and said, "Give The Daniel Challenge a try and see if it doesn't have a big effect. If it works for you, we may be able to reduce the number of medications you have to take." The doctor concluded by saying, "Medicines are for people that don't want to change their lifestyle."

Bobby went home armed with a new prescription for Amlodipine, and also The Daniel Challenge website address. Four months later, on February 25, 2013, Bobby was back in Dr. Schwartz's office. He was beaming from ear to ear, and he had two of his grandsons with him. Bobby's story was surprising, even to the doctor.

Bobby said that he went straight home from his first appointment with Dr. Schwartz, and logged on to The Daniel Challenge website. He started the challenge immediately. "I had no idea that diet and exercise could make such a big difference!" he exclaimed. "So I started talking to my wife, and my two grandsons who live with me. The grandsons drove me here today because I wanted them to meet you. We're all vegans now. We're sharing this at our church. I've already got my weight down to 180, and I feel great!"

Bobby's cholesterol was dramatically improved, his blood pressure was down to 120/68, and Dr. Schwartz was able to take him off the Amlodipine. He is back down to the Lisinopril and Hydrochlorothiazide which were previously failing to control his blood pressure. He hopes he will soon be able to reduce his medications further.

Now Bobby teaches The Daniel Challenge to his students at school, and he says that he feels better than he has ever felt in his life. His message to everyone he talks to is this: "If God did it for Daniel, He can still do it today!"

Dr. Jeremy Beckworth, a Physical Medicine and Rehabilitation specialist at the Emory Spine Center in Atlanta, GA recently hosted his second Daniel Challenge event at the Atlanta North SDA Church.

When asked how The Daniel Challenge program differs from other health and lifestyle programs he's done, Dr. Beckworth gave the following review:

This program is very nice in a number of ways. First, it lays out a stepwise approach in making gradual changes in health. It also addresses spiritual issues. As a busy physician, I found it very nice to have a program that is already set in place. It does not take a lot of work or expense to get it going. Even though the program is set for you, it can be altered to your preferences. It allows for a shorter or longer program depending on the need. Additionally, there are a number of excellent lectures already prepared, but they can be tweaked. I initially started with some of the preset lectures but then ended up adding some lectures of my own.

It has been said, "The health work is an entering wedge, making way for other truths to reach the heart." That is the biggest goal. If we can plant seeds for



eternity, that would be awesome. I try to incorporate a spiritual message with all the talks. For instance, I give a talk on “Heart Disease and Nutrition.” I give scientific and practical data on this and then address spiritual heart disease and nutrition. I have another talk on “Exercise and Rest” where I talk about the Biblical perspective of rest, the Sabbath.

One thing that is very attractive about this program is that it is easy to market. We ended up doing health screenings alongside The Daniel Challenge. We mailed out postcards and placed posters in health stores. This was not expensive marketing. We ended up having 100 plus participants through the entire meetings and over half were non-members. In the process, I discovered that even I can do a successful health series! I cannot think of any other church ministry that gets this many non-church members to come back regularly. I’ve found it easy to invite my co-workers, and it is very exciting to get so many people to visit our church.

The most important principle that the Challenge teaches is that we are in need both physically and spiritually. We are finite beings in need of an infinite Savior. John Newton once said, “I know two things, that I am a great sinner and Christ is a greater Savior.” I agree with John Newton.

People often try difficult things to improve their health without success, but The Daniel Challenge addresses simple lifestyle changes that have a tremendous impact on their lives. More importantly,

Testimonials about The New Life Challenge/The Daniel Challenge

“What a blessing it was to have you all come to our church. My deepest gratitude goes out to you for presenting a broad picture of the health message as it is in Christ and setting it in the great controversy motif. God has truly blessed you to see the big picture and communicate it persuasively in love. You brought us meat in due season.”
- *Pastor Nathan Madrid*

“I learned so much from your seminar/training/demonstration you had last weekend.” - *Loreen W., Florida*

“I have lost over 25lbs, I have more energy, I sleep better and I have experienced better mental clarity”
- *J. Barnham*

“I’m 71 and I lost 20lbs with this program. I am also no longer on my blood pressure medication.” - *M. Bond*

“I started this challenge this past summer because I had serious problems with circulation effecting my legs. I was given my life back through this wonderful program and I lost 33lbs, I feel better, think clearer and I feel fulfilled.”
- *A. Taylor*

The Daniel Challenge blends both physical and spiritual applications.

One of the biggest things I’ve learned is that people show up for health presentations. Almost everyone has an interest in his or her health. It is very easy to invite an outside friend to this program. I’ve been overwhelmed by the turnout of the community for The Daniel Challenge. This was one of the many reasons we decided to repeat the program in our church.

My church has responded very favorably. There has been great turnout from the church even though the program has been repeated from the prior year. We’ve changed the program slightly year to year. We’ve shown a few documentaries such as “Forks Over Knives” and the PBS documentary “Kick Start Your Health” by Dr. Neal Barnard. These things have added to The Daniel Challenge and kept the members quite interested. We had a local hospital come and draw a cholesterol/lipid panel and glucose levels. We had over 60 people come for labs. Many of these were from the church.

This is a great program. It is easy to do and the program is already prepared. Still, it is flexible enough to be tweaked as needed. I would be happy to share the additional lectures I’ve given.

After 3 years of working with The Daniel Challenge, the program is getting a facelift. In the works is a new app for mobile devices that will give the participant a personal health coach. The program, which includes some new materials, will also be branded under a new name - The New Life Challenge. THE NEW LIFE is an acronym which stands for 10 principles that are key in our everyday lives. It includes the traditional “8 laws of health,” plus two additional principles - investing time in others, and spending time each day educating yourself by reading. These two “new” principles are concepts which the founders believe are key to the Christian walk. Science has recently begun to recognize these principles as vital to optimal health of the mind and body. The updated program is very professional, even more engaging than previously, and yet simple enough that anyone can present it with good success.

All over the world, happy participants in The Daniel Challenge are echoing Bobby’s jubilant proclamation, “If God did it for Daniel, He can still do it today!”

For more information visit their new website: www.GetTheNewLife.com

GUAM SEEKING MEDICAL MISSIONARIES

OPENINGS: SHORT & LONG TERM SERVICE

- INTERNAL MEDICINE
- FAMILY MEDICINE
- GENERAL SURGERY
- ORTHOPEDIC SURGERY
- CARDIOLOGY
- RHEUMATOLOGY
- PULMONOLOGY
- GASTROENTEROLOGY
- OB/GYN
- UROLOGY
- PEDIATRICS
- ENT
- OPTOMETRY
- DERMATOLOGY

Come to the Seventh-day Adventist Guam Clinic located amongst the beautiful Northern Mariana Islands in the South Pacific. You will have the opportunity to minister to the physical and spiritual needs of our wonderful Guam community and surrounding islands, while enjoying the tropical weather of this historical and exotic island.

We are embarking on a major expansion and are looking for the right people who are passionate about God's work and are dedicated with their hearts to serve. Is it in your heart to help those in need?

CONTACT US TODAY!

1 (671) 648-2512

hr@guamsda.com
www.adventistclinic.com



'HERE I AM'

'SEND ME' ISAIAH 6:8

by Mark Ranzinger, MD

From A Far



AMEN PRESIDENT, DR. MARK RANZINGER is a minimally invasive surgeon in Goshen, Indiana.

It's the first day of spring, yet snowflakes linger here in Michigan. It's cold; snow remains on the north facing hills. Depending on where you live, there may have been a number of cold days. Hard to believe that Christmas has come and gone, and we are entering spring.

Despite these hangovers from Christmas past, the glory of what Christmas means lingers. For, in fact, the meaning of so many aspects of Christmas is a reality that we experience all throughout the year. While we celebrate the event in December, its significance, like incense, can be enjoyed at any time. Though its celebration is in December, its import is for the whole year.

One incident from the annual AMEN conference this year lingered with me like Christmas incense. While there were many memorial moments during the conference, this one stands above the rest.

After Sabbath in the evening, the AMEN executive committee met with all those who had come from other countries, those who would like to start AMEN type programs in their home countries or the countries they minister in. In this process I learned about Sam. As we went around the table asking where people had come from, Sam quietly said, "Armenia." Armenia? I thought. Why we can't get people here from Arizona or Albany; instead, they are coming from Ararat?

The meeting proceeded to other items and, eventually, I had to leave while some organizational activity took place. I saw Sam again for the last time Sunday morning at breakfast. I had a hearty laugh. Sam wanted a picture with me. Pictures like this always make me laugh because I am just a peon in God's universe. Being president of anything, while special, is also just a regular person doing something extra. I was happy to oblige and we took the photo together.



He then handed me a package. "It's for you." I opened it. Enclosed was a lovely Turkish Fez. I had to put it on and, of course, we took another picture. We said our goodbyes; always thinking you'll see one another again. But that was it.

Sam paid his own way. He is still in training. He came because he wanted to see with his own eyes and experience this organization where doctors voluntarily come together to think and pray about how they can use their practices for the glory of God.

As I have reflected on the interaction, two facets stand out in my mind. The first is that Sam came. He came from a great distance at substantial cost. This was not part of a vacation gig. He came for AMEN and was going straight home. He came to see, to learn, to witness, and to go back home telling what he had seen and heard.

The other is that Sam did that thing that is so characteristically Middle Eastern. Sam brought a gift. We in the West are far too practical and, dare I say, stingy. Excuses abound. We came long distances too (though not as long as Sam did); we were in a rush before we left; and we already spent so much to get here. And so forth. . . . Not Sam. He came with a gift.

As I consider the members of AMEN, I am impressed with their dedication, the time they have given, and the generosity with which they have supported the organization and its founding principle. Thank you members, thank you, friends, thank you, supporters. And yet when I see Sam, I see a portrait of wise men from the East, journeying, bearing, and giving at great cost. And I find myself asking the Lord, "Oh, Lord, please let me walk like those wise men from long ago and like the Sams of today, not in December alone, but each day."



NON-PROFIT
U.S. POSTAGE
PAID
CHATTANOOGA, TN
PERMIT NO.1114

ADVENTIST MEDICAL EVANGELISM NETWORK

PO Box 1114
Collegedale, Tennessee 37315
(530) 883-8061
www.amensda.org

9TH ANNUAL AMEN CONFERENCE
FOLLOWING THE LEADER



OCTOBER 31 - NOVEMBER 3, 2013

AIRPORT MARRIOTT • ORLANDO, FLORIDA

VISIT
WWW.AMENSDA.ORG
FOR DETAILS

SAVE
THE DATE!

2014 10TH ANNUAL AMEN CONFERENCE IS IN SAN DIEGO, CALIFORNIA • OCTOBER 30 - NOVEMBER 2, 2014