WHAT IS BEAUTY? SHOULD DOCTORS POINT OUT BEAUTY TO THEIR PATIENTS DURING THERAPY?

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SUMMARY
It has been argued that aesthetics, or the appreciation of beauty, can be used in therapy. We explore this concept from the point of view of new findings in neurobiology which give us an understanding of the mechanisms by which we experience beauty and creativity. We argue from anthropological perspectives that the experience of beauty is common to all cultures, and leads to the experiencing of important abstract concepts which enhance our lives, but which may be described differently in different cultures. We are beginning to understand how these abstract concepts are perceived, but this does not mean that the concepts themselves do not exist. Indeed, a Thomistic view of the human person will predict that there will be a mechanism within the body to express every bodily function.

Based on this we argue that doctors should encourage their patients to appreciate beauty itself, as they understand it, because experiencing it can be therapeutic.

Key words: creativity – empathy – aesthetics – beauty - default mode network – anthropology - Thomistic philosophy

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INTRODUCTION

When we talk about Psychiatry and the Humanities, we have been talking about Aesthetics. Aesthetics, or appreciating beauty, is about (as the Viennese Philosopher Martin Poltrum says) ‘seeing things in a different way’ so as to be aware of their beauty. So, Aesthetics is the seeing of beauty in something /someone else.

Musalek has argued recently that ‘European intellectual history teaches us that beauty is not just an adornment to life but is also a major source of strength for our life’ (Musalek 2017). Musalek goes on to argue that ‘the positive aesthetic experience also has healing power’ (Musalek 2017).

If, as Musalek argues, ‘Social aesthetics that wishes also to be understood as the science of beauty in interpersonal relationships provides us with knowledge that in medical-therapeutic practice becomes a key pillar of human-centred approaches to prevention and treatment, (Musalek 2017)’ then the beauty of interpersonal relationships must be of great importance in the doctor-patient relationship, and so also must be the common understanding, shared by doctor and patient, of the beauty of their families, communities, inter-personal relationships, the nature around them, the books they read, the art or music they enjoy, and so on. This understanding of the beauty of all their surroundings becomes the common language shared between patient and doctor, and it is reinforced every time a patient casually asks after the doctor’s family, remarks that he had been at the same cinema as the doctor, and a myriad of other instances which may occur when the patient enters the doctor’s presence, before the business of the consultation begins. This creates a feeling of humanity between doctor and patient, so that the ‘healing power’ (Musalek 2017) engendered by ‘the positive aesthetic experience’ (Musalek 2017) can begin. It is in this way that the Doctor-Patient relationship is reinforced, so that the dictum of Michael Balint can be brought about in the consultation; ‘Remember that the first thing that you as a Doctor prescribed to a patient is yourself’ (Balint 1957). Indeed, the reality is that all the beautiful things which both doctor and patient will have experienced over several years in the same community will be part of the ‘mutual investment fund’ of experiences which Balint referred to as providing a common language for doctor and patient to use over the years they have known each other (Balint 1957).

WHAT, THEREFORE, IS BEAUTY?

What we see could be the beauty of Nature. In the accompanying presentation I have used an image of the countryside of Mount Carmel in Israel because this place is reputed to be very beautiful, but, wherever we look, nature is always beautiful.

Beauty is that property we see in other things /persons which attracts and gives us a sense of wellbeing. We look at a landscape, we look at nature, we hear music, we meet another person, and we recognise the wonder of that ‘other’, and that wonder engenders wellbeing.

Beauty extends to our perception of nature, animals, man-made buildings, other human persons.

And vice-versa, as well as referring to the beauty of Nature, we are able to generate beautiful thoughts, beautiful words, beautiful designs, beautiful sounds, and others can recognise them as beautiful.

BEAUTY AND CREATIVITY

Musalek and others have argued (Musalek 2017) for appreciating Beauty, and in this conference, there have
been papers describing the neurobiology of Appreciating Music (Wang 2018) and Visual Arts (Agius 2018). Others, such as Nancy Andreasen, have discussed the neurobiology of Creativity (Andreasen 2011, 2006, 2012, 2011). Creativity has been linked with mental illness, such as bipolar disorder (Jamison 1996, Andreasen 2008, 1988, 1987, 1975), and this implies that creativity is related to the functioning of the brain.

Thus Appreciation of Beauty (Aesthetics) and the Creating of Beauty (Creativity) appear to be two sides of the same coin.

Often Aesthetics and Creativity combine, as in the Collection of Photos and Poems recently published by Psychiatrist Giuseppe Tavormina (Tavormina 2018).

### NEURAL MECHANISMS LINKING BEAUTY AND CREATIVITY

Neural Mechanisms have been described which are linked with appreciating music (Wang 2018) (Reybrouck 2018) and the visual arts (Agius 2018, Vessel 2013, 2012, Kawabata 2004). Only one cortical area, located in the medial orbito-frontal cortex (mOFC), was active during the experience of musical and visual beauty (Ishizu 2011). Andreasen has described neural Mechanisms related to Creativity (Andreasen 2011). In the papers quoted, both appreciation of art (Vessel 2013) and music (Reybrouck 2018) and creativity (Andreasen 2011) appear to be linked with the default mode network of neurons. Interestingly, the default mode network appears to be linked with the sense of self as well as appreciating others, including empathy (Andrews-Hanna 2012), Thus all the functions we have mentioned- appreciating art and music and creativity appear to be linked with a person’s sense of self and capability of being empathic with others, while the medial orbito-frontal cortex (mOFC) is described as a region involved in representing stimulus-reward value, in other words as evaluating beauty, including that of, for example another person’s smile (O’Doherty 2003). It is known (Kawabata 2004, Reybrouck 2018) that the consequence of this evaluating of beauty is then the activation of the dopaminergic reward mechanism.

### A THOMISTIC MODEL OF THE HUMAN PERSON

We have argued elsewhere (Agius 2017, 2014) that such a neurological model is compatible with the model of Aquinas and Augustine that human persons can be described as embodied spirits. This is, in fact the classic philosophical model of man, coming from Greek and Roman philosophy and formulated by the scholastics in that human beings are spirits with bodies so that everything a human being does, including such actions as empathy, appreciating beauty or creativity must have an expression in our bodies, in this case, the neural mechanisms we have described.

### HUMAN EXPERIENCE OF BEAUTY

Brinck (2018) has recently described how mechanisms related to empathy can enable human persons to feel or enter into a work of art. Presumably it is possible by the same mechanisms to ‘enter into’ and feel observed beauty of any sort, including the beauty of nature. Literature is full of descriptions of the beauty of nature, and of persons who have let themselves be surrounded by this beauty, to the extent of becoming one with it. The poem ‘The Living Flame of Love’, by John of the Cross, Spain’s most famous romantic poet and also a great Mystic of Christianity gives a description of a person whose union with beauty (in the shape of a beautiful bridegroom) is of exaltic proportions. It is the most famous description of becoming one with beauty. In the poem is implied a sense of fulfilment and of being fully human which suggests the link between empathy and self which we described neurologically earlier in this paper.

'O living flame of love
that tenderly wounds my soul
in its deepest center! Since
now you are not oppressive,
now consummate! if it be your will:
tear through the veil of this sweet encounter!'

In another poem, ‘The Dark Night of the Soul’ John of the Cross describes the journey to his beloved in terms of beauty, but also raises an important point regarding our appreciation of that beauty ... the need to avoid distraction (in his analogy by travelling at night), in order to see the beauty. The avoidance of distraction is extremely reminiscent of mindfulness meditation, so much utilised in mental health work today, but in fact based on Buddhist meditation practices of ‘Living in the present moment’.

'Oh, night that guided me,
Oh, night more lovely than the dawn,
Oh, night that joined Beloved with lover,
Lover transformed in the Beloved'.

Thus, man expresses the need to stop to admire the beauty, which means turning away from things which distract us. This is what mindfulness is about (Andre 2014).

Over time, science has enabled man to observe better the laws which govern the universe, so man has been able to see great beauty in the laws and patterns which govern the universe, and see that they are all perfectly balanced. Zeki has been able to write about the neural correlates of Mathematical Beauty (Zeki 2014).

### ANTHROPOLOGICAL EXPLANATION OF BEAUTY

It has been difficult for mankind to explain beauty. Recently an old man told one of my students ‘beauty is
something you cannot touch’. In some cultures, such as
the Western European one, human beings have called
this sense of beauty ‘God’, however a person wishes to
describe it, while other cultures, as in some Eastern
Ones, which concentrate on meditation, man just
admires the beauty. In the Koran is the saying ‘Allah is
beautiful, Allah loves Beauty’. These are examples
which show that all cultures recognise this wonder of
Beauty in nature and in Others. Since we experience
beauty in other persons and in the creativity of other
persons, we see other human beings as having a unique
dignity, to the extent that human beings or persons
have been recognised as having rights, enshrined by
such organisations as the United Nations, so that all the
nations of the world agree on the unique dignity of the
Human Person (United Nations 1948).

**PERCEIVING BEAUTY
AND ABSTRACT CONCEPTS**

Before the Beauty of Nature, man reacted psycho-
logically by personifying nature; by describing nature
as if it were persons like himself. Thus he described
spirits of earth and sea, woodland and streams. We
find these in the all early cultures, and it was assumed
that these spirits had powers. As civilisations de-
veloped, some people called these ‘spirits’ ‘gods’, and as
time went on, man began to consolidate all these
spirits/persons into one, thus moving from polytheistic
to monotheistic beliefs all the powers of the spirits
being consolidated into one power.

Thus, as man contemplate nature’s beauty, man
comes to be aware that this beauty is a quality within
all nature, which can be experienced as personal, and
therefore something which can be related to. The
Jewish story of Elijah experiencing God in the gentle
breeze suggests the benign nature of this quality of
beauty (1 Kings 19.12).

This quality, linking persons together, will be expe-
rienced as a feeling of giving life and love to each
other – that is the feeling of empathy we have des-
cribed. It was of this feeling of empathy that Michael
Balint wrote when he said ‘Remember that the first
thing that you as a Doctor prescribed to a patient is
yourself’ (Balint 1957). The consultation is nothing
that you as a Doctor prescribed to a patient is
experienced as it were, as a life – force flowing bet-
ween them.

Because human persons see beauty in other per-
sons, and this is linked with the neural mechanisms of
empathy, creativity, and appreciating beauty described
above, it comes as no surprise that these feeling can be
experienced as very powerful forces.

This force of empathy is beautifully expressed by a
motto which a Senior Registrar in Psychiatry at the
Maudsley Hospital has on her desk:

> ‘When we care for others our own strength increases
When we help people expand their state of life,
our lives also expand
Actions to benefit others are not separate from
actions to benefit oneself.
Our Life and the life of others are ultimately
inseparable.’

As a result some human beings feel and express
religious ideas such as those about the interdependence
of all human beings, the relationship between God and
man, man being made in the likeness of God. Other
Human Persons simply admire the beauty around them
and the beauty of each other.

Given the model of the human person as being an
embodied spirit, it appears that the fact of parts of the
brain being linked with the perception of the abstract
concepts we have mentioned above is not in
contradiction of the existence of these abstract concepts
themselves. We have simply described the mechanisms
by which they have been perceived.

**BEAUTY AND CREATIVITY
IN MENTAL ILLNESS.**

What is interesting, however, is that, when a human
person is unwell, that does not mean that the perception
or creation of beauty stops. We have the examples of
Robert Schumann (Domschke 2010), mentally ill but
still creating music, or Vincent van Gogh (Arnold
2004), mentally ill but still painting.

Even when there is gross damage to the brain, as in
the Dementias or Schizophrenia, Creativity can continue
over time, though its expression becomes more bizarre
as the brain damage progresses. An example in
schizophrenia are Louis Wain’s Cat pictures, which
wore more and more bizarre, but still creative and
beautiful as his illness progressed (Latimer 2002).

In Dementia, creative art is important in therapy, and
helps patients circumvent the blockages in self
expression/creativity caused by the illness; however
over time the damage to the neural pathways gets in the
way more and more of the self expression.

So the perception of beauty persists, even during
illness, and may be of help in illness. We have dis-
cussed that, while the neural mechanisms for percei-
ving beauty and creativity are the same for each human
person, different cultures will express the perception of
beauty differently, using different languages, mythe-
ologies, religions or so forth. Thus in these multicultural
times there is a risk that the use of the imagery of any
one particular culture to give therapy or support to
patients may be challenged if only one particular
cultural model is used, and there is concern that some
might see this as imposing our own cultural models on
others. However, as we have seen, all human beings
perceive and experience beauty in the same way.
Hence we, as Doctors, need not tell our patients what to call the beauty, but it is extremely legitimate that we should point them towards perceiving and enjoying beauty itself, so that patients can appreciate it and it can support their lives.

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Editorial Note: This paper was the concluding paper of the conference on psychiatry and the arts in Verdala Palace, Malta on 13-14 July 2018. It is here re-presented at the Iseo Conference with some additions and comments which arose from the discussion with my students during the following days. It is dedicated to His Grace Charles Scicluna, Archbishop of Malta, who tells me that appreciating beauty is the centre of his own spirituality.

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