



The Etheric Body

the foundation of a dynamic clinical lens

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There is a great modern hope to find the kernel of good health in a checklist. As medical costs are ballooning and rates of chronic illness climb, one oft-espoused solution is to get more precise about what we as healthcare providers are doing, creating broad practice guidelines and working to universally apply them. There is the hope that if we define the basic parameters of physical health and work towards them, we will all be healthier. Body-mass index, cholesterol, blood pressure, cancer screening, vaccinations and smoking cessation become

our measures of good health, and if those are within their proper parameters we can all feel good that we are keeping people healthy. For anyone who has recently gone through an academic medical training, this kind of reductionist medicine is all too familiar. The parameters may shift—dependent on the specific patient population and organ focus of a particular discipline—but the ideas of a “checklist” are basically the same. Consistent approaches to the medical encounter should of course not be dismissed, as they help bring uniformity and

efficiency of purpose, but every medical practitioner also knows that therapeutic interactions with human beings are much more complicated. The checklist works perhaps most cleanly when we are one step removed from the examination room—from the perspective of research or policy—when we can look at the numbers and other measures of “health” and make shrewd judgments, without having to know much of anything at all about who the individual person is. The more precise our surrogate measures of health become, paradoxically the greater the risk of our actually *failing* to look at the human being we are trying to help.

This kind of talk can lead to cynicism. It can also sound like a rejection of modern medical techniques and therapies—which is not the intention. But it is helpful, if not eventually essential, to recognize that the tools we use will in many ways automatically help define (and possibly limit) our medical perspectives. With enough time and tradition built around those tools, we are in danger of doubting that anything can exist outside of what those tools can measure. Recent medical commentaries point to this, almost apologetically, trying to remind us that “wisdom” and “empathy” are important medical tools.¹ If the heart of modern medicine is breaking—and recent studies point to frighteningly high rates of depression in medical students, and markedly increased rates of depression and suicide among practicing physicians²—it is not really because of the financial burdens of aging populations, not because of a broken insurance system, not because of under-spending or over-specialization. It is because there are so many essential aspects of a human being which are ignored by a checklist

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mentality. The human being is more than what can be analyzed through diagnostic studies and tests. Short visits and poor continuity only exacerbate this problem. We are losing sight of the whole human being, sometimes playing more with the shadow measurements of human beings than looking at the human beings themselves.

So, how then do we widen our lens?

We can start by recognizing that virtually every medical measure we make is striving to create a static measure. Vital signs, finger-stick blood glucose, X-rays, bone scans, MRI and PET scans are all fixed numbers and images. Even the diagnostic studies we do perform in time—ultrasound, echocardiogram, EKG, and EEG—are summarized into static images and statistics. When we remove blood, fluid, or tissue samples from the body, we are again quickly seeking to stop and hold a process, through refrigeration, preservatives or tissue fixation. We are conditioned to looking at the human being in little snapshots, even the time constraints of 15-minute visits are pushing for this. We are well practiced in these approximations. But we have forgotten how to watch a patient in time, over time.

We need to watch, in time. Human physiology is dynamic (which can be defined as "marked by continuous productive activity or change") and processes of growth and development, illness and healing follow a particular time course. When we begin to believe that our physiology is really a diagram, or a lab value, we are lost in the abstraction of the concepts we have used to create that clinical "snapshot." In contrast, learning to pay attention to the progression of symptoms helps us to understand why a process happens, not just the "what" of naming it or diagnosing it. Diagnostic criteria give us signposts, but we all carry subtler inclinations towards disease, and inclinations towards particular pathways of healing. Looking at the time course of illness, of physiologic development, helps us remember that health and illness are not black and white. They exist in a spectrum. And watching for the health of the body in time—its patterns, habits, inclinations—is one important tool for moving away from a reactionary kind of "snapshot" medicine (treating what now "is"), and towards a medicine that is anticipating and adjusting illness predispositions early in their progression (what "may become"). We have to begin again to look at the phenomena that unfold in time. We need to understand that in addition to a physical body, human beings also have a "time" body.

This "time" body is not just a philosophical construct, because there is a lawfulness in how it functions and how it can be observed. But we have to come back to directly observing, and speaking with the patient. Most technological diagnostic methods move us away from the patient, and only after their

interpretation do we come back to the patient and decide on a therapeutic course. But we will not see this "time" body through such methods. How then can it be seen?

There are at least three windows through which this "time" body can be seen—all are aspects of *function* as opposed to *form*. We can see these processes in the qualities of growth and vitality in time, in the importance of a rhythmic lifestyle and rest, and in the way our capacities for memory and thought change and deepen throughout physical development.

We can start with growth and vitality, and we can better understand them by looking to the times when they are at their extremes: the time when a child has just been born, and the time when someone has just died. We will actually start with the death process.

Today this is in many ways a hidden process, not because it is difficult to physically observe, but because death and dying is no longer a process that most people will experience with any intimacy. But, when the opportunity is preserved to see what happens to the body in the days immediately after someone has died, we see a dramatic transformation. Usually, just before death consciousness fades, and a person may enter into a coma or very still sleep. Then with death, all outer and inner movement stops. But in the hours immediately after death, even when the body has stiffened and cooled, you might find yourself startled, thinking, "Did the person just breathe?" Because even if you know intellectually that the person is dead, there is some part of your sensing experience which still recognizes some capacity for life. If you then look at the body over the course of the next several days, this changes. Gravity sets in, and the skin and tissues begin to lose their turgor—decomposition begins. But beyond these physical changes there is a more profound shift in that you now clearly know that the body has become a corpse. There is no startled hesitation about whether the body could move or breathe. What is left is a husk. Something is gone that was previously present and sensed. Something that was present, but diminished immediately after death, is fully gone by the third day. This change is one aspect of the "time" body.

If we now look at the time immediately after birth, the first few days and weeks of life, it is awesome how an infant can truly change in the course of a day! Suddenly the face seems different, the shape of the head changed, the fingernails grown out again in the space of only twenty-four hours. The whole body is participating in a dramatic transformation of growth. Most infants double their body weight during the first two months of life. Here, vitality and growth are so abundant, so innate, that we do still have consciousness for time and its progression at this age, plotting growth curves

and developmental scales. But even here we are in danger of losing our continuity of observation, and believing that we are creating a "well child" if we are following the checklist of recommended testing and vaccination. But again, growth and development are dynamic, not static. As soon as you start to characterize or categorize growth in this early stage of life you are invariably out of date, as the child has learned a new skill, a new expression, taken a new step. We can feel the burgeoning vitality of an infant who is in constant developmental movement.

Both ends of life are connected with vitality and change in time—either a beautiful unfolding of life, or an ebbing away. We recognize both by watching in time, and it is something inwardly palpable. We can sense a body of life forces, of growth forces, in time. Many different ancient and traditional healing streams make reference to this body of forces—even if you don't have a specific name or conceptual framework for it, it is undoubtedly something you have experienced. Within the framework of anthroposophic medicine and the indications of Rudolf Steiner, this body is very precisely described. It is given the name of the etheric body, or the body of etheric forces. While the term "ether" or "etheric" has been used in many different ways over time, the term is used very specifically within anthroposophy for this body of dynamic life forces acting in time.

In fact, the qualities that help us define a living being, that allow a being to be dynamic and changing, belong to this etheric world. Beings with etheric bodies, live, grow, change in time, and they continue that development in time from one generation to another through reproduction. In the human being, we can try to understand the presence of the etheric body by looking for its absence. In a corpse, three days after death (the traditional timing for a wake) the etheric forces are gone. All that remains is the physical matter of the body. Over those three days we can witness the etheric forces slowly leaving the body. In a sleeping human being, we can witness both the physical substance of the body and the etheric forces which lift that substance into continuous activities of growth and vitality. The corpse is only physical; a sleeping person is both physical and etheric.³

We can expand our understanding of these growth and vitality forces by looking at them from another side, and recognizing that water is the mediator of these etheric forces. Where there is water on the planet earth, there we see dynamic life changing in time. Where there is no water, staid conditions of sand and stone. What points to the presence of water is plant life, and indeed, etheric forces are what give the plant world

its capacity for growth and change. Coming back to our first example: in the same way that we can begin to understand the absence or presence of etheric forces by looking at the difference between a corpse and a sleeping human being, we can similarly look to the difference between a stone and a plant. A stone or mineral has physical substance and qualities that we can easily measure. We can take a small sample of a stone and, through laboratory analysis, discover all of its chemical constituents. The plant also, of course, has physical substance which can be measured and analyzed, but it has something more than the stone. It takes the mineral substance of the earth and lifts it into a dynamic state, a state which is now open and flexible enough to change in time, which will expand and develop in a predictable progression (archetypally, seed, to roots, to shoot, to stem, to leaf, to flower, to blossom, to fruit and seed). And it will propagate, through division, or pollination and sexual reproduction. We can say that a mineral has physical characteristics, a physical "body," but it is changed by the wind and elements, not out of its own nature. A plant is somehow richer, as its physicality is breathed through with etheric forces that lift it into a living state.

From a usual scientific perspective, all of these qualities are simply made possible through the chemical structure of water. But while water or liquids act as the physical vehicle for these etheric forces, they are not the same as these forces. This has been explored by different water researchers, as they try to demonstrate how pollution from chemical or waste products affects the dynamic qualities of water.⁴ Work has also been done around how water can be redeemed or healed back to a healthy state so that it can once again act as a carrier for etheric forces.⁵

When we want to help a patient heal or recover from an illness it is essential to support the etheric forces. Growth of new tissue, the ability to take up and use the substances provided through nutrition, and the vitality for activity and interest in the world are all directly related to how the etheric forces are weaving through and supporting the physical body.

We can actively support the etheric forces through a number of methods. One is through patience. The etheric body not only needs to be observed in time, it also works through time, and proper healing requires time. The rhythm of the etheric body is a month, and it is rare that we give someone a month to rest and recover from a serious illness or stress. But advising and encouraging patients to take that time, to modify or limit their activities, is very helpful for the etheric body.

A second aspect of the time element in the etheric body is rhythm. Consistent rhythm fosters life forces—just look to the

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biographies of those who live to be greater than 100 years and you will see beautiful life rhythms! Trying to bring our activities and our meals into a conscious rhythm is one of the best (though admittedly challenging) methods for supporting our vitality. Erratic and unpredictable lifestyles threaten our etheric vitality today. As a foundation, asking someone to eat and to sleep at the same time each day builds the etheric body.

A third aspect is rest, not only the timing, but also the quantity. Healing comes through deep, rhythmic sleep. Going to sleep earlier in the evening also helps, as this time for sleep better matches the intrinsic rhythm of anabolic liver physiology—the liver is one of our most important etheric organs—giving truth to the saying that “an hour of sleep before midnight is worth two hours after.” Providing adequate time for healing, rhythm for healing, rest for healing, are all simple and powerful ways we can support the body’s etheric forces.

There is one more aspect of the etheric body worth mentioning, and that is the way etheric forces unfold in our thought life. This must again be observed in time, because it is not really present during the early years of our biography (during the first seven years). In this first stage of life our etheric forces are predominantly directed towards metabolic, unconscious processes of growth. Everything gets larger, with more refined organ activity. There are no new organs that appear in the course of time—with one exception, and this can be a clue for us that something important is happening with the etheric body. A new organ is formed, and this happens with the appearance of the adult teeth at age six to seven. At no other time do we cast off an organ and grow a new one to take its place. Age seven is a milestone, because up until this age the etheric forces in the body have truly been devoted to physical growth, with cognitive development largely limited to imitative activity. There is a certain concreteness to the way a young child thinks, and should think. But then, as a child begins losing baby teeth (the appearance of the six-year-old molars is another sign of this maturation), there is a simultaneous shifting of etheric forces from purely organic, body-related activities, up into consciousness. This manifests in newly intellectual inquisitiveness, where suddenly the capacity for abstract thought blossoms. The elements of the world are no longer taken simply at face value, and there is a longing to figure out how things work, what letters say and mean. Thought becomes more dynamic, more flexible. It is the difference between learning through instinctive imitation, versus a child wanting to know something so that he or she can understand it and apply it in the world. Because of this dramatic shift in the course of etheric forces, math and reading are not taught in Waldorf schools until a child has first finished using the

etheric forces for bodily growth during the first seven years. The push to bring abstract concepts earlier and earlier into the classroom is completely blind to the importance of the time body, believing that children are simply small adults who need to be filled with a certain amount of knowledge, the sooner the better. This is actually a dangerous push, however, because a small child can of course be forced to learn these subjects before their development is really ready for it, but this comes at the cost of depriving their physical development of the needed etheric forces required for full organ development and metabolic function. Instruction and learning are so much more potent when we can match them to what the body, the time body, is naturally unfolding. Fighting or ignoring the time body does not bring long-term health—it actually results in many unconscious deprivations and may undermine the therapeutic supports we are trying to provide.

When we, as adults, strive to observe and understand the etheric body, our thought also changes. We are led away from the black and white world of “snapshot” medicine, and into a deeper and more engaging relationship with our patients. We begin to see that interwoven within the physical body of substance and measure works the etheric body, the time body. Etheric forces bring dynamic capacities for life, for growth, for change and for continuation in time. With careful study we can sense them, and also sense their role in the course of illness and healing. Living into these etheric forces also helps bring renewed interest, vitality and insight into our own consciousness. It brings the possibility for flexible, creative and inquisitive ways of thinking.

Modern medicine recognizes the physical body, but a functional and spiritual understanding needs to be added in order to build a complete perspective of the human being. Beginning to work with the etheric forces is a foundation for developing that dynamic clinical lens. 

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- 2 Dyrbye L et al. “Relationship Between Burnout and Professional Conduct and Attitudes Among US Medical Students.” *JAMA*. 2010; 304(11):1173-1180. Schernhammer E. “Taking Their Own Lives—The High Rate of Physician Suicide.” *N Engl J Med* 2005; 352:2473-2476.
- 3 As human beings we are obviously more sophisticated than just death and sleeping, with additional levels of consciousness and activity. These will be discussed in future articles describing the astral body (which could be linked with dreaming consciousness) and the I-being (wakeful consciousness). The anthroposophic view of the human being recognizes that we are four-fold human beings, with a physical body, etheric body, astral body and I-being.
- 4 Masaru Emoto has explored the vitality of water and how it can be qualitatively measured through rapid crystallization techniques, as portrayed in his book *The Hidden Messages in Water*.