



Medical Student Newsletter

Catholic Medical Students' Association

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Affiliated with the Catholic Medical Association.*



CMSA Goals

- To provide guidance and support for medical students.
- To support and nurture spiritual growth and moral leadership.
- To promote education in Catholic physician values.
- To develop community among students entering the medical profession.

Inside this issue:

| | |
|--|-----|
| The Hippocratic Oath | 1 |
| Is Medical Ethics Sectarian? | 1-2 |
| Is There a Catholic Medical Ethic? | 2-4 |
| Annual White Mass in Chicago | 4 |
| Catholic Medical Association Meeting in Philadelphia | 4 |
| Contact Information | 4 |
| Bibliography | 4 |

The Hippocratic Oath

I SWEAR BY APOLLO, the physician, and Aesculapius and Hygeia and All-heal and all the gods and goddesses that, according to my ability and judgement, I will keep this Oath and stipulation-

TO RECKON him who taught me this Art equally dear to me as my parents, to share my substance with him and relieve his necessities if required; to look upon his offspring on the same footing as my own brothers, and to teach his Art if they shall wish to learn it, without fee or stipulation.

BY RECEIPT, lecture and every mode of instruction I will impart a knowledge of the Art, to my own sons and those of my teachers and to disciples bound by a stipula-

tion and oath according to the laws of medicine, but to none others.

I WILL FOLLOW that system of regimen which, according to my ability, I consider for the benefit of my patients and abstain from what is deleterious and mischievous. I will give no deadly medicine to anyone if asked, nor suggest such counsel; and in like manner I will not give to a woman a pessary to produce abortion.

WITH PURITY AND HOLINESS I will pass my life and practice my Art I will not cut a person who is suffering with a stone but will leave this to be done by men who are practitioners of this work.

INTO WHATEVER HOUSE I enter I will go into them for

the benefit of the sick and will abstain from every voluntary act of mischief and corruption; and further from the seduction of females or males, freeman or slaves.

WHATEVER IN CONNECTION with my professional practice, or not in connection with it, I may see or hear in the lives of men which ought not be spoke of abroad, I will not divulge, as reckoning that all such should be kept secret.

WHILE I CONTINUE to keep this oath unviolated may it be granted to me to enjoy life and the practice of the Art, respected by men of all times, but, should I trespass and violate this oath may the reverse be my lot.



Is Medical Ethics Sectarian?

The short answer is no. Ethics has to do with the rightness and wrongness of human behavior, in this case medical activities. To deliberately operate on the wrong leg or to perform an unnecessary procedure to make money would be acknowledged as wrong, or immoral

behavior, by most doctors whatever their ethical background.

Medical ethics is a separate discipline because the elements making up a medical moral decision are complex: the facts of the medical action, the understanding of the physician and the circum-

stances surrounding the action all interact to various degrees to yield moral responsibility.

Specific religious beliefs have little or nothing to do with the essence of the medical act, the doctor-patient

(Continued on page two...)



Medical Ethics

(Continued from page one...)

relationship. That relationship is essentially between a competent physician, a suffering patient and the, hopefully, effective therapeutic intervention. The doctor-patient relationship is elementally human and precedes sectarian considerations.


The Hippocratic ethic, as summarized in the Oath reflects the universality with its summary statement, "primum non nocere" or do no harm. Few will or can disagree with this. Our medical tradition emphasizes compe-

tent beneficent medical treatments.

Compassion compliments the ethical imperative. It can be argued that the concept of compassion was not emphasized by the Greeks but was added by the Judeo-Christian-Moslem traditions. Compassion is an intuited component with the Hippocratic ethic but the latter carries a primacy of place. Some religious traditions may have additional observations on the basic tenets of medical ethics (such as the Catholic Ethical and Religious Directives). But the "primum non nocere"

principle crosses all religion and cultural boundaries and applies to all physicians.

As an endnote, it should be observed that, while some are concerned that particular religious considerations deny, in some circumstances, what they consider to be medical rights, the far greater threat to medical ethics is the utilitarian effort to deny any moral principles in medical practice.

Ethical considerations exist in medicine. There are some behaviors which should be done and some which should not. 

"Professionalization of medicine has resulted in oaths which in general are covenants between the physician, patients and society."

Is There A Catholic Medical Ethic?

Is there a distinct Catholic medical ethic? The short answer is no! Medical ethics are rules of conduct for physicians and, in an extended sense, for patients as well. They have been distilled from hum an experience since the beginning of recorded history, and can be identified in Western (including Jewish and Moslem) medicine, as well as in the Hindu and Buddhist medical traditions.

Medical ethics as rules of conduct are extrapolations of the understanding that human health results from the human body and mind's natural tendency toward "wholeness." Sickness is the disruption of this inclination. Society has always designated certain individuals as healers or physicians. Initially, healers shared some of the functions of priests; however, by the time of Greek medicine, their art was based on observation and experi-

ence, not on the supernatural.

Throughout the millennia medicine has traditionally involved the attempt of physicians and patients to conform to what is natural, or to wholeness, or health. The period of the Enlightenment, which strove to control and dominate nature, did not substantially alter the traditional orientation of medicine to nature. Physicians remained humble in the face of human disease and frailty. This was true until at least the last half of the twentieth century.

The medical profession, as well as society as a whole, has recognized the uniqueness of the art of medicine and has, therefore, traditionally set standards for learning and conduct. The professionalization of medicine has resulted in oaths which in general are covenants between the physician, patients and society.

While there has been an element of self-interest in professionalization, its principal intent is to promote the healing that a physician can provide his or her patient.

The prototype of medical oaths governing the conduct of physicians is the Hippocratic Oath, attributed to Hippocrates (430-377 BC). It is remarkable how similar the Moslem, Hindu and Chinese medical oaths are to the Hippocratic Oath. There are four elements to the Oath. First, it is a covenant, or formal (usually witnessed to by a higher power) agreement between the physician, the patient and society. Second, and most importantly, it admonishes the physician not to harm. This has universally resulted in great reverence for life and nature and their corollaries, such as the self-evident

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Catholic Medical Ethic, Continued...

prohibitions against direct killing (e.g., abortion, euthanasia). Third, physicians are to respect patients and their families. Finally, the medical profession is to maintain its standards, as it conveys its traditions to future physicians.

The Christian community of the West grew in a Roman environment where physicians inherited the medical ethics of the Hippocratic tradition. Although medicine was without the current scientific understanding of pathophysiology and pharmacology, the physician was often able to benefit the patient with his experience in managing the relief of symptoms, in restoring homeostasis or health (where possible) and finally, in always providing comfort. As order and stability declined in the Roman Empire, medical and spiritual care was maintained by the monasteries and was especially delivered to the poor and outcasts, such as lepers.

Prior to the Enlightenment medical schools had been founded in Salerno (11th century AD) and a more scientific approach to anatomy and disease was fostered. It should be noted that the Moslem world also developed centers of medical learning; yet the aforementioned Hippocratic ethic prevailed in all of these centers.

While the Enlightenment introduced a scientific understanding of chemistry and physiology, the actual practice of medicine continued to include such backward practices as purging and leeches from the 18th century through the early 20th

century.

Medical ethics remained within the purview of physicians and was essentially Hippocratic. There was not a unique Catholic medical ethic. However, with the rapid establishment of Catholic hospitals in the latter portion of the 19th century, ethical guidelines (otherwise known as the Ethical and Religious Directives) were developed, primarily in the field of reproductive medicine and, particularly, in the areas of abortion and contraception. In general, these guidelines conformed to the Hippocratic tradition and were accepted by all staff physicians. Although codified in Catholic Hospitals, these guidelines were considered Hippocratic and followed by practically all practitioners. Books by identifiably Catholic authors such as Kelly, Kenny, and McFadden explicated these guidelines.

In answer to the original question set forth, there was a medical ethic that was Hippocratic, but not uniquely Catholic. It was subscribed to by practically all physicians in all cultures. It prohibited doing harm to the patient, promoted the sanctity of life and emphasized the value of conforming to nature when treating patients.

However, medicine has changed. The past tense was used deliberately in the previous paragraph. A fundamental transition occurred during the last fifty years. There are currently two medical ethics: 1) the Hippocratic ethic (to which the Catholic health tradition, as well as most others, subscribe) and 2) for want of

a better work, a "bioethic."

The former continues the traditional medical ethical tradition of Greek Medicine, its descendants (Jewish, Christian and Moslem), as well as the medical philosophies of the great Hindu and Chinese cultures.

Bioethics, while its utilitarian origins date back to the Enlightenment, could reasonably be said to have begun with the Belmont Report. This report articulated the tenets of principlism, the regnant ethic of contemporary culture. Bioethical decisions were made after applying the norms of beneficence, non maleficence and social justice. Later, autonomy was incorporated: it has since become the defining norm of current bioethics.

Medical ethics and bioethics are fundamentally different. The Hippocratic tradition is a personal relationship between physician and patient whose purpose is to restore health or nature's tendency to wholeness. Bioethics, however, is the impersonal relationship between an autonomous individual and the healthcare system. The Belmont Report criteria responded to the government's need to have guidelines (e.g., autonomy) that were non controversial and that conformed to the relativism of the Zeitgeist. Hippocratic ethics is based on the realist philosophy. Nature provides norms that are exceptionalness: a physician must attempt to heal, not deliberately kill. Life is sacred! Contemporary culture is

"Nature provides norms that are exceptionalness: a physician must attempt to heal, not deliberately kill. Life is sacred!"



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Serving God and man

ON THE WEB AT
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UPCOMING EVENTS

White Mass

September 20, 2003 at 6:00 PM

Celebrant: Bishop Listecky

Quigley Chapel, Rush & Pearson Streets, Chicago, IL.
Buffet dinner \$25.00 per person. Students complimentary.

Catholic Medical Association

72nd Annual National Conference

At the Union League of Philadelphia

October 16-18, 2003

The Distinguished Faculty Includes:

Eugene Diamond, MD; Rick Fitzgibbons, MD; Reverend Benedict Groeschel, CFR; John Haas, PhD; Scott & Kimberly Hahn; Monsignor William Smith; Bishop Vasa; Paul Vitz, PhD; Christopher West.

For Registration & Membership Information, Call
1-877-CATHDOC or Visit WWW.CATHMED.ORG

This conference is accredited for a maximum 15.75 category
one credits towards the AMA Physicians Recognition Award.

Catholic Medical Ethic, Continued...

(Continued from page 3)

guided by an utilitarian ethic. If the quality of a person's life is deemed substandard, euthanasia may be indicated. Partial birth abortion killing is constitutionally protected!

In as much as these two ethics are incompatible, the medical community is divided. More recent ethical codes such as the Geneva Convention, the Declaration of Helsinki and the AMA ethical code, all drift further from the Hippocratic Code. The fact that most medical school graduations employ oaths (or for those troubled by oaths, pledges), other than the Hippocratic suggests that there are significant differences in contemporary medical ethics.

Given this discussion, the answer to the original question remains "no." There is not a distinct Catholic medical ethic. There is a single medical ethic, Hippocratic. There is also a parallel ethical system, known as "bioethics" which is utilitarian. Unlike

As a final thought, it is interesting to note that despite efforts to promote abortion and euthanasia, there appears to be public resistance to open-ended cloning and stem cell research.

Let us hope and pray that the utilitarian incursion into medical ethics may have peaked and that there will be a return to an ethics of nature, that of the Hippocratic tradition.

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