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Following Jesus in Healthcare
4th May
Hull University Catholic Chaplaincy

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The Annual Conference of the
CMA, Hull University Chaplaincy
4th May 2019
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BUILDING A CULTURE OF LIFE!

Semper Idem is the newsletter of the Catholic Medical Association’s Committee for the New Evangelization. The Committee for the New Evangelization aims to support young Catholics in healthcare. Semper Idem is one way in which we hope to do this.

HOLINESS

“And the peace of God, which surpasseth all understanding, keep your hearts and minds in Christ Jesus”.



The fruit of holiness as mentioned by St Paul above is a foretaste of paradise, the very end that God has lovingly planned for all of us from the beginning of time. We have only to stick to the path and not mess up ie be holy.

The Right Reverend Bishop Mark Davies of Shrewsbury has this past advent written a beautiful letter on our universal call to holiness. [2] He points out that everyone no matter their state in life is called to holiness and that holiness is the only answer to the scandals and challenges facing us today. Let us heed the call of this good bishop, even if we are not of his diocese, to strive to holiness and be saints.

Holiness is something to which we are all called. It is simply being always connected to God, who is the source of all Holiness. Being healthcare professionals, one may say that our line of work is especially oriented towards holiness, that we have almost no excuse for not being holy! Our profession puts us in daily contact with people in their most vulnerable moments and in need of support. Furthermore, it pushes us out of ourselves to care for others. Perhaps it is neither wise nor lawful to go full out preaching in the workplace but holiness has a way of radiating through our being and touching whoever comes into contact with it.

Another good thing about being healthcare professionals is that it lessens the danger of holiness being an abstract idea. Holiness is about caring and loving even the most difficult patients, it is about giving everything we have to save a life, and then some more. It is about coming home to our families after a long day at work and serving them with joy. Let us not forget also that it is about fasting, praying and penance. It is about carving out time from our busy schedules for the rosary, the sacraments especially confession, and most of all for the Holy Sacrifice of the Mass.

Venerable Fulton Sheen once remarked that *“we have tried all ways of changing the world but one: holiness. It is easier to wear slippers than to carpet than the whole earth”*. Let us then put on our Gospel shoes and change the world!

“Wherefore having the loins of your mind girt up, being sober, trust perfectly in the grace which is offered you in the revelation of Jesus Christ, As children of obedience, not fashioned according to the former desires of your ignorance: But according to him that hath called you, who is holy, be you also in all manner of conversation holy: Because it is written: “You shall be holy, for I am holy.”[3]



I would like to know more about the defects of Saints and what they did to correct those defects. That would help us much more than hearing about the miracles and ecstasies.

St Bernadette

REFERENCES

- [1] Philippians 4:7
- [2] Bishop Mark Davies (2018) Advent Pastoral Letter On Our Call to Holiness, the First Sunday of Advent 2nd December 2018 www.dioceseofshrewsbury.org/about-us/advent-pastoral-letter-on-our-call-to-holiness-the-first-sunday-of-advent-2nd-december-2018
- [3] 1 Peter 13-16

THE BIOETHICS COLUMN

TWO TOOLS FOR DECISION MAKING
BY THADDEUS, A YOUNG CATHOLIC
BIOETHICIST



Having introduced the concept of health and how Catholic clinicians should relate to it, we can proceed to reflect on some of the principles governing ethical reasoning, or, so to say, conscientious^[1] decision-making. In this issue we will look briefly at the Principle of Double Effect and issues relating to the cooperation with evil, and then highlight some important points that come from these. Hence, we will look more at whether we are allowed to do something, rather than whether we should do it.

The Principle of Double Effect can be applied when an act has both a positive effect and a negative side effect to decide if the bad effect can be tolerated, and hence the action performed. The seminal case that introduced this principle to the wider debate is Aquinas' self-defence case (Summa Theologica, II-II Q64, 7), though neither did Aquinas formulate the classical conditions used in the application of this principle, nor was it the first instance in Christian literature to which such reasoning could be attributed (see 1 Maccabees 6:43-47)^[2]. Currently, the four commonly accepted conditions of the Principle of Double Effect^[3] are:

- 1: The act itself cannot be intrinsically evil
- 2: The good effect cannot be realized through the bad effect
- 3: Only the good effect is willed
- 4: There must be a proportionate reason for accepting the bad effect

Cooperation with evil.

In his accessible book 'Catholic Bioethics for a New Millennium' Archbishop Fisher^[4] discusses various aspects of cooperation with evil. These range from considerations of how remotely the cooperation occurred in time and space, how necessary it was for the evil act, as well as whether the bad intentions were shared or not. These are important considerations, for we can never remove ourselves from all association with evil. Our colleagues might be involved in illicit procedures, and working for the benefit of our NHS Trust might also benefit some illicit services provided by the Trust. As an example medical discoveries such as Dr. Jerome Lejeune's work establishing the chromosomal basis of Down Syndrome were clearly and primarily intended for righteous use. But their misuse to screen and eliminate children with Down syndrome are not the responsibility of Prof Lejeune.

We can never share in the bad intentions of others or directly assist others in their bad deeds, e.g. by helping an abortionist with an abortion; but we might accept that the surgical tools we sterilise or the doctor we help to train might one day be used in or assist in such procedures. We should never will the bad, such as the death of a child, but we might accept that an unborn child will die during a lifesaving procedure aimed at treating the mother's cancer. While we must not as Catholics cooperate directly with evil and we must be careful about what we get involved in, we must also not become paralysed by fear.

END NOTES

- [1] It is worth noting that the term 'conscience' means with-knowledge, and implies that we need the knowledge of Catholic moral principles to make good decisions. If you are interested in the topic of conscience I recommend Fr Chalmers' book 'Conscience in Context: Historical and Existential Perspectives' Peter Lang, 2013.
- [2] If you are interested in the history of Double Effect see Mangan 'An historical analysis of the principle of double effect' Theological Studies 1949.
- [3] See e.g. Eijk CWJ, Hendriks LJM, Raymakers JA 'Manual of Catholic Medical Ethics' Connor Court Publishing Pty Ltd, 2014, for more details.
- [4] Fisher A. Catholic Bioethics for a New Millennium. Cambridge University Press; 2012.

Further reading from past issues of the Catholic Medical Quarterly

These issues have also been discussed in the following papers, which you might like to read.

Crean Fr Thomas OP(2017) What is an intrinsically evil action? Catholic Medical Quarterly Volume 67(3) August. www.cmq.org.uk/CMQ/2017/Aug/what_is_intrinsically_evil_act.html

Thevathasan P, (2003) Moral Absolutes and the Principle of Double Effect. Catholic Medical Quarterly 53(4) November. www.cmq.org.uk/CMQ/2003/moral_absolutes_double_effect.htm

Shaw Joseph (2013) Double effect in Beauchamp and Childress. Catholic Medical Quarterly Volume 62 (1) February 2012, p20-26. www.cmq.org.uk/CMQ/2012/Feb/01-double_effect.html

THE BOOK REVIEW

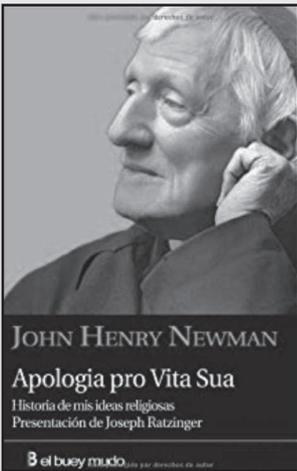
THE BOOK REVIEW IS A NEW REGULAR COLUMN IN SEMPER IDEM

WRITTEN BY A JUNIOR DOCTOR
(PEN NAME): GREGORY SCRIPTORUM

APOLOGIA PRO VITA SUA

by John Henry Newman. Printed in Great Britain by Amazon.co.uk, Ltd., Marston Gate. Paperback, 174 pages

Whilst at university I attended mass at the Birmingham Oratory, the home of the national shrine of Blessed John Henry Newman (1801-1890), an Anglican clergyman who would later convert to Catholicism. I started to read about Newman's life and his contributions to theological thought especially the development of doctrine and the authority of conscience. Therefore it seemed fitting to read his famous autobiography 'Apologia Pro Vita Sua'.



Apologia Pro Vita Sua is a defence of Newman’s religious belief. It details how his theological thought developed but is also immensely personal and honest. Newman’s relationship with Jesus Christ is always apparent; as highlighted by his motto *cor ad cor loquitur* or heart speaks to heart. Above all I was most touched by Newman’s search for the Truth. This search, which led to his reception into the Catholic Church in 1845, was slow and methodical. Apologia Pro Vita Sua is a genuine account of someone wanting to know God more fully. I was amazed at how Newman’s faith in God persisted amid his questions and doubts: “Of all points of faith, the being of a God is, to my own apprehension, encompassed with most difficulty, and borne in upon our minds with most power.” (Part VII: page 150)

There is much confusion in today’s society and the secular world has influenced medical practice in many ways. Today’s young doctors and healthcare professionals ought to take much encouragement from Newman’s resolve to choose the Truth above all else simply because it is the Truth. After all “truth cannot contradict truth” (Pope Leo XIII).

FAITH IN MEDICINE

WORK AS PRAYER

FR. GERARD MARY TOMAN



My name is Fr. Gerard Mary Toman, and it is a real privilege for me to be here today; it is wonderful to see so many of Christ’s faithful seeking excellence in their professional lives by seeking first the Kingdom of God and cultivating the sanctity proper to His Holy People. An especial thank you to Dr. Joseph Nunan for the kind invitation he extended to me, so that I might be here with you today and give a reflection on *Work as Prayer*.

To begin my reflection on Work as Prayer, I would like to say that, as part of my preparation for Holy Orders, over a number of summers, I worked as a volunteer hospital chaplain in Guys and St. Thomas’, undertaking the necessary training required for that role. Although not yet a priest, I found myself, at times, on both day and night duty; the idea being that patients and their families could at least be prayed with and comforted, while a Catholic priest was found. The many experiences I had over those long weeks left a lasting impression on me, and I look back on those days with much gratitude to God, Who, in His goodness, placed me under the guidance of a faithful, generous and loving Catholic chaplain, Fr. Jake Dicto.

I am a Franciscan Conventual priest – a Greyfriar, and I was ordained to the Sacred Priesthood in July of this year. I now live in our recently erected Friary in Walsingham – where I minister as a priest at The National Shrine of Our Lady, for Roman Catholics in England. As part of the regeneration and renewal of the Shrine, the current rector, Mgr. John Armitage, recently invited our friars back to Walsingham, 480 years after our original friary – much of which still stands – had been dissolved on Henry VIII’s orders, in 1538.

St. Maximilian Mary Kolbe was also a Conventual Franciscan. As well as having been honoured by the now Pope St. John Paul II as, ‘the Patron saint of our difficult times’, St. Maximilian Mary is also one of the patron saints of families and the pro-life movement, and given the manner of his martyrdom, namely, having been killed by lethal injection, administered by a doctor, after having first been starved for ten days, St. Maximilian Kolbe is also venerated as the patron saint of those suffering from drug addictions. We should certainly call upon the intercession of St. Maximilian Mary Kolbe in our fight against assisted suicide and in the Godly work of ending the culture of death. Following the example left to us by St. Maximilian Kolbe, I dedicate this reflection to Mary Immaculate, the-Mother-of-God-and-our-Mother, and to St. Joseph, her spouse most chaste, faithful patron of workers and Guardian Protector of the Universal Church.

Very early on in my hospital volunteering, it became quite apparent – both in my own life and in the life of the doctors and nurses I spoke with – just how thin the line can become, in a healthcare environment, between one’s life and one’s work; it was as if the hospital – and all the things associated with it – had become, in a manner, part of who I was. In almost every other job I had ever done, there were certain boundaries that helped delineate: work from rest, activity from prayer, yet in the hospital, these