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A NEW VENTURE

By ELISE WIJNEN, M.D.

"Do you mean to tell me that you are a sister as well as a doctor? Why, I never heard of such a thing." That is still a common reaction, especially among doctors, when they meet one of the Catholic Medical Missionaries for the first time. They have forgotten or have never realized that in the early ages of the Church the care of the sick was almost exclusively in the hands of religious, both monks and nuns. They only remember that for many centuries it was considered improper for nuns to practice medicine and above all obstetrics. They are usually familiar with many communities of sisters whose rules forbid them to help in the delivery room. Such a radical change in policy, therefore, startles them into many questions. It is in order to answer such queries that this article was written.

In the first place, there can be no doubt that qualified medical men and women are greatly needed in the missions. The poverty and helpless suffering in India, China and Africa are too well known to require description here. For many years Protestants have realized this God-given opportunity for charity and contact. They have built up an enviable reputation for first-class medical care in the Orient. In comparison with their well-equipped hospitals and large army of doctors,

the Catholic missions are woefully inadequate.

The first attempt to supply this need systematically and with some assurance of stability was made in 1925 when Dr. Anna Dengel founded the Society of Catholic Medical Missionaries, in Washington, D. C. In 1939, the Motherhouse was transferred to Fox Chase, Philadelphia, Pa. This religious community, which limits . its activities to medical work in the missions, received its official vindication when in 1936 the Holy Father issued a decree stating that "We would like to see new religious institutes founded for women who will dedicate themselves principally to health work in the missions. * * * The sisters should obtain certificates as doctors and nurses * * *."

Since 1927 the Catholic Medical Missionaries conduct a hospital in the North of India, exclusively for women and children. This limitation is necessary because of the rigid seclusion of the Mohammedan and Hindu women, who refuse to attend general hospitals or submit to the examination of men-doctors. This sixtybed hospital had 1,385 admissions in 1939, and 20,000 out-patients in its dispensaries. There were 272 deliveries, of which 52 were abnormal. This unusually large percentage of abnormals is caused in part by the great number of

flat pelves, deformed by osteomalacia. The incidence of osteomalacia in a country like sunny India is a good indication of the seclusion of its women in their small dark homes.

General surgery also claims a large share of the sister's work. Of the 650 operations in 1939, 78 were major procedures. Surgery in the Orient has the additional hazards of malnutrition, anemia and chronic malaria, present in nearly every patient. Anesthesia is almost always limited to open drop ether and chloroform. Transfusions are beset with all kinds of difficulties, due to fear among the patients and relatives, malaria and syphilis among the donors and danger of contamination of the fluids and apparatus. Even simple intravenous infusions are often accompanied by alarmingly serious reactions.

spite of all these handicaps a great deal can often be done for these women, and grateful patients carry away the first favorable impressions of Christianity in action.

The Medical Mission Sisters hereby acknowledge a debt of gratitude to the Catholic doctors of America who have helped and encouraged them in their new venture. They have taught and are teaching our sisters in medical and nursing schools. (Five of our sisters-doctors have graduated from schools in Philadelphia and Washington, and several students are following in their footsteps.) For all the encouragement and information, for the books and magazines, the instruments and drugs which our Catholic doctor-friends have sent us, we offer a heartfelt: Thank You.

Condolences

Just as this issue goes to press, we learn of the death of the brother as well as of the uncle of Dr. Thomas M. Brennan. We feel certain all officers and members of Catholic Physicians' Guilds throughout the country, will join the Executive Committee and the Linacre Quarterly in sending sincerest sympathy to Doctor Brennan, the zealous President of

the Federation.

The Secretary of the Federation, Dr. Frank L. Denzer, sent Doctor Brennan a letter in the name of the Executive Committee saying "The members of the Committee have requested me to extend to you and to your family their heartfelt sympathy and to tell you that they will offer up prayers for the repose of their souls."