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## A Physician at Vatican Council II

John R. Cavanagh, M.D.

*(This paper was presented at the National Federation of Catholic Physicians' Guilds Annual Meeting, Disneyland Hotel, Anaheim, California; December 1, 1967)*

The title assigned to me by your committee reminds me of Mark Twain and his book, "A Connecticut Yankee in King Arthur's Court." For the "Connecticut Yankee," however, the transport to the Court of King Arthur was by a magical trick, for the modern physician to attend Vatican Council II meant only the cost of transportation. In spite of this, there is a magic about Rome which gives an air of enchantment to Vatican City. It is ancient. The catacombs impress. They reinforce one's faith. We have nothing in this country to compare with the evidences of our faith preserved in Italy.

Today, for many, faith does need reinforcement. Today's doctors are particularly confused. They are in conflict concerning their moral role in the matter of sex and the family.

Before discussing the physician at Vatican Council II, it should be made clear that there was only one physician officially present at the Council. This was Luigi Gedda, who until recently, was president of the International Association of the National Federations of Catholic Physicians' Guilds.

Dr. Gedda was an official "observer" at Vatican Council II. The term "observer" should have been strictly limited to the non-Catholics who were invited to attend the Council but it seems in practice to have been applied indiscriminately to Catholic and non-Catholic alike. To the best of my knowledge, Dr. Gedda was the only physician officially accredited to the Council.

Your speaker, while there, was duly accredited as an auditor, a much less distinguished position, but nevertheless, the auditors were seated in a position which permitted better observation than did the seats of the observers whose backs were to the main aula.

While everything which happened at the Council was of interest, the content of Schema 13 dealing with The Church in the World Today was of primary interest to them as physicians. This Schema clearly brought home to the Catholic Physician his apostolate as a physician member of the laity.

In the body of this document it states: "Among the multiple activities of the family apostolate may be enumerated the following: . . . helpful advice and material assistance for adolescents, help to engaged couples in preparing themselves better for marriage, catechetical work, support of married couples and families

involved in material and moral crises, help for the aged not only by providing them with the necessities of life but also by obtaining for them a fair share of the benefits of economic progress.”

This gives to the physician a wide choice for his apostolate. Outside the Council both Pope John and Pope Paul sought out physicians to be of assistance to them in seeking clarification of the Church's attitude on birth control. This subject was specifically excluded from the statement of Schema 13 because Pope Paul had informed the Council that this was not a matter for their discussion. The Holy Father reserved this matter for his own decision.

I would like to make quite clear that the Papal Commission on Birth Control was not in any way connected with Vatican Council II. Some have confused this because they both were in session at the same time. It should also be clear that the Commission on Birth Control was first organized by Pope John and later augmented by Pope Paul. The first commission consisted of only seven members. This made no progress although it met several times. Later Pope Paul expanded the original Commission to fifty-five members of whom fourteen were physicians. Six of these fourteen physicians were psychiatrists. I wish to emphasize the large number of physicians because this was the most important assignment of physicians by the Holy Father in recent years to a specific apostolate. I also wish to emphasize the high percentage of psychiatrists on the Commission. This was the first time that the Church had recognized the importance of psychological factors in responsible parenthood.

One problem confronted the Commission — the Holy Father wanted a unanimous decision. As professional men you recognize the difficulty of getting fifty-five professional men to agree on any subject, even if we were to put aside the limited possibility that fourteen physicians could be unanimous.

The final report of the Commission has been published. It is no longer secret. You have seen that there was remarkable unanimity on most points. None of the votes were close.

However, the issue is still moot. I say it is moot because although Pope Paul VI, on October 29, 1966, reaffirmed the traditional teaching of the Church his statement did not have an air of finality. For example, he said the matter was still under study and that he had appointed a new Commission to study it. Both of these statements contributed to a lack of finality in the statement.

For the physician and the priest this statement of October 29, 1966 represents the present teaching of the Church. Neither should publicly teach otherwise. Rhythm and total abstinence are the only morally acceptable means for Catholics to achieve responsible parenthood. Most of us know that many Catholics are not following the directions of the Holy Father, nor are many Catholic physicians.

A year ago (December 9, 1966) Dr. Clark Westoff of Princeton University and Dr. Norman Ryder of the University of Wisconsin speaking at Notre Dame gave a preliminary report of their fertility study. They reported that: “A majority (53%) of Catholic wives between the ages of 18 and 39 are not conforming to Catholic

doctrine on birth control." The justification for this rebellion appears to be that they consider the number of children they have is their own problem of a very personal nature and is, therefore, dependent on their own conscience. This point I would leave to the theologians to discuss. Westoff and Ryder said the proportion of Catholic wives who were following Church doctrine by avoiding all birth control methods of resorting only to the approved rhythm method fell from 70 percent in 1955 to 47 percent in 1965.

It is a matter of conscience, however, for the Catholic physician to keep informed of all advances in the field of birth control, especially as they apply to Rhythm. There is, however, little new in this field. I recently attended the Third International Symposium on Rhythm in New York. Nothing new was offered there. The attendance had fallen off considerably since the first session which was held in Washington in 1964.

The Catholic physician does no one a favor if he merely proclaims the evils of all contraceptive measures. He should investigate and then assert the truth as he sees it. It serves no useful purpose, therefore, to indiscriminately assert the dangers of using "the Pill." It should be honestly assessed from the medical standpoint.

Another area in which Catholic physicians have been derelict is in

failing to properly study and teach the Rhythm. Too many Catholic physicians and priests belittle the biological efficacy of Rhythm.

Many of you are, I am sure, prepared to point out that the Catholic physician has an apostolate other than to those who need help to achieve responsible parenthood. With these I would agree. Although the Commission on Birth Control is no longer active, the question submitted to it for study is still unresolved. The physicians on the Commission were given a clear mandate to seek a solution to the family limitation problem. Your speaker, for one, was proud to be a member of the Commission. I have studied little else since my appointment. The same is true of the other members. This is, perhaps, why my thoughts turn to the subject when you ask me to speak of the Physician at Vatican II. I do not suggest that other aspects of the apostolate of the laity be neglected. I merely suggest that the subject of responsible parenthood which two Popes singled out for special study by physicians deserves your intensive study.

Vatican II brings to me memories of the Popes, the Pill, and the People. The people who wait on the Pope for a long delayed decision. It is the opinion of this physician that this decision has been delayed too long. I wonder if it is reversible.