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## Letter from Canada

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## Letter From Canada . . .

Bill C-150 is an omnibus bill relaxing requirements for divorce, permitting homosexual acts between consenting adults and laying down criteria and procedure for performing legalized abortion and sexual sterilization in certified hospitals as well as other changes in the Canadian Criminal Code. This bill was introduced by the Minister of Justice John Turner (a Catholic) under the Liberal Prime Minister, Pierre Elliot Trudeau (a Catholic). A free vote was not permitted — all members of the party being obliged to vote for the government bill. No amendments were successful. Now awaiting passage by the Senate, it is about to become law in Canada.

I wish to discuss only the consequences of this change in law, relating to abortion and sterilization and its effect on Catholic hospitals in Canada.

The current constitutions of Canadian Catholic hospitals have incorporated into them statements to the effect that the Code of Ethics of the C.M.A. (Canadian Medical Association) and the moral code of the Catholic Hospital Association shall govern professional conduct of its staff and that where there is conflict, the Moral Code shall take preference. This Moral Code was written in booklet form around 1943 and adopted by The Canadian Catholic Hospital Association. Currently, it is supposed to be in the process of revision. No changes have yet been published.

For some reason, administrators of some Catholic Hospitals seem no longer secure in enforcing this Moral Code; even though it remains in their constitution. It would appear to me that because governments are paying the hospital bills of patients and having more say in hospital construction and operation, the Roman Catholic Orders running hospitals feel they must, as community hospitals in a pluralistic society, no longer insist on the Code being enforced. Therefore, in some Roman Catholic hospitals, direct sterilizations are now being permitted, as long as the legal and medical requirements of the staff have been met. Indeed, I believe that some Catholic Theologians are preaching this as being moral and correct. Is "therapeutic" abortion going to be next?

Perhaps it is difficult to enforce and perhaps, as administrators only, there is no longer the power to control and enforce. If this is so; why Catholic hospitals?

This new law in Canada empowers Hospital Boards of Administration to set up sterilization and abortion committees, who will review submissions and pass judgement on them, according to standards set by the law. There is no requirement that hospitals set up such boards, although an amendment to specify this not allowed by the government.

Current practice reveals that there is a tremendous variation in the frequency of sterilization and abortion in various hospitals and various localities. When further studied, it reveals that one or two individuals become largely responsible for this variation. But in all hospitals, where it is current practice to allow liberal sterilization and abortion, the number of such procedures doubles every six months.

I would like to remove myself from any implied pressure of the law, to carry out procedures which I feel are morally wrong and not medically indicated. I feel no conflict of patient interest by never carrying out these procedures and I practice Obstetrics and Gynecology. I also feel that Catholics have no monopoly on good ethics. Most Christian doctors and many non-Christian doctors do *in fact* respect life from conception to death. They therefore would agree to the moral code which I follow.

The following is a simplified code which I think should be acceptable to any hospital staff. It is neither Catholic nor Christian, but follows from a belief in a Supreme Creator, the dignity of man and the belief in a hereafter. This belief, I feel, is shared by most doctors.

### THE MORAL CODE

The moral code of this hospital is based on the following beliefs:

1. That human life, from conception to death, has a dignity as a creature of God, with an eternal soul and life hereafter.

2. That patients have a right:

- a. To privacy.
- b. To integrity of person.
- c. To quality medical care.
- d. The right to die, as well as the right to live with dignity.
- e. The expectation that their consciences will not be violated, (use of blood by Jehovah's Witnesses, etc.).

3. That the spiritual needs, as well as the corporal needs of patients, require consideration.

It therefore follows that under this code of ethics, *direct* killing and *direct* sterilization is prohibited. Thus prohibited would be induced abortions, euthanasia, tubal ligations and vasectomies.

However, *indirect* killing and *indirect* sterilization is licit when medically indicated, such as:

- a. Salpingectomy for ectopic pregnancy or disease.
- b. Hysterectomy.
- c. Castration for carcinoma of the breast or other disease.
- d. Heavy sedation in terminal illnesses.

Physicians practicing in this hospital have a responsibility to the hospital and to the patients to provide quality medical care while adhering to this code of ethics.

The medical aspect of good medicine is certainly easier to take than the permissive legal aspect of our Canadian Catholic legislators have promulgated.

J.B. Costello, M.D.  
Vancouver, B.C.,  
Canada.

## Letters To The Editor . . .

To The Editor:

The Catholic Physicians' Guild could make a very valuable contribution to North American society if they became involved in the major issues which concern the members as Catholics and as physicians.

The articles in the *Linacre Quarterly* over the years have been mainly about the catechetics of sexual morality, sex instruction of children, contraception, sterilization, and also about death, abortion, and euthanasia. At least since Vatican II these topics are the concern of the individual conscience. The subject matter has been overworked and the discussions become tedious and somewhat irrelevant and are reminiscent of the debates for and against the pasteurization of milk.

Thomas Linacre was an eminent physician and humanist and was respected by such men as Erasmus and Thomas More. The editor should attempt to emulate his efforts.

The whole involvement of the Catholic Church in the Health-Science fields must be completely restructured. This includes Catholic educational facilities, Catholic hospitals and Catholic social agencies and Catholic foreign missions. We cannot preserve the anachronistic institutions of the

past but we can adapt them to the needs of the present and of the future.

Yours sincerely

Paul M. O'Sullivan  
Don Mills, Ontario

To The Editor:

I am sorry to say this but your moralists are about twenty years behind the average Catholic Physician. Why not print something by Hellegers of Georgetown University, Obstetrics & Gynecology Dept.?? It is silly to have ENT men talking about birth control when they do not touch the problem in their offices.

Sincerely,

J.E. Gottemoller, M.D.  
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To the Editor:

Get relevant! Please cancel my subscription.

Sincerely,

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