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Letters to the Editor ...

Catholic Physicians' Guild

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Letters To The Editor . . .

PSYCHIATRIST OBJECTS

TO THE EDITOR:

I am constrained to reply to Eugene Diamond's article in the May, 1971 issue of *The Linacre Quarterly*, entitled "Contraception and Abortifacients". Being a practising Catholic psychiatrist, I make no claim to be an expert in the Contraceptive-Abortion sphere. However, I have reviewed the great bulk of English literature, relating to the intra-uterine device published since 1969. I find in Dr. Diamond's article opinions are stated as revealed fact. This certainly does not aid our cause. I am amazed that a man who holds the title of Professor of Pediatrics at Loyola University would fall into this sophomoric trap.

In particular, I refer to:

1. His quotation from an *Editorial* in *California Medicine*, 113:67, 1970. "The result has been a curious avoidance of the scientific fact, which everyone really knows, that human life begins at conception and is continuous whether intra or extrauterine until death. . ."

I contend both that this has not been proven as a scientific fact, and not "everyone really knows etc."

2. A quote from page 125 begs the question "Where human life exists, a soul exists. . . ."

It would seem that since even Aquinas could not set the time of infusion of the soul (but speculated that it occurs about the sixth week of gestation), Dr. Diamond is exceeding his bounds as an authority.

3. His assumption without any hesitation that the IUD acts as an abortifacient. Even the most recent literature including a recent statement in *JAMA* indicates that the mechanism of action of the IUD is far from clear.

Respectfully,
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PEDIATRICIAN REPLY

TO THE EDITOR:

When I submitted the article on abortifacient contraception, I hoped that it would be provocative and even controversial because this issue has been underaccentuated or even evaded, at times, in Catholic circles. I, therefore, welcome Dr. Verdon's commentary. I can only be responsible for what the article says, however, and not for every inference drawn from its content. I will attempt to respond to the issues raised. In doing so, I will state opinions, use facts to support opinions but make no claim to "revealed facts" nor to a special access to the Author of Revelation.

1) The quotation from *California Medicine* is clearly identified as such and set off with quotation marks. It is the statement of an editorial writer with which I obviously agree for the following reasons:

- a) The fertilized ovum is certainly alive at conception, exhibiting the ability to reproduce dying cells which is a biological hallmark of life.
- b) The zygote resulting from the fusion of a human sperm and a human ovum is certainly human. It possesses the human chromosome number of 46 and is clearly distinguishable from the fertilized ovum of any other non-human species.

During my recent encounters with members of the pro-abortion lobby in the various professional disciplines, I have found practically no disagreement with the contention that some form of human life is present at conception. Obviously men of good will can and do disagree as to whether human "personhood" is present at conception or as to whether the conceptus is "animated" and as to whether proscriptions against abortion should apply at conception or at some later time such as nidation or "viability". Such speculation is alluded to, in my article, on page 123.

2) I make no claim to authority on the time of infusion of the soul (I wonder if there is

such a person as a bonafide human authority on this subject). Dr. Verdon quotes me out of context. I state that "where human life exists, a soul exists" only if one accepts the preceding clause on page 125 to wit: "The term 'soul' is accepted in the sense of a vital principle which exists in all living persons. . ."

When St. Thomas stated his opinion as to the time of infusion of the soul, he based his opinion on the best biology of his time which was Aristotelian biology. Modern biology has obviously discarded the notion that the female provides the matter and the male the form. No one talks about the homunculus anymore in scientific circles. Using modern biological insights, both the medical and the ethical committees at the Kennedy Foundation-Harvard Divinity School Conference on abortion concluded that life begins at conception. It would seem that it is incumbent on anyone seeking to justify post-conceptual attacks on the embryo to *prove that life does not exist* at this time.

3) I do not assume "without hesitation" that the IUD acts as an abortifacient and do not so state in the article. I am well aware of the controversy in the literature that the IUD acts as an abortifacient and regarding the precise method of action of the IUD. I am aware of the studies in lower animals which suggest that it may act to impede sperm migration or to impair corpus luteum development. Here again, however, those who wish to prescribe this method of contraception (or the oral progestins) must accept the burden of proving that it does not act as an abortifacient. They must do so in the face of a rather formidable literature suggesting that it does have an action definable as abortifacient in humans. The following statements, for examples, are supportable from published experimental data:

- 1) Intrauterine contraceptive devices do not stop ovulation(1)
- 2) They neither block the oviducts nor slow down tubal peristalsis(2)
- 3) They do not totally intercept the spermatozoa(3)
- 4) Normal fertilization takes place in the Fallopian tube(4)
- 5) Fertilized ova, continuing primary cell division and producing the blastocyst may reach the uterus(2)
- 6) The endometrium undergoes normal cyclic changes(1)

- 7) If the device is correctly placed fertilized ova cannot embed themselves and cells of the blastocyst undergo degeneration(5)
- 8) If the device becomes partially displaced, implantation becomes possible(6)
- 9) The IUD reduces uterine implantation by 99.5%(7)
- 10) The IUD either does (8,9) or does not (10,11) increase tubal motility. In either event, since fertilized ova can be recovered from the tube with the IUD in place (12), the contraceptive effect related to tubal motility would be equally effective in causing both fertilized and unfertilized ova to reach the uterus prematurely.

There are many allegations as to how the device might impede nidation, (13, 14, 15) all or none of which may be true. The contention that the IUD acts as an abortifacient is tenable, impossible to prove or disprove beyond doubt.

Dr. Verdon does not make clear what he means by "our cause". I presume that he means the Catholic cause. Since the word "Catholic" implies the whole truth, I believe that dialogue and discussion do all our cause. The cause of open discussion is also served by resisting the temptation to use pejorative terms like "sophomoric" to describe those who argue from a different viewpoint.

Sincerely yours,

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WANTS A GOD OF LOVE

TO THE EDITOR:

This letter refers to an article in the November, 1970 issue of the *Linacre Quarterly* on p. 243 entitled "Assistance at Immoral Operations." I was extremely disappointed in this article for several reasons which I think are both valid and essential to our understanding of this topic.

Firstly, I believe that the material in this article was presented in a way completely "at odds" with the thinking which Pope John tried to establish in Christian minds and hearts. It is impossible for an outsider to say that in any of the situations listed, one is committing grave sin. It is a hard sentence to deal to a person when the author has not been present in the given situation. It is obviously not realized what difficulty assails those nurses and medical students who daily face situations where they are warned to ponder carefully their actions, at the risk of going to hell. I can assure the authors that those in this situation are not in this position for selfish gain but for love of their sick neighbors and a wish to serve them in charity.

I would not be so much disturbed at this article were it not published in a magazine which bears the name of the Catholic Physicians' Guild, a magazine that will be widely read. This is the attitude which the general public may take as that of Catholic Physicians as a whole.

I feel that the biggest mistake is to

present to the readers a view presented on p. 248.

"for such things as therapeutic abortion, sterilization, advice about contraceptive devices. . ."

I feel it very important that Catholic physicians first be very clear in their own minds the big difference between the real murder of abortion and such acts as the use of oral contraceptives and the performance of tubal ligations. Certainly every Catholic physician should be militant against the former where one of God's precious children is destroyed, but there are so many situations known only to those involved in each particular case where the latter two acts are both acceptable in conscience and thus pleasing to God. By grouping all these things together as equally evil, one misses the whole concept, it seems, of the basic differences between them. The world, it seems, believes that Catholics reject contraception, sterilization and abortion with one gesture. It would seem that we will never have any effect on the present state of affairs if we allow this misconception to remain.

I believe that we can do much more to follow the spirit of Christ in the 1970's if we do less of the fear based reasoning on which this whole article is based. Let us not ask whether a certain nurse will be condemned to eternal punishment for handing a surgeon the given instrument. Let us instead pray, trust, and love, and in each circumstance follow a conscience built on this love. There is no way that Christ could be displeased. We must follow a God of love, not the "Nitpicking" God portrayed in this article.

Thank you.

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CANADA

LIKED ABORTION ISSUE

The latest issue (Feb. 1971) of the *Linacre Quarterly* is really outstanding. Congratulations.

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