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President's Page



Faith, Hope and Charity: There Are These

Probably every president before me, and each one who follows, will find himself in awe of the task only after he has it. But I thank each of you for giving me the job, because it has already shown me how much I am in need of prayer, both my own and yours, if I am to do the job well.

And praying sometimes becomes a thing of the middle of the night, a thing that wavers between planning, worry and meditation. Planning led to the theme of next year's meeting, the theme of the year, the Holy Trinity, symbolized in North America and its three nations, Mexico, the United States and Canada. Worrying (disorganized thought) led to thinking in threes one night, and faith, hope and charity came to mind. Contemplation, or meditation, asked how these three fit the theme.

When I think about faith, I see it as both a natural virtue and a supernatural virtue. Faith, as a natural virtue, is present in our practices every day. You and I, practicing medicine, have faith in our own skills and knowledge. Each of our patients has faith in us, our knowledge and our medicines and techniques. Where does this faith come from? Our patients' faith in us comes from a friend or relative who

first sent the person to us. It is reinforced (nurtured and fed, if you will) by knowledge of us gained by contact, and shared with others.

When I think of faith as a supernatural virtue, I think first of the faith in which, and with which, I grew. I recall the simple, deep and unquestioning faith of my mother and the other women of our parish. These, for the most part, were women without much formal education. Many had completed grade school, some high school, few college. They believed in God and His Holy Mother, and His Church. And, as I think back, many of them had insight into the nature and attributes of God worthy of a most learned theologian. (St. Matthew says in chapter 11, verse 25: "On one occasion Jesus spoke thus: 'Father, Lord of heaven and earth, to you I offer praise; for what you have hidden from the learned and the clever you have revealed to the merest children.'") Their faith was such that they did not believe in God. No! They had passed belief. They *knew* God. They did not believe in His providence; they *knew* His providence.

Today I no longer see much of this kind of faith around me, only in a few older patients. But I do see it in the people of Mexico. I wonder why. Can it be because the people of Mexico are guarded in their faith by Our Lady of Guadalupe? When the New World was discovered, the Faith was first planted on the North American continent in what is now Mexico. One lifetime later, roughly 60 years, Our Lady appeared to an illiterate Indian, Juan Diego, and gave us her portrait. Ever since then, Mary has been venerated by the people of Mexico. Despite anti-clerical suppression of the Church, despite colonial excesses, despite agnostic and atheistic intellectualism, Our Lady of Guadalupe remains dominant in the hearts and minds of the Mexican people. Indeed, it is said that in Mexico, even the atheists pray to Our Lady of Guadalupe.

And so to me, of the three nations of North America, Mexico is the Land of the Faith. As God has preserved the Faith in lands where His Mother is revered, in spite of adversity as in Ireland and Poland, so, too, He has preserved it in Mexico, a simple trust in Mary and her all-powerful Father, Her Divine Son and her all-loving Spouse.

But what has this to do with us, in the practice of medicine? A great deal. If you and I do not have faith in God, if we do not include Him as our most essential partner in our decisions, if we do not turn to Him for guidance, we leave out the greatest assistance available to us. It is quite easy to give God lip service. But do we really rely on His help and ask for it when we have a problem? Do we say a short prayer while we scrub for surgery? Do we defend His law when it is denigrated in the coffee shop?

Perhaps the most important way we can feed and strengthen our own faith, outside of prayer and reflection, is by sharing it. How often do you talk about God with a patient? Have you ever given a patient, as part of your therapy, a prescription to go to church? Have you

advised a distraught young husband or wife whose marriage is in danger of breaking up, to make a weekend retreat? Do you believe enough in God to share that belief with the people He entrusts to your care? Do you talk with dying patients about Divine Providence? Do you remember the expression, "Offer it up"? (It seems some sister was always saying that to us in grade school those centuries ago. I don't hear it very often anymore.) When was the last time you talked to one of those lonely old people, one of those who feels so useless, and talked about the usefulness of one rosary a day, offered to the Sacred Heart of Jesus through the Immaculate Heart of Mary in atonement for the sins of the world? You know Mary has warned us that this is the only salvation of the world. How useful these lonely ones can be! And you are perhaps the only person who can reach them and remind them of how much the rest of us need them, and give them a real sense of their own value here on earth.

God has chosen each of us, uniquely and specially. He has given us the gift of Faith. He has given us special knowledge and skills. He has given us His people to care for and to have intimate contact with, in very special ways not given to others. We can utilize these gifts separately and independently of each other, or we can join them and use them inter-dependently. We are all doctors. We are all Catholics. Are we really all Catholic doctors?

When we offer God to our patients as part of our daily practice, as a considered and essential part of our therapy, all of our patients need Him, most welcome Him, some ignore Him. But in the right time, all will turn to Him if encouraged properly. Remember the Mexican saying that in Mexico, even the atheists pray to "La Guadalupana."

HELP! HELP! HELP!

I am desperately in need of help from Spanish-English bilingual members to assist in planning and preparing for the 1983 meeting from Sept. 27 through Oct. 1 in Mexico City. Among other things, I need a few people to handle correspondence with Latin-American doctors and bishops, a few people to work with residents in Mexico City on local arrangements and the liturgy, and quite a few people who can function during the meeting as hosts and coordinators. If God has blessed you with dual language skills, will you volunteer and

share them? Please send me your name, address and home and office phone numbers. (It's cheaper on my phone bill to call you at home at night rather than in the middle of the day when you are also busy with patients.) Or . . . my own home phone is 312-848-9386.

One of the first fruits in the effort to establish guilds in Latin America may be in the Dominican Republic. They have asked us for a copy of our constitution and bylaws and will receive the first Spanish translation. Elsewhere in this issue is an address to which you may mail your medical samples. If you would like to share a little more, send a small check to the NFCPG Scholarship Fund and we will use it to support a destitute medical student in the Dominican Republic. Even small donations are welcome.

Some people say that all we are about is pelvic morality. Shall we prove them wrong?

— William Fitzsimmons, M.D.
President

SAMPLE MEDICINES FOR THE MISSIONS

WOULD BE WELCOMED BY:

*Plasencia
P.O. Box 122
Marshalls Creek, PA 18335*

*and Holy Spirit Missions
Convent of the Holy Spirit
Techny, IL 60082*