That Inspiring Cup of Dark, Delicious Coffee was Prized as a Medicine in Ancient Times

Catholic Physicians' Guilds
lung cancer can occur in women with little or no smoking experience. As female religious are a controlled group of the population with follow-up readily available, scientific appraisal of the occupational predispositions and relative immunities to various diseases can be of value to religious superiors and general public alike.

The data collection methods employed do not warrant any statistical conclusion. Furthermore, no reports were received from 503 of the 986 Catholic hospitals addressed, and female religious diagnosed in community infirmaries were reported in elderly female religious with no prior smoking experience. The collection of 48 cases of primary carcinoma of the lung in nuns would seem excluded from this analysis. The collection of 48 cases of primary carcinoma of the lung in nuns would seem to indicate that lung cancer can occur in women with little or no smoking experience.

physicians' overseas service
An "energetic lady doctor" for Nigeria . . . a "surgeon willing to come to India" . . . a "general physician who will take over in Okinawa" . . . Tanganyika, Peru. Ghana, Mexico, Korea, Formosa, Kisantu . . . are underdeveloped areas begging American professional assistance. The Professional Service Desk of the C M M B will be glad to provide information on openings overseas for medical and paramedical personnel willing to serve for one, two, three years or shorter terms. Please write:

Professional Services
Catholic Medical Mission Board
10 West 17 Street
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comment: It is estimated that this study embraces most admissions to Catholic hospitals (in 100,000 nuns) over a period of ten years. As the majority of lung malignancies covered by this survey were reported in elderly female religious, and as smoking was uncommon in women at the time of their entry into the novitiate, the results obtained may well represent lung carcinoma data from the last large group of female religious with no prior smoking experience.

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This study has been sponsored by the Committee on Medical Care of Clergy and Religious of the National Federation of Catholic Physicians' Guilds and the Catholic Hospital Association, and by the Louisiana Division of the American Cancer Society.
As the taste for coffee spread, European doctors perpetuated the medical claims of Mohammedan physicians. Coffee's "virtue" were soon incorporated into Europe's materia medica. The German humanist, Johan Vesling, wrote: "The first step it [coffee] made from the cabinets of the curious, as an exotic seed, was into the apothecary shops as a drug."

When coffee reached Marseilles, it ran into its first real opposition from the medical profession. Not only did the good doctors dislike coffee's complete acceptance, they went to the opposite extreme and called it poison!

To support their contention, in 1679 they invited a young medical student to recite a thesis as to whether or not coffee was harmful. Since the young man was eager to be admitted to the College of Physicians, it is hardly necessary to state his position. He launched a stinging attack upon the beverage.

The effect of the speech was not what the doctors ordered. People had already developed a great fondness for the pleasant new beverage. Moreover, they were unimpressed by the unfounded charge against it. Instead of curtailing coffee's use, the publicity sent coffee consumption soaring. For the first time in history, merchants imported coffee by the shipload.

While the French physicians of Marseilles were condemning coffee, English physicians were prescribing it for a long list of ailments. The concensus of opinion in England seems to have been that coffee was good for the brain, heart and digestion. It was also prescribed for such illnesses as dropsy, consumption and the King's Evil.

Until the 1700's, most English physicians regarded coffee mainly as a medicine. But there was an earlier British doctor who forecast coffee's future, not in the medical kit, but on the dining table. William Harvey, who discovered the circulation of the blood, left a legacy of enlightenment when he died in 1657. With the statement, "This little bean is the source of happiness and wit!" he bequeathed fifty-six pounds of coffee to the London College of Physicians, directing that his friends should gather once a month to drink coffee in his memory.

Nowadays, we rarely consider coffee's medical past. The medical claims gradually subsided as doctors learned what the man in the street discovered centuries ago. That is, simply, that coffee has a place in the scheme of things because it pleases our palates and lifts our spirits.

Anyone for a cup — black or with cream?

We include this story of coffee's medical past with the kind permission of Coffee Newsletter, August 1961 issue, published by the Pan-American Coffee Bureau, New York. Sources for the material gathered by Dorothy Hopkins, Publicity Assistant of the Consumer Services Dept., are All About Coffee, by William H. Ukers, and The Saga of Coffee by Heinrich Eduard Jacob.

**MORAL CONSIDERATIONS on AUTOPSY**

Richard A. McCormick, S.J.*

The first autopsy on medical record occurred in 1341. From that time on the practice grew gradually until, in the last century, Nokitsanksy and Virchow brought the study of the human cadaver to a new dignity. Through the efforts of such masters, new and more precise knowledge has been made available and has brought enormous benefits to medicine and the clinical sciences. By now the practice is frequent enough in modern medicine that the words "autopsy" and "post-mortem" come easily to the lips of even the rankest medical amateur. However, if few are ignorant of the procedure, there are still many with distorted notions of its morality. Some wonder that moral considerations are operative at all when there is question of a cadaver; others, usually from mistaken religious conviction or an unenlightened and sentimental delicacy condemn the operations out of hand as brutalities. Both positions are of course, extremist. This article will attempt to summarize the standard moral teaching on the autopsy.

The sources for such a presentation, besides the popular manuals of medical ethics, are two talks delivered by the late Pius XII, one a short summary (which did not deal with autopsies in particular but with the use of the human cadaver for scientific purposes in general), the other a very thorough analysis of the moral considerations. Furthermore, as the Pontiff has indicated, since only the most general truths (scarcely sufficient to provide the detailed needed) emerge from natural law and dogmatic...