The Catholic Doctor and the Church

VERY REVEREND G. D. BOYLE, S.J.

We hear much these days of the apostolate of the laity; and I think it might help if we begin by clearing our minds on this subject. Every Christian is, in virtue of his Christian profession, an apostle, i.e. he is sent by God. God the Son was sent by the Father; He in His turn sent the Holy Ghost; and the Holy Ghost sent the apostles on their mission when He descended on them at the first Pentecost. That same Holy Ghost descended on us at our baptism, and gave us our mission to bear witness to the truth, to spread abroad through the world the Gospel, the revelation which Christ was sent on earth to make known to us. This we are to do each in his own way according to the function allotted to him; some to administer the sacraments and preach the word of God as ordained priests; some as laymen to carry with them into the world in which they live the light of the Gospel through being the persons of sorts they are, through the sort of views they express and the sort of life they lead.

In distinguishing between clerical and lay we think too much in terms of rank and dignity, of rulers and ruled, teachers and taught, almost first and second class citizens. We would do better to think with St. Paul in terms of variety of function. After all the Holy Father himself is no more a member of the Church than you or I. His function is unique, and that function rightly gives him a special rank and dignity; but the rank and dignity flow from the function, not vice versa. Your function, your contribution to the apostolate of the Church is no less real than his and hardly less necessary for its fruitful performance. Indeed, as a recent address to Catholic graduates by his Holiness declared, it was the task of the lay community to act as a bridge between the Church and the secular world. They are full members of the Church, and they are living in the world; and the Holy Father did not hesitate to add that, for that reason alone, they have a foot in both camps, and are therefore better qualified than any clergy to ensure that the world is not deprived of the message of Christian salvation. The Civilita Cattolica, commenting on this and other recent papal declarations, had this to say: "The laity is the Church is not internal minnion who must merely listen and obey, but must help the hierarchy of the Church with their advice and experience, if necessary; but even bitter or harsh, so long as it may carry out better its mission of preaching the Gospel to the world, which is today, which is not the world of yesterday, and whose need the laity are best qualified to know and make known to the Church."

What, then, is the special function of the Catholic doctor in the Church? It is in his person that the teaching of the Church in medical matters is made known to the profession at large and, which is no less important, it is in his person that the thinking of the medical profession is in turn made available to the Church. It is our duty to take its due place in moulding her conceptions and determining her decision.

What happens when an infallible decree is made? There is no claim to divine inspiration. There is no second

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Ethical and Legal Disciplinary Problems
Facing Medicine Today

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The medical profession continues to face ethical and scientific excellence. In 1847 at its first meeting the American Medical Association adopted a Code of Ethics for the profession. Part of this code reads: "Medical ethics is a branch of general ethics which must rest on the basis of religion and morality. They comprise not only the duties, but also, the rights of a physician."

I believe the present principles of medical ethics are twofold: first, those ethical principles which protect the public and advance the profession; and second, those ethical principles which further the patient-physician relationship.

Seeking evidence surrounds us that the people of this state and nation are vastly more medically conscious than ever before. On every side there seems to be increasing patient and public interest in the problems of adequate medical care. And we in the profession must express to the people our eagerness to develop and utilize whatsoever medical and social mechanisms are necessary and desirable to discipline several thousand members of the medical profession who misuse them or the people's trust.

We have been cognizant for some time at all levels of medicine that the profession needs and requires regulation and continuing maintenance of high standards. However, in recent years we have not made sufficiently visible the importance of this problem. In the past few months signs on the legislative horizon have arisen in several states which would involve the Government more deeply in the practice of medicine—in its cost, availability, and most importantly, in its quality. In our own State of California legislative interim committee hearings are now being held on the vital subject of medical discipline.

In general, problems in California pertaining to the breaking of the law come under the jurisdiction of the Board of Medical Examiners. These relate to performing an abortion, narcotic addiction, alcoholism, income tax evasion and mental illness. Ethics offenses traditionally come under the county medical society and the California Medical Association.

Between these two broad areas—jurisdiction of the Board of Medical Examiners for legal offenses and the ethics procedures of medical societies—there remains a significantly important "gray area of concern." This "gray area," acts are committed which may be contrary to medicine's high ideals of practice yet are not technically violations of either the law or stated ethical principles. These cases represent a most perplexing problem to the responsible members of the profession.

A frequent complaint concerns fees. Obviously, misunderstandings of this kind arise less often if prior to service, fees are discussed with the patient and a mutually satisfactory arrangement made.

Also, in this "gray area," we find incompetence due to age, intemperance.