May 1965

Letters to the Editor ...

Catholic Physicians' Guilds

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of the seriousness of illnesses other than organic illness. He needs the guidance and the direction which medicine can give as he counsels with his parishioner. It is through these programs that the two professions may find a new understanding, a new relationship, and become colleagues.

The confidence that the average family places in its clergy and physician requires that the two consult with each other whenever necessary. From their collective judgment will come the means for providing the most effective care and treatment of the patient as a whole man. This is the new concept. Then, there are the two forces — medicine and religion — with one goal: that you and I may receive the first care and treatment in our illness, knowing full well that illness may be organic, may be spiritual, may be emotional, may be social. This, then, is our goal — total care.

QUO VADIS . . . ?

Whether thou goest . . . ? This has been a leading question in the mind of man ever since the beginning.

The Twentieth Century and its busy society has left man man, it seems, only a span of time to ponder his future. Today, our civilization, spurred on by the accelerated pace of modern science, is plunging into that future at a fantastic rate. . . . If we do in fact if we pause to look at that future, we often find it has already become the past.

Who would think that within two decades of World War II modern science would have given us protection from many deadly diseases? Polio, smallpox, pneumonia and tuberculosis, to name only a few, twenty years ago still claimed many lives a year. Now they are treated routinely.

Who had the foresight to see that the by-products of our space into space would provide us with new metals, new alloys, and marvelous new plastics from which to shape a whole new nomenclature? Modern tools with which the surgeon using new, bold techniques, now repairs the valves of a human heart, reshapes the deformity of a twisted bone?

Such advances just don’t happen. They are the results of research. This research is the product, itself, of our universities, our teaching hospitals, and our laboratories. Research requires dedicated minds following the leads of painstaking procedures — testing, weighing, evaluating and assembling knowledge into a meaningful whole.

Even though the accomplishments of the past few decades seem enormous, and the promise of the future of medicine is greater than ever, the deeper we dig into this vast region of the unknown, the more we begin to realize the vastness of creation and the skill and wisdom of the Creator.

im'pe tus
Creighton Memorial Saint Joseph’s Hospital, Omaha, Nebraska

Letters to the Editor . . .

Brief communications are welcome and will be printed as space permits, subject to the usual editing.

TO THE EDITOR:

I have read with great interest your articles on doctors in the mission fields in The Linacre Quarterly. However, I cannot make a comment on same.

It appears to me that from my own experience working in Harlem among the Negro population of New York City, and after a somewhat extended visit to Mississippi where I toured the areas where the Negro population is concentrated, that the great need for the missions of the Catholic Church in this country is to the disenfranchised Negro in the South. With all the good will in the world towards the missions of foreign countries, I believe our own country is in great need of missionaries — priests, brothers, and sisters as well as physicians — to attend the spiritual as well as the physical needs of our American Negroes.

A great tragedy of American life to me is the fact that a segment of our population has been exploited by another much larger segment, namely the white American population. I believe that the American Catholic physician can do much to provide medical help for the Negro.

Daniel F. Casten, M.D.
Director of Surgery, Sydenham Hospital
Attending Surgeon, St. Clare’s Hospital
New York

TO THE EDITOR:

It was very disappointing for me to see an article entitled, “Ovulation Regulation” by Harold M. Groden in the February Linacre Quarterly. Part 2 of same is characterized by sweeping medical statements not borne out by medical data or references. Your editorial note on Page 6 stating that the writer of the article is a gynecologist is misleading. The article is written by a non-medical person whose qualifications to write on such a subject are in question. I believe that your editorial note concerning this article was not done in good taste.

I am in agreement with other gynecologists who have written to me about this subject. I am sure that you will receive many more letters on this subject and there is a need for such a discussion about this subject without adding more.

G. C. Nabor, M.D.
Dallas, Texas

May, 1965
TO THE EDITOR:

It has been brought to my attention recently, as a moral member of the medical profession, that many Catholic physicians would prefer that confessors refrain from advising patients whose cycle is too irregular to allow the rhythm to consult a gynecologist who can probably correct the problem through the use of the pill.

I am convinced that a large number of confessors believe that the pill has been highly successful and consequently, has general approval of most members of the medical community. Many confessors publicly advise their patients about the pill.

However, if it is true that most medical men do not believe in the use of the pill, then it is evident that the pill is not too successful, and if they would prefer that confessors refrain from giving such advice to their patients, I feel that this advice should be published, since it will be of value to all concerned.

I would like to write an article on this problem for one of our professional publications for priests. However, before I would do so, I would like to have the advice of a number of doctors. I would also be pleased to know about any literature in this area of which you may be aware.

(Ren.) Eugene J. Weitzel,
Vatican Seminary
1212 Otis St., N. E.
Washington, D. C. 17

that many medical professionals would prefer that confessors refrain from advising patients whose cycle is too irregular to allow the rhythm to consult a gynecologist who can probably correct the problem through the use of the pill.

I am convinced that a large number of confessors believe in the pill because it has been highly successful and consequently, has general approval of most members of the medical community. They quite readily and frequently advise their patients about the pill.

However, if it is true that most medical men do not believe in the use of the pill, then it is evident that the pill is not too successful, and if they would prefer that confessors refrain from giving such advice to their patients, I feel that this advice should be published, since it will be of value to all concerned.

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CONTRIBUTORS TO THIS ISSUE

DR. JAMES T. NIX, president of the Catholic Physicians' Guild of New Orleans, was host to the Conference on Medical Education and Research held in that city last November 13 and 14. An entire afternoon of his planning was devoted to a symposium concerned with the Health Care of Religious. For several years, Dr. Nix has been chairman of the committee within the National Federation devo ting extensive attention to a program of guidance in the field of science and technology, medical education, and research, to benefit medical profession. The organization has offices in Chicago, San Antonio and Montreal.

John M. Danielson is executive vice president of Evanston Hospital, Evanston, Illinois. Active in numerous hospital associations, he has served in administrative capacity for North Shore Hospital, Evanston, Illinois; Roosevelt Hospital, New York City, and Johns Hopkins Hospital, Baltimore, Maryland.

Thomas F. Frawley, M.D., F.A.C.P. Dr. Frawley is interested in teaching programs, at present directing his attention to the university hospital. He is professor of Internal Medicine and Chairman of the Department of Internal Medicine at St. Louis University School of Medicine in St. Louis.

Harold B. Haley, M.D. is past president of the very active Catholic Physicians' Guild of Chicago. He is Associate Professor of Surgery at Stritch School of Medicine, Loyola University in Chicago.

Herman I. Kantor, M.D., F.A.C.O.G. is Chief of the Obstetric Services at St. Paul Hospital, in Dallas, Texas.

Luke R. Pascale, M.D. is a cardiologist and member of the Heart Station, St. Catherine Hospital, E. Chicago, Indiana. His work also takes him to

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