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Anthony V. Pisciotta

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## The Quest for Excellence

ANTHONY V. PISCIOTTA, M.D.

*Knowledge and wisdom far from being one,  
Have oft-times no connection.  
Knowledge dwells in heads replete  
With thoughts of other men;  
Wisdom in minds attentive to their own.  
Knowledge is proud that he has learned so much;  
Wisdom is humble that he knows no more.*

WILLIAM COWPER (1731-1800)

The intellectual performance of Catholics has undergone a searching scrutiny in recent years. With few exceptions, articles in both Catholic and secular press report the same charge; Catholic intelligentsia has failed to achieve distinction in the sciences, arts and literature. The end result is minimal Catholic representation in American science and culture. What is true for the intellectual community at large, also seems to apply to medical schools affiliated with Catholic universities and their graduates.

The classification of medicine, medical schools, science and physicians into Catholic and non-Catholic categories is questionable. There are medical schools in Catholic universities, and physicians and scientists who happen to be Catholic, which implies something totally different. Despite the concern of the Catholic university with spiritual and moral questions, the primary mission of the Catholic affiliated medical school is similar to that of the secular institution. Its three spheres of activity include educa-

tion,\* research, and service, (not necessarily in that order).

Education is composed of an active (learning) phase, which includes research, and a passive (teaching) phase, in which information is disseminated to students and house staff by lecture and by fiat. In most effective educational organizations the faculty participates in education as a more advanced grade of student. Service is provided by medical school staff members in a number of ways. This includes expert medical consultation to the community, hospital and out patient departments, and consultation to government and industry. Different schools perform these functions with varying degrees of effectiveness, depending on the physical facilities at hand and the kind of intellectual climate that is engendered.

\*The term education is used in preference to "training" since the latter brings to mind mechanics, show dogs and seals.

Dr. Pisciotta, Associate Professor of Medicine, Marquette University School of Medicine, was one-time Bardham Graduate of the Year.

Although no university consciously commits its activities to a given sphere, in practice, two types of medical schools have evolved; one predominantly "trains" patient and service oriented practicing physicians for the community; the other is concerned primarily with problems in human biology and relevant basic science and is more apt to be a source of teachers and research workers.

Catholic affiliated medical schools have directed most of their energies to the development and training of practicing physicians. In this context, they have functioned largely as "trade schools." There is no question of the competence of most of these graduates who have taken their place in small and large communities as respected members of society. The evaluation of the degree of excellence in this group is difficult because criteria to measure this are not uniform. The layman's criteria for the "good doctor" differs from the physician's. In many cases, the layman measures popularity rather than scientific excellence.

The common denominator of all medical schools is the production of competent physicians. If it were less than this, the "grade A" school would not be permitted to exist and its graduates would encounter difficulty in obtaining licensure. As long as all medical schools are expected to achieve this basic goal, special accolades are not usually granted for technical proficiency. It would appear, then, that an "outstanding" medical school should aspire to more than the education of competent

physicians if it is to be judged as "excellent." An undergraduate is arbitrarily considered to be excellent if he can answer examination questions that most closely conform with his professor's opinion. The criteria for judging a school or its graduates as excellent are even more vague and just as arbitrary.

The medical school, as a graduate department in a university, is devoted to the derivation and dissemination of knowledge that pertains to human biology and to those basic scientific principles that contribute to this understanding. It exists to educate the mind rather than the hand; to teach principles rather than skills. Its students should be analytical and discerning and should believe in the dignity of man. It should not be an apprenticeship for gilded craftsmen. Teaching is most effective in an atmosphere of research, because the student is assured of a continuous flow of new ideas and new experiences. He is taught by individuals who are themselves students. Pride in one's institution is increased with the realization that his university is a fountainhead of learning.

The objectives of the medical school are accomplished by establishing thought processes and study habits through a conceptual rather than a factual approach. The reason for this is obvious. A student can be given only a limited number of "facts" during his tenure as an undergraduate. If these are merely poured into him, his knowledge will

be quickly outdated as medicine advances around him. For this reason, the student-physician must be prepared to grow with his profession and even to contribute to its growth. This is important if for no other reason than to prevent the emergence of the elderly practitioner whose store of facts antedates his graduation. If a student is taught to think critically, to acquire knowledge by personal observation and on the basis of evidence; if he is thrilled with learning for its own sake, then there is no question that his education will continue after graduation. On the other hand, if medical practice is considered simply a dignified means of livelihood, then it is likely that he will be left behind as technology and science progress.

Excellence, then, is more than the ability to perform with competence; it also embraces the unique quality of originality that will influence the future course of human endeavor, in this case, medicine. The innovator leaves his mark on the field he represents; just as music was influenced by the unique style of Beethoven, medicine is different because of the contribution of Minot.

In these terms, graduates of medical schools affiliated with Catholic universities have failed to reach the same degree of distinction as have their counterparts in secular schools. This intellectual lethargy has provided ammunition for critics of the Church.

Increasing concern for these problems has stimulated many scholars to search deeply for reasons. Mon-

signor Ellis' little book is a classic that deserves to be read and reread by every thinking Catholic. Many similar publications point out a definite awareness on the part of Catholics of their deficiency in intellectual attainment and the urgency in catching up. At long last, the problem has been presented clearly. The pathogenesis and treatment require considerably more study.

Numerous reasons have been cited; none are completely explanatory. The most widely cited problem is financial. With respect to research, this seems to be more of an alibi than a valid reason. There are increased numbers of grants available through the National Institutes of Health and other benevolent organizations, resulting in more money available for research than for any other of the educational functions of the medical school. Nevertheless, lack of substantial endowments (hard money) are felt in many ways. Some Catholic affiliated medical schools cannot afford large faculty, continuous responsibility of education and service becomes the burden of fewer numbers of faculty. Preoccupation with purely service functions results in less time for scholarly activity and in this way may stifle intellectual endeavor. Increasing the size and depth of a faculty is not the only answer. Schools need laboratories, offices, and other hospital facilities — therefore, ways and means must be found to increase the physical plant of a medical school. To accomplish this objective, the medical school must accumulate the multi-million-dollar sum that is

necessary for the construction or expansion of a suitable educational structure. This may lead to conflict if it brings the medical school into direct competition with its parent university for funds.

It has already been mentioned that large sums of money are available for research purposes. Where then, does the Catholic university obtain hard funds for building and educational purposes, including faculty salaries? Private funds and philanthropies have provided the bulk of their support to secular schools. On the other hand, it is quite apparent that Catholic leaders and philanthropists have not emerged in great numbers to back Catholic educational foundations. Instead, financial aid has been solicited from the Catholic population at large, who have been asked to spread their donations between a number of organizations including parochial grammar schools, diocesan high schools, Catholic charities, and a number of non-sectarian charities. Practicing physicians are required to contribute heavily to private hospitals, sometimes at the risk of endangering staff privileges. The great proliferation of Catholic colleges, particularly liberal arts women's colleges, have further spread Catholic financial resources perilously thin. The point will surely be reached, where Catholic educational institutions will have to decide in which area they will make their most significant and unique contribution and concentrate their support appropriately. The fundamental intellectual strength of a university begins with its liberal

arts and graduate school. Over and above this, it may be necessary to take a good hard look at vocationalism in professional schools affiliated with Catholic universities, not only medicine and dentistry, but also engineering, business administration and nursing education. The endowment, physical plant and equipment necessary for so complex and expensive a group of schools, make it difficult for Catholic universities to compete with secular universities in their fields unless sufficient funds are available to make competition feasible.

Some believe that the Catholic attitude toward independent acquisition of knowledge is more important in limiting intellectual accomplishment than financial considerations. A common criticism of Catholic education is that it is doctrinaire and therefore stifles free inquiry. The cut and dried formulae given to many students educated in a parochial system provide so many satisfying answers relating to the meaning of life, that there may be little point in asking further questions. Moreover, since spiritual destiny is guaranteed by a lifetime of adherence to a strict moral code, it seems superfluous to devote much effort toward achieving material knowledge. From a purely personal point of view, these opinions are not entirely true. There is, in fact, no conscious effort to stifle free inquiry at Catholic universities, other than limitations of time and space. Productive work, is received with as much pride and praise at Marquette as elsewhere. Nevertheless, it is interesting that many med-

ical academicians even in Catholic affiliated schools are not Catholic and/or have secured their education in non-Catholic schools. This is another way of saying that graduates of a parochial system are not usually attracted to an academic career. It is true that many of these students are poorly prepared in science and therefore reluctant to use the scientific method in answering questions. Lack of adequate scientific preparation may further explain the intellectual disinterest of these students. Serious attempts to correct these deficiencies may begin with the parochial grammar school since it is here that the first attitudes toward learning are introduced.

Additional reasons have been cited to explain lack of Catholic intellectual vitality. When Catholics first arrived in this country in great numbers during the past century, they were poorly educated and qualified primarily to concentrate on manual labor as a livelihood. The clergy, having most of the education, was at that time better able to perform intellectual functions. The emergence of an educated laity has dispelled this notion, and has even resulted in a more financially secure upper class group of Catholics. Indeed, their achievements in the world of business and attraction to comparatively lucrative professions as medicine and law has resulted in more Catholics with wealth than heretofore. Part of this preoccupation with material wealth is dictated by an overwhelming interest in security, the necessity to support large families, etc. Nevertheless, the assimilation of former Catholic im-

migrants into American culture is no longer a major problem in our present second or third generations of Americans. Furthermore, comparison with a noteworthy group of "controls" is valid here. The Jews who immigrated from Europe in similar numbers, and in a comparable time, have molded themselves indelibly in American culture and science in contrast to their fellow Catholic immigrants. There is no valid anthropological evidence that one ethnic group possesses more intellectual prowess than another. Hostility and prejudice are not sole factors, either, since the Jews have been subjected to much, if not more, prejudice than any other ethnic group and in spite of it, have overcome efforts at oppression.

Discrimination becomes an important factor in preventing the acceptance of a Catholic intellectual class, only if Catholics allow themselves to be defeated or repressed. It may be well to recognize that the world is frequently aloof, if not critical or sometimes hostile to Catholics and their innovations. In part, this may be attributed to lack of contact (nowadays called dialogue) of some Catholics with the outside world. In any event, a more aggressive approach will surely be needed to introduce the work of Catholics into the mainstream of American science and culture. In the beginning, this may be difficult, or even discouraging. The problems that attend successful research are the same for Catholics and non-Catholics. It is not easy to obtain meaningful data; experimental disasters, negative results, lack of stimulation

or ideas, discouraging deprecating and condescending attitudes of one's colleagues all stifle a research commitment. In an intensely competitive scientific world, acceptance of one's work for publication or presentation to a reputable society provides a further obstacle. Even after a work is published it may be ignored. Good work will ultimately be recognized. Mendel's monumental contributions to genetics were not appreciated until 40 years after he died! There

is, indeed, a difference between accomplishment and recognition. Since recognition may be a motivating factor for scientific productivity, failure to achieve this goal may prove a permanent deterrent to the young investigator. He must be encouraged to develop a realistic appreciation for accomplishment which can be sustained independent of the inscrutabilities of external recognition.

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## ADVICE TO AUTHORS

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