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The Catholic Physicians’ Guild –
Origin and Direction

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The beginnings of the Catholic Physicians’ Guild in the United States can perhaps be understood most thoroughly by examination of two medieval concepts: the concept of the local guild and the concept of the physician-priest. The concept of the local guild refers to a union formed by members of a craft or trade to uphold standards and protect its members. The concept of the guild implies the organization of individuals around a set of common causes, common concerns. The concept of the physician-priest refers to the role of both physician and priest which was served by a single individual in the medieval period. The concern of the physician-priest was to provide care for the total individual, body and soul. What the medieval physician-priest may have been lacking in technical expertise, he compensated for with attention to the patient as person, as a whole entity and not merely the amalgam of a variety of biological parts. Understanding these two concepts in the formation of a union brings appreciation for the nature of the Catholic Physicians’ Guild.

From its very inception this Guild set forth standards of morality and theological commitment which made it a unique organization of professionals. In the first issue of Linacre Quarterly which was then subtitled “Official Journal of the Federated Catholic Physicians’ Guild,” the editor, Anthony Bassler, wrote:

There is an idea prevalent that these Guilds are medical societies the members whereof are Catholics. Nothing is more erroneous than this... It therefore is clear that the Guilds must be something quite different from the professional societies, something that these societies cannot offer, something essentially Catholic and attuned to Catholic ideas and doctrines.

The special outlook of this Guild centered upon a fundamental understanding of human existence, existence in relationship to God.
To understand what this special Guild outlook means, it is necessary to come down to the fundamental facts of our existence on earth and to examine our relationship to our Maker and our responsibilities to Him as medical men... In proportion as we as members place ourselves and our work in relation to God and try to carry out the fundamental commands He has imposed upon us, in like proportion will the work and the outlook of the Guild become His work and thereby achieve its true aim as a Catholic organization.

The nature of human existence was focused most sharply for the Catholic physician on the relationship of illness to human life. The sacredness of each human life in sickness and in health was stressed. The second issue of Linacre Quarterly addressed this relationship most clearly in an article entitled "The Apollonian Answered."

No group of men, not even the priests themselves, are as aware of what is going on in our profession as we are, are better able to study the reasons why, and can exert as potent a force against the wrongs. The practice of medicine today is largely a case of this or that and a deep interest in the science pertaining to whatever the disorder might be as expressed in an entity term. Too many of us have lost sight of the fact that illness occurs in a human being and that the human being is more than a physical affair... Thus our movement has one of its roots in the belief that no matter how advanced or scientific a physician may be, where or how situated, or what the conditions may be at the moment, man is not a mere animal or a case of this or that, but an individual with a soul, a rational and responsible being.

The medieval concept of the physician-priest, concern for soul and body, was reinstituted through the formation of the Catholic Physicians' Guild. The combined role of physician and priest, a role which had become two roles often with little connection to each other in the course of human history, now was to come together again through the dialogue of disciplines.

The Guilds have been established to be a connecting link between the two great sciences of theology and medicine, and while deepening the knowledge of Catholic teaching with regard to very important subjects, they act as a factor for the increase of Faith among physicians themselves so as to make them capable of applying the principles of the Church properly.

The characteristics of this "connecting link" between theology and medicine are clearly set down in the March, 1932 issue of Linacre Quarterly, the second issue of the journal. These characteristics are found in the seven-fold purpose of the Guild:

The purpose of the Catholic Physicians' Guild is to constitute a brotherhood of all members of the medical profession; to provide mutual assistance in their religious and professional life; to facilitate intercourse between them and members of cognate branches and the clergy and others... who are interested in the study and discussion of medical-religious questions and those touching on the science of duty and ethics; to investigate the relations of medical theory and practice to Catholic theology and philosophy; to uphold the principles of Catholic faith and morality against an unchristian
and unscientific materialism; to render such assistance to Catholic medical institutions and missions as may be practicable; and, in general, to promote among Catholic members of the profession such solidarity as may be advantageous to both their religion and their profession.  

In issue after issue of the quarterly, these characteristics have been stressed, linking the religious and professional concerns of medicine. The most succinct restatement of these characteristics appears in the November, 1953 issue of *Linacre Quarterly* through the words of Joseph J. Toland, Jr., then president of the Federation of Catholic Physicians’ Guilds. “As physicians our first duty is to God, our second duty is to the sick, and our third is the salvation of our own immortal souls. All three are easily accomplished by the doctor who practices moral medicine.”

The physician’s duties to God, to the sick, and to his/her own soul are duties which are constant. The purpose of the Guild is not to create a set of purposes merely for academic study. Rather, its aim is to assist the physician in the real decisions regarding life and death. Edward F. McLaughlin in his article, “A History of the Guild Movement,” in the October, 1940 issue of *Linacre Quarterly*, writes:

> The Guild aims to bring before the professional man or woman those Catholic moral principles which apply to every-day work. The doctors present their problems and the chaplain discusses with them the moral points involved.... And so with our specific studies we try to make ourselves better Catholics and better doctors.  

### Early History of the Physicians’ Guild

The first Guild of Catholic Physicians in the United States dates back to January of 1925. This Guild, entitled the Catholic Physicians’ Guild of Brooklyn, was located in Brooklyn, New York. The vision for the beginning of such a group belongs to Dr. Richard A. Rendich who organized a spiritual retreat for physicians in the New York area. Out of the retreat emerged the desire and direction for the formation of the first Guild.

The retreat of the Brooklyn Guild members is described in the July, 1941 issue of *Linacre Quarterly*. In his article, “’Come Aside and Rest Awhile,'” Rev. Daniel F. Hart discusses the nature of that retreat:

> In May of 1927 sixty physicians from Brooklyn and New York made a closed retreat at Mount Manresa, Staten Island. ... For those unacquainted with retreats we may say that a retreat is time spent alone with God. It is a time to think, to take stock of our spiritual liabilities that we may remove them; of our spiritual assets that we may increase them. It is a time to discover the ills of our souls that we may cure them.  

By 1932, six Guilds had been formed: Boston, Bronx, Brooklyn, Chicago, Manhattan, and Philadelphia. The annual retreat became a
component part for each of these Guilds. In this same year, the national organization called the Federation of Catholic Physicians' Guilds was formed and the constitution and by-laws were adopted at the general meeting of the Federation at Atlantic City, June 21, 1947. Article II of the constitution states the Federation's purpose:

The Object of this Federation shall be the promotion and observance of moral principles in medical education and practice according to the understanding of the Roman Catholic Church. 14

The proper relationship of the Federation to the individual guilds is described in the November, 1951 issue of Linacre Quarterly. William P. Chester, then president of the Federation, writes:

The Federation's full name accurately describes and delimits it. As I understand it, it is a confederation—a loose-knit aggregation of autonomous, co-equal Guilds, each with full "states' rights." The Federation is not a national society, or a totalitarian organism, of which the Guilds are subordinate branches, or "locals." 15

The purpose of the Federation— and the purpose of the individual Guilds— was the establishment of a firm foundation of faith from which the profession of medicine was to be built. The article by Rev. Ignatius Cox in the November, 1950 issue of Linacre Quarterly, "Catholic Physicians Have a National Organization," sets forth the goal of the Federation. "The influence aimed at, is by negative and positive means to bring home to American Medicine that, in its practical application, it is subject to the higher principles of religion and morality." 16

From Yesterday to Tomorrow

The present year, 1982, marks the 50th anniversary of the Federation of Catholic Physicians' Guilds. Through the years, the individual guilds have increased in both size and number, and now span the entire United States. The world in which we live today is in many respects far different than the world of the 1930s. However, the differences only serve to strengthen the challenge to the Physicians' Guilds to be that "connecting link between the two great sciences of theology and medicine." The importance of this link is vital, though perhaps not always easy to arrive at. With advances in medical technology and procedure being what they are today, it is not a simple task to discern and direct action which reflects the principles of faith. The desire to do what is morally good takes on a special responsibility if one is to fully understand the complex issues of life and death being presented through the state of medical technology. The desire to find answers to the medico-moral questions of today is a desire which must foster an ever stronger link between the two great sciences. Dialogue, instruction, and analysis of issues certainly are necessary in the formu-
lation of answers to these serious questions. However, these activities in themselves are not enough. What is of crucial importance in the answering of these questions is the “divine influence of the Holy Spirit through the Divine Healer, Jesus Christ.” These words of Linacre Quarterly’s present editor, John P. Mullooly, M.D., call attention to the fundamental faith process which has been and continues to be the cornerstone upon which the Guild of Catholic Physicians was built.

The worlds of the physician and his/her patient merge at this cornerstone of faith. In closing, this writer chooses to leave the reader with the words of Dr. William J. Mayo as reported in the New York State Journal of Medicine, November 1, 1934: “The sick man needs faith, faith in his physician, but there comes a time when faith in a higher power is necessary to maintain his morale and sustain his emotion. I do not know how the doctor can strengthen that faith, unless he himself knows and practices the values of religion, not necessarily the creeds and dogmas of any particular church.”

May the values of religion so vital to the Catholic Physicians’ Guilds be strengthened and shared through prayer and dialogue with all Christians involved in the care of the sick.

REFERENCES

4. Ibid.
5. Ibid., vol. 1, no. 2 (1932), p. 27.
6. Ibid., pp. 27, 28.
7. Ibid., p. 28.
8. Ibid., vol. 20, no. 4 (1953), p. 95.
9. Ibid., vol. 8, no. 4 (1940), p. 98.
10. The date of organization of the Brooklyn Guild is given as 1925 in vol. 1, no. 1 (1932), and as 1927 in vol. 13, nos. 1, 2 (1945).
11. Ibid., vol. 13, nos. 1, 2 (1945), p. 3.
12. Ibid., vol. 9, no. 3 (1941), p. 51.

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