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WHAT DID THE A. M. A. DO AT ATLANTIC CITY?

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The answer to the question of our caption must be sought in the official documents which contain the proceedings of the Atlantic City convention and nowhere else. These documents are contained in the *Journal of the American Medical Association* for June 26, 1937, pages 2217 and 2218. Three different adjuncts of the A. M. A. dealt with the question of contraception. These were "The Committee to Study Contraceptive Practices and Related Problems"; "The Reference Committee on Executive Session"; "The House of Delegates." The report of the first committee was referred to the second committee and accepted by that body "with slight modifications." The House of Delegates finally accepted the report of the reference committee containing the recommendations of the contraceptive body with the modifications mentioned. We shall examine the recommendations of "The Committee to Study Contraceptive Practices and Related Problems" and the modifications of the reference committee as they occur.

It must be noted that the recommendations adopted should be studied for their full significance in the light of the committee report on which they were based. The recommendations would have no meaning except as implementing the findings of the committee. The first recommendation of the contraceptive committee was: "That the American Medical Association take such action as may be necessary to make clear to physicians their legal rights in relation to the use of contraceptives." The reference committee modified this recommendation by adding to it the following phrase "emphasizing the fact that all considerations in this report on the subject of the prevention of conception have their application only in conditions arising in the relation of physician and patient." This recommendation so modified was referred to the Bureau of Legal Medicine and Legislation and adopted by the House of Delegates.

This recommendation reveals in other words that the physician in the treatment of his patient may use his (so-called) legal rights with regard to contraception, and that the A. M. A. in instructing him in those rights admits contraception as a legitimate part of medical practice and hence within the code of so-called medical ethics. Let us now examine this recommendation in the light of the report on which it is based. Therein we read: "Information concerning contraception is ad-
mittedly available to persons in favorable economic circumstances. There appears to be no law to prevent physicians who work in dispensaries from furnishing patients there with any information that may be lawfully furnished to patients in any other group. In all cases the legal justification is the medical need of the patient.” (Italics mine.) This medical need which is the legal justification of contraception is capable of an interpretation of almost any case in which the patient desires contraception. That medical need will be so interpreted with increasing laxity in the future is evidenced by what has happened in the past. Dr. Eric Matsner, medical adviser to the American Birth Control League, has already stated that there are three hundred birth control clinics operating under medical supervision in this country now. Suppose that the patient should disclose to the physician the presence of an anxiety neurosis lest a further drain be put on slender economic resources by the advent of a second or a first child. What then? Would that not be a medical need which would justify a legal right to contraception? Besides the contraindications to pregnancy listed in the last report, the Kansas City report, of the contraceptive committee, we read in this report the following: “It is recognized that voluntary family limitation is dependent largely upon the judgment and wishes of the individual parents. The intelligent voluntary spacing of pregnancies may be desirable for the health and general well-being of mothers and children.” (Italics mine.) In other words according to the recommendation the A. M. A. is to instruct physicians in their legal rights in the use of contraception, these legal rights are constituted by the medical need of the patient, and one of these medical needs among very many others is the voluntary spacing of pregnancies for the health and general well-being of mothers and children. If that is not the admission within the category of so-called medical ethics of the practice of contraception and the approval of it within that category, then words have lost their objective meaning and we must interpret committee reports and convention proceedings not according to their objective meaning but according to the good intentions of those who are the principals and their subjective interpretation.

The second recommendation which was accepted by the reference committee without modification, referred to the Council on Pharmacy and Chemistry as well as the Council on Physical Therapy, and adopted by the House of Delegates was as follows: “That the American Medical Association undertake the investigations of materials, devices, and methods recommended or employed for the prevention of conception, with a view to determining physiologic,
chemical, and biologic properties and effects, and that the result of such investigations be published for the information of the medical profession." This recommendation again must be examined in the light of the committee report to get its full meaning. Therein we read: "In view of the admitted medical necessity for avoiding conception in certain cases and of the general use of contraceptive preparations and devices, your committee finds no reason why the American Medical Association should not investigate such substances and devices. Such investigation for medical purposes seems to constitute a logical part of the activities of the Association in the field of therapeutic research." Notice the logical connection between this recommendation and the first. There is a legal right with regard to contraception wherever there is a medical need. There ought to be at hand a suitable contraceptive for the alleviation of this medical need. Therefore, the American Medical Association will take up research for such a contraceptive among those already in use or those that will be offered for use in the future. Such findings will be handed on to the medical profession. Again I say that this is the obvious inclusion of contraceptive practice for medical usage (and with a very broad interpretation of medical usage) within the scope of so-called medical ethics. If this does not give a medical "imprimatur" to contraception within the limits set down, then language has simply lost its objective meaning. In the light of this, it seems unintelligible how some physicians have maintained and still do maintain that the A. M. A. did not approve contraception.

The third recommendation of the contraceptive committee reads as follows: "That the Council on Medical Education and Hospitals of the American Medical Association be requested to promote thorough instruction in our medical schools with respect to the various factors pertaining to fertility and sterility due attention being paid to their positive as well as their negative aspects." This recommendation was accepted "as is" by the references committee, referred to the Council on Medical Education and Hospitals, and adopted by the House of Delegates. It is very illuminating to study this recommendation in the light of the contraceptive committee report. Therein we again read: "In view of the frequent occurrence of medical indications for the prevention of conception, and in view of the medical complications that arise from ill-advised contraceptive practices resorted to by women on their own initiative and without medical advice, which call for medical care, medical students should, in the opinion of your committee, be instructed fully concerning fertility and sterility and taught the clinical considerations and therapeutic application of contraceptive methods." (Ital-
ics mine.) It is interesting to note that the italicized words were left out in the recommendation adopted. They were implicitly included in a very careful and cautious phrase of the recommendation accepted, namely, “to promote thorough instruction in our medical schools with regard to the various factors pertaining to fertility and sterility, due attention being paid to their positive as well as their negative effects.” Why were the words “various factors pertaining to . . . sterility . . . negative effects” used instead of the complete wording of the report “the clinical considerations and therapeutic application of contraceptive methods”? These latter words are implicitly contained in the more obscure and cautious wording, “Various factors pertaining to . . . sterility . . . negative effects.” And they will be so interpreted and medical schools will begin to teach the “clinical considerations and the therapeutic application of contraceptive methods.”

What is the meaning of this third recommendation as looked at in the light of the committee report? Simply and brutally this: There are medical contraindications to pregnancy; besides this women are using contraceptives sometime to their harm, “there is a “general use of contraceptive preparations and devices,” “voluntary family limitation is dependent largely on the judgment and wishes of individual parents. The intelligent, voluntary spacing of pregnancies may be desirable for the health and general well-being of mothers and children.” For all these reasons the medical student is to be instructed in the “various factors pertaining to fertility and sterility, due attention being paid to their positive as well as their negative aspects.” The medical student is to be instructed in the clinical considerations and the therapeutic application of contraceptive methods. If that is not an approval of contraception and an acceptance of the practice within the code of so-called medical ethics, then it is hard to find words or recommendations that would have done it more effectively.

The reference committee added a fourth recommendation to the three offered by the contraceptive committee which was likewise adopted by the House of Delegates. It was the following: “Your reference committee further recommends that information and advice concerning the prevention of conception given in dispensaries, clinics and similar establishments should be given only in such dispensaries, clinics and similar establishments legally licensed to treat the sick and under medical control.” Now I believe that this recommendation may have been put in to control the professional birth controllers and I likewise believe that it played directly into their hands as all the other resolutions did, however contrary this may have been to those
who had anything to do with these recommendations or their acceptance. Usually the birth control clinics are incorporated under some “Maternal Health Committee” and are under medical supervision. The birth control propaganda for the last few years has insisted on this notion of maternal health through the proper spacing of children and the avoidance of too frequent pregnancies. If these clinics besides being under medical supervision are licensed to treat the sick they come directly under the provision of this recommendation.

THE COMPLETE PICTURE

With this fourth recommendation the picture is complete. Physicians are to be instructed in their legal rights with regard to contraception; there is to be an investigation of the various contraceptives as a logical part of the activities of the association in the field of therapeutic research; physicians are to be educated in the clinical considerations for and the therapeutic application of contraceptive methods; and all information and advice with regard to contraceptives is to be given in clinics licensed for the care of the sick and under medical supervision. As I have written in the National Magazine, The Sign, in an article similar to this, which is appearing in the August number of that publication: “The official text of the proceedings as examined in the light of cold reason shows that the A. M. A., however much to its surprise and however much it may have been contrary to its intentions, has legally adopted the eternally illegitimate contraceptive baby which was aided in birth and survival by so many of its members. The clear light of intellectual analysis seems to show that furthermore it has assumed responsibility for the continued growth and education of this howling infant, having given it an air of legitimacy under carefully chosen verbiage.”

THE INTERPRETATION OF OTHERS

Dr. Fishbein, editor of the Journal of the American Medical Association, admitted, according to the New York Times for June 14, that the American Medical Association has taken an attitude with regard to medical contraception. Indeed all this is contained in an editorial of the A. M. A. Journal, June 26, 1937. The official organ of the New York County Medical Society, Medical Week, had a very significant editorial in its issue of June 19, 1937, entitled “Marching with the Times.” Here are some excerpts which are confirmations, if confirmation were needed of what has already been said in these columns. “The A. M. A.’s adoption of the report submitted by its committee for the study of contraceptive practices places the profession in line with advanced scientific and sociological opinion.” (Italics mine.) “It is moreover a recognition of present-day
realities. . . . To the great majority of medical practitioners and laymen, however, the action of the A. M. A. is a reassuring indication of the profession’s willingness to march with the times.” (Italics mine.)

A LOGICAL ATTITUDE OF THE CATHOLIC PHYSICIAN

The resolutions of the Catholic physicians assembled at Atlantic City met the action of the A. M. A. head-on. “In the quest for health it should be remembered that there are some things of greater importance, such as honor, family, country and the attainment of supernatural destiny; that the practice of artificial contraception for any reason is a perversion of the moral right order of things, productive of mutual distrust on the part of the spouses using it, and its use even for medical reasons is a potential, if not an actual, weapon for the undermining of the virtues on which Christian civilization is based. . . . There is no human necessity which can confer on the doctor the right to take life or prevent it.” Positive contraception is a frustration of nature; is intrinsically wrong and absolutely immoral. To instruct physicians in legal rights with regard to contraception, without consideration of its moral wrongfulness, to institute research in order to discover an effective contraceptive, to instruct medical students in the clinical considerations for and the therapeutic application of contraceptive methods, to bring all establishments dispensing contraceptives under medical control, is to approve, even implicitly, of something intrinsically and morally wrong. And remember that contraception is against the natural law; it is therefore wrong for every one, not only the Catholic but the Protestant and the Jew and the pagan. To approve of contraception is wrong for everyone and every organization, even for the American Medical Association. And the A. M. A. has by its action at Atlantic City approved contraceptive practices and intends to do so continuously in the future. Its action is, therefore, condemned before the bar of sound moral doctrine. Listen to the words of the Vicar of Christ on earth in his encyclical on Chaste Marriage: “But no reason, however grave, may be put forward by which anything intrinsically against nature may become conformable to nature and morally good. Since, therefore, the conjugal act is destined primarily by nature for the begetting of children those who in exercising it deliberately frustrate its natural power and purpose sin against nature and commit a deed which is shameful and intrinsically vicious. . . . Any use whatsoever of matrimony exercised in such a way that the act is deliberately frustrated in its natural power to generate life is an offense against the law of God and nature, and those who indulge in it are branded with the guilt of a
grave sin. . . No difficulty can arise that justifies the putting aside of the law of God which forbids all acts intrinsically evil.”

Against these words of the Vicar of Christ, the A. M. A. is in opposition, if the above analysis is correct. With all due charity to those who do not see this, a logical attitude for us Catholic physicians is one of fearless condemnation.

**WHAT HAS HAPPENED SINCE KANSAS CITY, 1936?**

The report of the contraceptive committee at Kansas City was a thorn in the side of the birth controllers. Here is what we said about that report in the LINACRE for June, 1936:

“Dismissing the scare of overpopulation as utterly unfounded, the Committee said that ‘our present knowledge regarding human heredity is so limited that there appears to be very little scientific basis to justify limitation of conception for eugenic reasons.’ The Committee continued, ‘Your Committee has found no evidence available to justify the broad claim that dissemination of contraceptive information will improve the economic status of the lower income groups’ and maintained that ‘all mechanical devices which are introduced into the cervix . . . are potentially dangerous to the life and health of the women. Many deaths and an even larger number of serious pelvic complications have been reported in the literature and the members of the Committee have knowledge of many unreported cases of serious illness from the use of intrauterine devices.’ Moreover, ‘The Committee has been unable to find evidence that existing laws, federal or state, have interfered with any medical advice which a physician has felt called on to furnish his patients.’”

What happened in the short space of a year to bring about such a reversal in the attitude of the A. M. A.? A partial answer, at least, to this question can be found in a little neglected paragraph of this year’s report which reads as follows: “Since the first report of the committee was submitted, the committee has received communications from various organizations interested in the subject, which will be presented to the House of Delegates.” Now it is a fairly safe bet that the bulk of those communications was from the contraceptionists, because others were fairly well satisfied with the Kansas City report. In other words considerable heat was applied to the committee. Though we have no certainty in the matter, it is not unreasonable to conclude that the general tendency of the communications is fairly well represented, at least in part by a resolution from the American Neurological Association submitted to the convention at Atlantic City. A part of that resolution ought to make the blood of a red-blooded Catholic boil. The whole resolution will repay a careful study, though I leave the interpretation to be put on it entirely to my readers. Hav-
ing called attention that a decision of the United States Circuit Court of Appeals has handed down to the medical association a bill of rights with regard to contraception, the resolution continues: “Resolved that the American Neurological Association urge the American Medical Association again to consider seriously the inroads that are being made on the prestige of organized medicine by the rapid advance of popular thought in the matter of social medical science as evinced by the success of lay organizations in carrying out their program for greater medical freedom in the matter of contraception. It has come to the pass at which the road for medical advance is blazed by laymen assisted by the law. Unless organized medicine is directed by far-seeing and free-thinking leaders untrammeled by the aged and antiquated fetters of Sophism it will most certainly come to pass that organized medicine will in the not-distant future come entirely under control of lay and legal administration assisted by their political allies. The American Medical Association is further urged to take up at once the matter of the proper teaching of contraception at the medical schools and the organization of medically supervised contraceptive clinics in hospitals. The time has passed for discussion and debate. The fact remains that the physician is now free to use contraceptives in his practice and should be educated in their use.”

A Timely Educational Film

Mead Johnson & Co. are sponsoring a film entitled “The Birth of a Baby” which will be shown in the regular picture houses. This is recommended to the attention of physicians, so that they can intelligently speak of it to their patients. It is said to be free of all salaciousness, so that adolescents may safely see it.

FAMILIES. The Census Bureau furnishes some interesting figures about children. In 1930, there were 23,352,990 intact marriages. They fell into these categories:

Childless ................ 7,447,328
One child............. 5,254,863
Two children......... 4,246,459
Three children..... 2,650,730
Four or more....... 3,753,610

There were fewer children in city than in rural families. More Negro couples were childless than whites.—[New York Times.]