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Letter from Canada

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Letter From New Zealand

The past year has seen the continuation of the dramatic recovery in the economic situation, following on devaluation. Exports increased by 50%, the Stock Exchange index is at a record peak, and overseas funds are at a comfortable level. Drillers have for the first time struck oil and natural gas.

The fall in the birth rate has been arrested at 22.60 per 1,000. Illegitimate newcomers have reached a record incidence of 13% of all births. This shameful figure has at least been due to the demand. Besides the teenagers keep up with the rest of the world in matters of drugs, drink, long hair, gate-crashing, and generally innicne struggle ahead.

Maternity fees for general practitioners have increased from $30 to about $60 for complete services. Specialists may charge the patient an additional $50.

Your correspondent has helped to arouse the Society for the Protection of the Unborn Child to combat the threat of legalized abortion legislation, which during the year has been passed in Singapore and South Africa. The President is Prof. A. H. Liley, who introduced to the world the intrauterine transfusion of the Rh incompatibility of newborn baby. Most church leaders, Christendom, have agreed to be Fousfist Members. We expect an interesting national debate ahead.

We have also organized a natural family planning service based on ovulation techniques. There is a growing demand for this information from people of all faiths who have become disillusioned with current hormonal and IUCD techniques. To help the doctors, whose professional role should be solely educative, we have recruited nurses and interested lay people to follow up patients and convince them of the beneficial fruits of this way of life.

In the year following the encyclical Humanae Vitae of Pope Paul, Catholic community has cooled to the idea of sterilization, and religious leaders agree to the moral code which I follow. Catholics have no monopoly on good ethics. Most doctors do not insist on the Code being enforced. If they feel the hospital bills of patients and not medically indicated. I feel no need to review their statements to the effect that the Code of Ethics of the C.M.A. (Canadian Medical Association) and the moral code of the Catholic Hospital Association shall govern professional conduct of its staff and that there is conflict, the Moral Code shall take preference. This Moral Code was written in booklet form around 1943 and adopted by The Catholic Hospital Association. Currently, it is supposed to be undergoing process of revision. No changes have yet been published.

H.P. Dunn, 122 Remuera Rd., Auckland

Letter From Canada . . .

Bill C-150 is an omnibus bill relaxing requirements for divorce, permitting homosexual acts between consenting adults and laying down criteria and procedure for performing legalized abortion and sexual sterilization in certified hospitals as well as other changes in the Canadian Criminal Code. This bill was introduced by the Minister of Justice John Turner (Catholic) under the Liberal Prime Minister, Pierre Trudeau (a Catholic). A free vote was not permitted — all members of the party being obliged to vote for the government bill. No amendments were successful. Now awaiting passage by the Senate, it is about to become law in Canada.

I wish to discuss only the consequences of this change in law, relating to abortion and sterilization and its effect on Catholic hospitals in Canada.

The current constitutions of Canadian Catholic hospitals have incorporated into their statements to the effect that the Code of Ethics of the C.M.A. (Canadian Medical Association) and the moral code of the Catholic Hospital Association shall govern professional conduct of its staff and that there is conflict, the Moral Code shall take preference. This Moral Code was written in booklet form around 1943 and adopted by The Canadian Catholic Hospital Association. Currently, it is supposed to be undergoing process of revision. No changes have yet been published.

For some reason, administrators of some Catholic Hospitals seem no longer secure in enforcing this Moral Code, even though it remains in their constitution. It would seem to me that because governments are buying more say in hospital construction and operation, the Roman Catholic Orders running hospitals feel they must, as community hospitals in a pluralistic society, no longer insist on the Code being enforced. Therefore, in some Roman Catholic hospitals, direct sterilizations are now being permitted, as long as the legal and medical requirements of the staff have been met. Indeed, I believe that some Catholic Theologians are preaching this as being moral and correct. Is "therapeutic" abortion going to be next?

Perhaps it is difficult to enforce and perhaps, as administrators only, there is no longer the power to control and enforce. If this is so; why Catholic hospitals?

This new law in Canada empowers Hospital Boards of Administration to set up sterilization and abortion committees, who will review submissions and pass judgement on them, according to standards set by the law. There is no requirement that hospitals set up such boards, although an amendment to specify this not allowed by the government.

Current practice reveals that there is a tremendous variation in the frequency of sterilization and abortion in various hospitals and various localities. When further studied, it reveals that one or two individuals become largely responsible for this variation. But in all hospitals, where it is current practice to allow liberal sterilization and abortion, the number of such procedures doubles every six months.

I would like to remove myself from any implied pressure of the law to carry out procedures which I feel are morally wrong and not medically indicated. I feel no conflict of patient interest by never carrying out these procedures and I practice Obstetrics and Gynecology. I also feel that Catholics have no monopoly on good ethics. Most Christian doctors and nurses do in fact respect life from conception to death. They therefore would agree to the moral code which I follow.

The following is a simplified code which I think should be acceptable to any hospital staff. It is neither Catholic nor Christian, but follows from a belief in a Supreme Creator, the dignity of man and the belief in a hereafter. This belief, I feel, is shared by most doctors.

THE MORAL CODE

The moral code of this hospital is based on the following beliefs:

1. That human life, from conception to death, has a dignity as a creature of God, with an eternal soul and life hereafter.
2. That patients have a right:
   a. To privacy.
   b. To integrity of person.
   c. To quality medical care.
   d. The right to die, as well as the right to live with dignity.
   e. The expectation that their consciences will not be violated, (use of blood by Jehovah's Witnesses, etc.).
3. That the spiritual needs, as well as the corporal needs of patients, require consideration.

It therefore follows that under this code of ethics, direct killing and direct sterilization is prohibited. Thus prohibited would be induced abortions, euthanasia, tubal ligations and vasectomies.

However, indirect killing and indirect sterilization is licit when medically indicated, such as:
   a. Salpingectomy for ectopic pregnancy or disease.
   b. Hysterectomy.
   c. Castration for carcinoma of the breast or other disease.
   d. Heavy sedation in terminal illness.

Physicians practicing in this hospital have a responsibility to the hospital and to patients to provide quality medical care while adhering to this code of ethics.

The medical aspect of good medicine is certainly easier to take than the pernicious legal aspect our Canadian Catholic legislators have promulgated.

To the Editor:

The Catholic Physicians' Guild could make a very valuable contribution to North American society if they became involved in the major issues which concern the members as Catholics and as physicians.

The articles in the Linacre Quarterly over the years have been mainly about the catechetics of sexual morality, sex instruction of children, contraception, sterilization, and also about death, abortion, and euthanasia. At least since Vatican II these topics are the concern of the individual conscience. The subject matter has been overworked and the discussions become tedious and somewhat irrelevant and are reminiscent of the debates for and against the pasteurization of milk.

Thomas Linacre was an eminent physician and humanist and was respected by such men as Erasmus and Thomas More. The editor should attempt to emulate his efforts.

To The Editor:

I am sorry to say this but your moralists about twenty years behind the present Catholic Physician. Why not print something by Hellegers of Georgetown University, Obstetrics & Gynecology Department, silly to have ENT men talking about birth control when they do not touch the problem in their offices.

Sincerely,
J.E. Gottemoller, M.D.
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To The Editor:

Get relevant! Please cancel my subscription.

Sincerely,
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