ALONG HIGHWAY AND BYWAY
CATHOLIC HOSPITAL ASSOCIATION CONVENTION

The 21st Annual Convention of the Catholic Hospital Association of the United States and Canada was held in the historic city of Baltimore, Maryland, from June 15th to June 19th, 1936. This year's convention was unique in the sense that a number of welfare organizations were invited to participate. Among these was the Federated Catholic Physicians' Guild. Three members of the Guild read papers during the course of the convention: the National Moderator, the Reverend Ignatius W. Cox, S.J.; Dr. Frederick W. Rice, M.D., and Joseph A. Dillon, M.D. The convention was a triumph of the organizing ability of the Reverend Alphonse M. Schwita, S.J., President of the Catholic Hospital Association. One enthusiastic doctor of our Federation declared that he had never attended a convention from which he drew so much profit. The participation of the Federated Catholic Physicians' Guild marks a new step in the development of our organization. With this beginning, it may now be possible in the near future to hold a national convention of the Guild alongside of the annual convention of the Catholic Hospital Association. And that is one step nearer our ideal of holding a national convention of Catholic doctors under the auspices of the Guild at the annual meeting of the American Medical Association. Such a convention is held by our English Catholic doctors alongside of the annual meeting of the British Medical Association.
CATHOLIC PRINCIPLES AND HUMAN WELFARE

At the general meeting of the convention on Monday afternoon, June 15th, our National Moderator, the Reverend Ignatius W. Cox, S.J., presented the greetings of the Physicians' Guild in a paper entitled "Catholic Principles and Human Welfare." The remarks of Father Cox were carried with feature headlines in the Baltimore Sun the next morning. The N. C. W. C. News Service sent out the following account of Father Cox’s paper which was printed in the Catholic News of New York City:

"The founding of 'another Legion of Decency' to take an uncompromising stand in the field of human welfare,' was suggested by the Rev. Ignatius W. Cox, S.J., of Fordham University, chaplain and founder of the Federated Catholic Physicians' Guild, in an address at the convention of the Catholic Hospital Association of America and Canada here.

"This Legion, Father Cox said, would oppose the efforts of physicians favoring sterilization, various forms of birth control and euthanasia; medical supply houses dealing in contraceptives, and publishing houses selling contraceptive literature.

"The Catholic medical and nursing profession, he declared, at this moment requires more than anything else, 'a superabundance of the infused virtue of Christian fortitude.' 'And this,' he added, 'is because the medical and nursing profession, and human welfare work manifest in this age, have definitely rejected God and are proceeding with a steady and relentless drift toward absolute paganism.

"We are witnessing the spectacle of a treatment of human life in its origin, in its conservation and its termination utterly divorced from the divine right of God. It is becoming increasingly difficult for the Catholic physician, the Catholic hospital and nursing profession and the Catholic social worker to cooperate with the pagans who all too frequently dominate these professions.'"

This account failed to bring out an important paragraph in Father Cox's paper which received the approbation of many doctors and a strangely enthusiastic response from many of the hospital Sisters present. We quote:

"And coming closer to home, we must be conscious of the fact that there have been non-Catholic doctors on the staffs of Catholic Medical Schools who were known to be intellectually opposed to the teachings of Christ on birth control and abortion. I know of one case where one professor while still on the staff of a Catholic medical school declared before the members of a distinguished club that millions in this country ought to be sterilized. There have been persistent stories in the past of doctors with similar views who held distinguished positions on the staffs of Catholic hospitals. Catholicism should not be merely horizontal, that is, every place at every time; it should likewise be vertical, it should run up and down the backbone of every Catholic organization. There is a deep-seated resentment, rightly or wrongly, among Catholic physicians, at least in certain localities, that they are denied equal opportunities with Protestant and Jewish physicians in appointment to staffs of Catholic hospitals. To touch two more points on this strange cooperation of Catholics with the very forces that are aiming most deadly blows at the principles of Christ in the promotion of human welfare, let me state the following:

"At a recent executive meeting of the Federated Catholic Physicians' Guild, one of the doctors asked the other members of the committee whether they knew any firms dealing with medical supplies, and not dealing with contraceptives, from which Catholic physicians could make purchases. The same question could be asked of certain publishing houses dealing largely in medical literature."
CATHOLIC ACTION IN THE HEALTH FIELD

Under this title on Tuesday, June 16th, Dr. Frederick W. Rice, M.D., of the Manhattan Guild, read a paper which excited tremendous interest. He advocated the development in this country of a number of maternity centers, with combined hospital and home service. "These centers," stated Dr. Rice, "should be teaching institutions which would in time be capable of such extension as to insure adequate protection for all women during pregnancy and childbirth." He suggested the development of this national service of maternity care through the agency of the Catholic Sisters, adding that "it would open the doors wide to the betterment of family life" and he further recommended the organization of a Catholic Maternity Hospital Association to facilitate the development of a constructive plan.

Contrasting conditions in the United States with those abroad, Dr. Rice declared that the obstetrical training of physicians in this country is "woefully inadequate." Deploring the rapid progress of the birth control movement, Dr. Rice declared that "mothers are misguided in using contraceptives to promote health and limit their families without regard for the serious moral and medical consequences." Dr. Rice asserted that Catholic maternity centers would be "the ideal units for the collection, interpretation and dispersal of clinical facts" concerning the Rhythm Theory which would help to solve, for those who have sufficient reasons, this grave socio-economic, medico-ethical problem and would be a definite contribution to medical science and to humanity.

Apropos of Dr. Rice's desire to bring some units of nursing Sisters into intimate contact with obstetrical work, it is interesting to note a change in ecclesiastical discipline on this point. According to the Ecclesiastical Review of July, 1936, the Sacred Congregation of Propaganda issued an instruction on the 11th of February, 1936, with regard to the foundation of new religious communities of women whose specific purpose is to meet the medical needs of women and children in foreign lands. The Review continues: "The need for religious Sisters to minister to the medical needs of women and children in foreign mission lands grows out of the habits and customs of these countries. Everywhere in Asia and Africa women prefer to be treated by women in their medical needs, particularly in obstetrics and gynecology. But in some lands it is more imperative than in others. In China it is not absolutely necessary but highly desirable. In India, where generally speaking a woman may not show her face to a man not of her immediate family, it is essential. In the Moslem Near-East, Egypt and Sudan, it is necessary. In Africa, all the native reticence of women in sickness, especially childbirth, demands women doctors, if they are available."
There have actually been cases where Indian women preferred to die undelivered rather than be ministered to by qualified men.

“But the real tragedy lies in the absence of skilled women to care for women and infants in these lands, and the prevalence of ignorant, superstitious and unsanitary womenfolk doing this delicate and highly scientific work. The wholesale character of the resulting holocaust of human life may be gathered from this fact alone: not one million of India’s one hundred and sixty million women receive skilled medical care in sickness.”

This change in ecclesiastical discipline represents the triumph of Dr. Anna Dengel, M.D., Superior of the Society of Catholic Medical Missionaries, Inc., Washington, D.C., who founded an order of Nursing Sisters for this very purpose on the 3rd of September, 1935, with the approbation of Archbishop Curley of Baltimore.

**THE CATHOLIC PHYSICIAN AND HIS SPHERE OF INFLUENCE**

This was the title of a paper read by the President of the Federation, Dr. Joseph A. Dillon, M.D. Dr. Dillon said in part:

Soon the doctor goes forth into the world and shows that he is not a Catholic whose only contacts with the Church are at baptism and, if the grace of God be given him, at death. He senses that he is judged by different standards. What is condoned in others, is held against him. The world pays this tribute to the Catholic Church. Witness the statements of the birth controllers when they take pains to make the gullible public believe that their methods are not at variance with the ethics of the Church. Notice how they tell of the percentage of Catholic women who seek advice in their clinics, but never a word of the percentage of Presbyterians, Episcopalians or other non-Catholics. Much is expected of us because we have been given much.

How many opportunities to do good may be found by our young practitioner!

There is the difficult labor case with mother and child in jeopardy. Here he acts as a Christian and with impartial justice works to save the life of both—sacrificing neither to expediency.

Again there is the girl who begs for abortion to avoid disgrace. How often with kindly word and effort, can such a woman be placed where she can atone for her error and not add a most grievous sin to one that is more easily forgiven.

The doctor often has opportunities that are closed to the priest. The fact that he is a co-religionist appeals to the patient and the physician has influence because of his administrations that relieve physical pain and suffering. This puts the patient in a receptive frame of mind and often causes him to speak of things that have been troubling him spiritually. This fact is well utilized by the medical missionary.

Again there is the dangerously ill Catholic who would pass unrepentant into another world did not his physician advise the attendance of the priest. In long continued illness, religious solace is of inestimable physical help.

Extreme unction is the sacrament of those in danger of death, not necessarily the sacrament of the dying. It is surprising how often relatives and friends delay the administration of the last rites of the Church and how subterfuges must be invented so as not to cause an anticipated frightening of the patient. The sequel
is that the sick person is pleased, not alarmed. It is forgotten "that the prayers of the Church help the sick man." Even in religious communities this tendency to delay is sometimes found, the associates fearing to alarm their confrere. It is a serious responsibility for a Catholic doctor to take a chance by delay, when preparation for the other world is one of the real objects of a religious life.

THE FEDERATION'S BOOTH

Among the hundreds of medical and nursing exhibit booths which covered more than two-thirds of the vast floor of the 5th Regiment Armory in Baltimore was a little booth over which was the simple title: "Federation of Catholic Physicians' Guilds." This booth was under the care of Drs. Joseph A. Dillon and Matthew Golden, who distributed there the literature of the Federation. Many were the names that were registered in the Federation's book and many were the inquiries about the work of the Federation. It would seem proper here to restate the aims and purposes of the various Guilds that have united in a Federation which is countrywide:

EXISTING GUILDS: Active guilds have been functioning for some years in various cities of the United States, the oldest of these in Chicago, Philadelphia, Boston, Brooklyn, Manhattan, Bronx and Rochester; all are affiliated with the Federated Catholic Physicians' Guild. Other units are in the process of formation. Strong Catholic Physicians' Guilds have been active in England, France, Italy and other countries of Europe for many years. The work of the Guilds has been approved by His Holiness and the Hierarchy of the Church in this country. The Holy Father has expressed the desire for the spread of this work.

PURPOSE: To promote moral principles in medical education and practice. The various guilds attain these objectives in the manner decided upon by their members. As an example of possible guild activities the following is taken from the Constitution of one of the active guilds:

(a) To uphold and practice the principles of Catholic faith and morality, as related to the science and practice of medicine, and to condemn un-Christian and unscientific materialism.

(b) To assist the Church and ecclesiastical authorities in the diffusion of the knowledge of Catholic medical ethics.

(c) To form an organized resistance to irreligious and materialistic propaganda and legislation.

(d) To encourage young Catholic men to study medicine and assist them in college admission.

(e) To assist Catholic institutions, particularly hospitals and medical missions.

(f) To sustain Catholic hospitals in their enforcement of ethics and operative restrictions of the Catholic Hospital Association.

METHOD OF ORGANIZATION: A large and well developed organization is not necessary for guild activities. The primary object of the guild, the promotion of moral principles in medical education, may be attained by a small group.

Guilds have been formed by two methods:

(a) By the Ordinary of the Diocese through the appointment of a spiritual director or physician to organize.
(b) Through the initiative of one or more physicians who have assembled a small group for the formation of a chapter and then secured the approbation of the Ordinary of the Diocese.

In either event the physicians interested have appointed several of the group to serve as a membership committee. Experience has taught that personal contact is necessary to increase membership. A membership committee may be formed of two or three men from each hospital staff or medical society in the community. A small number of enthusiastic workers making personal contacts among their fellow physicians explaining the objects of the guild will produce the desired results.

ACTIVITIES: The most popular activity seems to be the evening meetings for the discussion of an ethical question pertaining to medicine. These meetings are held at intervals, usually about two to four times a year. As a rule a speaker is invited to discuss a subject of medico-moral interest; a general discussion follows. Other activities immediately suggest themselves as soon as the organization has been completed. These vary depending upon the needs of the community in which the guild is situated. The following examples are worthy of note: cooperation with the St. Vincent de Paul Society in the care of the sick poor; establishment of dispensaries in connection with the Diocesan Bureau of Charities; the formation of student guilds in medical schools; the publication of literature on subjects of medico-moral nature.

The guilds without exception have felt the need of at least one spiritual function during the year, usually in the form of corporate communion, evening or week-end retreats, etc.

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THE LINACRE QUARTERLY

THE LINACRE QUARTERLY, our militant and snappy Federation organ, which was launched over three years ago in the blackest days of the depression, has almost met shipwreck on the dread rocks of financial difficulties, just as we seem to be emerging from the depression. This late appearance of the June number has been caused by a deficit in funds which made it imperative for us to suspend publication until we could make up, at least partially, this deficit. The Linacre Quarterly is the connecting link between the various Guilds and is, besides being a symbol of inspiration, a bulletin of the activities of these Guilds which encourages all our members spread throughout the country. But the method of financing the Linacre, by contributions from the various Guilds, has proved most unsatisfactory. These contributions have been irregular and undependable. The officers of the Federation in New York have debated long and seriously this problem, and at present the only solution possible seems to be a list of individual subscribers at the current price of $1.00 per year. If we can attain 300 such subscribers, we can finance the four issues of the Linacre for a year. This will make the Linacre independent of the overhead contributions to the work of the Federation which have been honored more in the breach than in the observance. The Linacre should not be allowed to perish. When we compare the smallness of our publication with the large, well-edited and splendid monthly publications of
the French and Belgian Guilds and the splendid quarterly entitled The Catholic Medical Guardian of the English Guilds, we cannot help but feel a sense of shame that our American Catholic physicians, so much more numerous than our foreign brethren, should not be able to produce a better publication. We invite letters of suggestion on this matter as our mind is not entirely as yet made up. But in the absence of contributions and practical suggestions, beginning with the next volume in December, 1936, we will have to send subscription blanks to the individual doctors. Three hundred full-paid subscriptions, or $300 per year, will save the situation. And this is a small price to pay for the continuance of the Linaacre, which has called forth the voluntary efforts of busy minds and over-worked editors in the production of a little magazine that has excited a tremendous amount of favorable criticism.

CATHOLIC PHYSICIANS' GUILDS

As the writer of Along Highway and Byway stepped up to the Federation booth at the Baltimore Convention his eye was caught by a telegram lying on the table. The following is the text: "Held first meeting of New Orleans Guild tonight in home of Archbishop Joseph Francis Rummel. Excellent enthusiastic committee assembled. Hope for quick action. More detailed telegram sent to Miss McGregor. Thanks and kindest regards and best wishes for a most successful meeting. James T. Nix, M.D."

That telegram expressed sentiments which should actuate the Guilds in every place. We are painfully aware of the difficulties and the discouragement which meet zealous doctors in the formation of a Guild and, above all, in its lively continuance. No motivation except that of the most fervent zeal for the cause of Christ can bring to birth or keep alive these Guilds. At the same time, let us remember that no more important work can be done for the cause of Christ today by any lay organization than the work which is the objective of the Physicians’ Guilds. That work is the defense of Christ’s Mystical Body which is being attacked in a thousand subtle ways today in the interest of pseudo-welfare propaganda. We need only call attention to the campaigns for euthanasia, birth control, sterilization and therapeutic abortion. The interest excited by Father Cox’s appeal for a Legion of Decency and a campaign of non-cooperation with pagan human welfare work was symbolic of the feeling in many hearts of that fearless, aggressive action to which the Guilds are dedicated. The situation of the movies and the terrific toll they were taking in human souls seemed hopeless, until a few fearless men inaugurated the Legion of Decency that brought to its knees one of the most powerful financial interests
in this country. The success of that movement has recently been praised and held up for imitation to the whole world by the Holy Father in his encyclical on the motion pictures. Similar fearless action with regard to the promotors of immoral activities in the so-called interest of human welfare will meet with similar results. Dealers in medical supplies and many other agents in human welfare work will fear the opposition of united Catholic action. But that united Catholic action must be scientific and it can only be scientific under the leadership of the Catholic physician. Too long have we allowed the promotors of immoral propaganda to hold the field. There are many right-thinking non-Catholic doctors and non-Catholic nurses and social workers who will welcome the support of the Catholic physician and be immeasurably strengthened by it. To do this we must organize all the Catholic physicians of the country, and through that organization we will be able to create a national voice on these problems which will be heard with respect and followed with that vigor which the intelligent doctor and sound morality can always claim for themselves.

CATHOLIC MEDICAL JOURNALISM

We think it wise to submit the names and addresses of the outstanding organs of Catholic Medical Guilds abroad so that the Moderators and Directors of the various American Guilds, by subscribing to these publications, which subscription is always cheap, may furnish themselves with sufficient matter and inspiration for the various meetings of their Guilds: Editor, Catholic Medical Guardian, 59, Pelham Street, London, S.W. 7, England; Bulletin de la Société Médicale de Saint Luc, Rédaction: Dr. Jean Lanois, 24, Rue d’Aumale, Paris—1Xe, France; Saint Luc Medical, Rédaction: 15, Rue de Turin, Bruxelles, Belgium.

It may be noted that this year during the Pentecostal season there was an International Congress at Vienna of Catholic physicians. The International Congress passed a series of resolutions with regard to sterilization, mission work and international cooperation.

A. M. A. AND CONTRACEPTIVE BIRTH CONTROL

Here in America the report of the “Committee to Study Contraceptive Practices and Related Practices” for the A. M. A. appeared in the Journal May 30th, 1936. That report is not comforting to the advocates of birth control. Dismissing the scare of over-population as utterly unfounded, the Committee says 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 continues, “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 maintains 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 intra-uterine 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."

This report called forth a letter from Mr. Ellsworth Huntington, New Haven, Connecticut, President of the Connecticut Birth Control League. The claim of the eugenists is that "the social aim of birth control is that plenty of births should take place in the right kind of families and few in those in which the children are likely to be poorly trained as well as poorly endowed by nature." To this the present writer asks the very pertinent question, to some impertinent, "What are the 'right kind of families'?" The present writer has shown in the Scientific American that the ordinary criterions for the right kind of families for a good eugenic breed are utterly unacceptable. Doubtless, eugenists believe that they are born to the right kind of families. The present writer believes that no one who advocates the use of contraceptive birth control belongs to the right kind of eugenic mind. In this he seems to have the absolute approval of Mother Nature. She ruthlessly eliminates not only the individual families but the races which practice contraception on a large scale. That is why Theodore Roosevelt called contraception "race suicide." A pagan cynic might add that such race suicide is a natural "mercy killing" or "euthanasia" for a eugenically undesirable breed. The trend in the populations of western nations seems to indicate that mothers are no longer reproducing themselves.