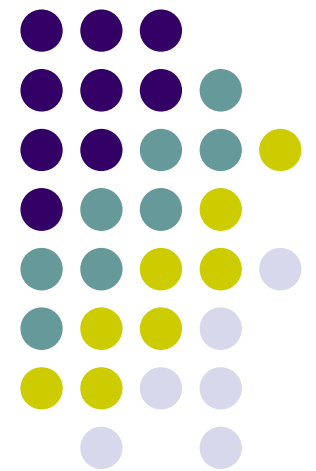


Class Five



Opening Prayer – Jeremiah

22:3-5



22:3 Thus says the LORD: Do what is right and just. Rescue the victim from the hand of his oppressor. Do not wrong or oppress the resident alien, the orphan, or the widow, and do not shed innocent blood in this place.

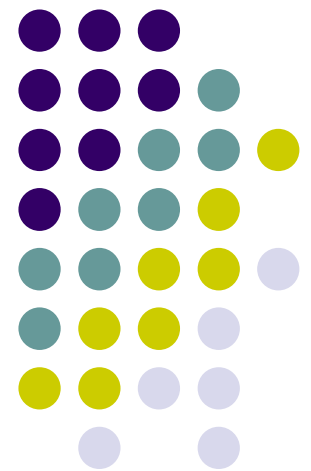
22:4 If you carry out these commands, kings who succeed to the throne of David will continue to enter the gates of this palace, riding in chariots or mounted on horses, with their ministers, and their people.

22:5 But if you do not obey these commands, I swear by myself, says the LORD: this palace shall become rubble.

Question

Does the end always
justify the means?

- Example – if a baby is a good end, then is any means of conceiving a baby morally good



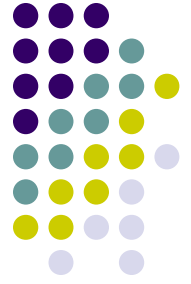


Life Issues

- Life as a Gift from God
 - CCC 2260
 - The covenant between God and mankind is interwoven with reminders of God's gift of human life and man's murderous violence:

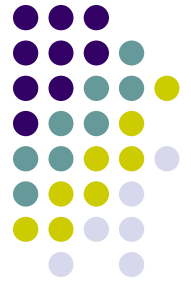
For your lifeblood I will surely require a reckoning.... Whoever sheds the blood of man, by man shall his own blood be shed; for God made man in his own image.

The Old Testament always considered blood a sacred sign of life. This teaching remains necessary for all time.



- Respect Life
 - Defend and Promote
 - Beginning
 - During
 - Dying
 - Death

CCC 2270



- Human life must be respected and protected absolutely from the moment of conception. From the first moment of his existence, a human being must be recognized as having the rights of a person-among which is the inviolable right of ever innocent being to life.

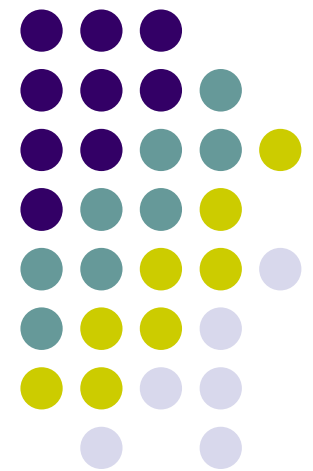
Before I formed you in the womb I know you,
and before you were born I consecrated
you.

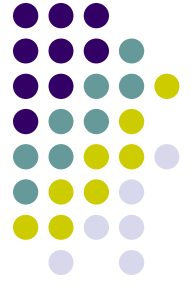
CCC 2270 (con't)



My frame was not hidden from you, when I was being made in the secret, intricately wrought in the depths of the earth.

Beginning of Life -Abortion





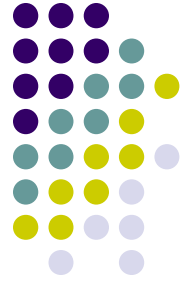
Life Issues – the Church

- CCC 2271

- Since the first century the Church has affirmed the moral evil of every procured abortion. This teaching has not changed and remains unchangeable. Direct abortion, that is to say, abortion willed either as an end or a means, is gravely contrary to the moral law.

You shall not kill the embryo by abortion and shall not cause the newborn to perish. (Didache)

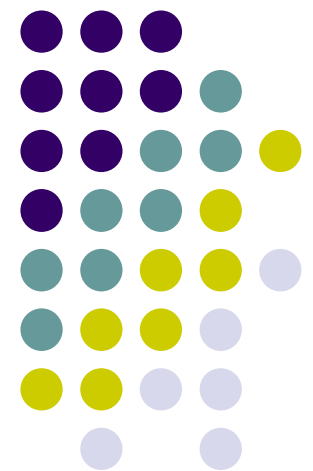
God the Lord of life, has entrusted to men the noble mission of safeguarding life, and men must carry it out in a manner worthy of themselves. Life must be protected with the utmost care from the moment of conception: abortion and infanticide are abominable crimes.



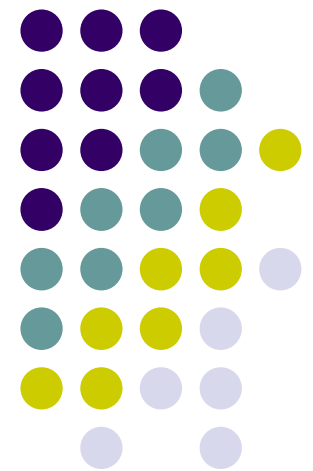
CCC 2272

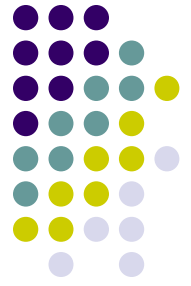
- Formal cooperation in an abortion constitutes a grave offense. The Church attaches the canonical penalty of excommunication to this crime against human life. “A person who procures a completed abortion incurs excommunication *latae sententiae*, “by the very commission of the offense,”

Life Issues – the Church



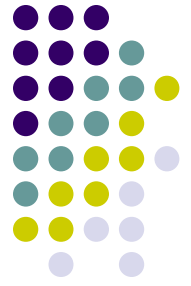
Beginning of Life





Beginning of Life

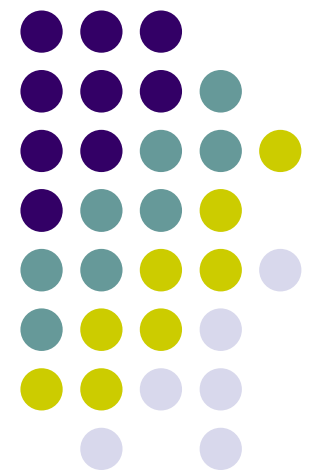
- Reproductive technologies
 - A child is not a right of a married couple, but a gift from God.
 - Although a child is always a good, not every act in conceiving a child is moral. Just because the techniques exist, does not necessarily mean they are moral.



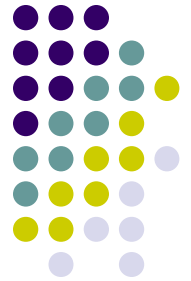
Beginning of Life

- If all moral techniques fail, the option for adoption exists.
- The medical treatment or procedure can never seek to replace the marital act, but must only assist the act. The marital act can not be separated from procreation and procreation can not be separated from marital act.

Reproductive technologies



Reproductive technologies



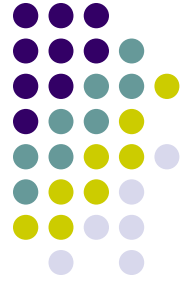
- Infertility
 - Artificial Insemination
 - In Vitro Fertilization (IVF)
 - Gamete inter-fallopian transfer (GIFT)

Reproductive technologies



- Artificial Insemination
 - inserting human semen into a woman's vagina without intercourse taking place
 - semen is collected from masturbation either by the husband or from a donor
 - The semen is then either immediately used or stored for future use

Why it is wrong

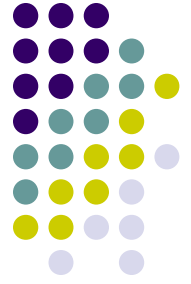


- It is not unitive - method of collection

Reproductive technologies

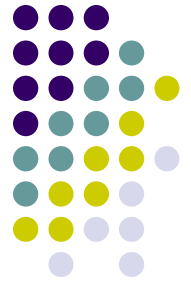


- In Vitro Fertilization (IVF)
 - Several eggs are removed from the woman and are combined with sperm in a special culture dish.
 - The fertilized ovum is either placed in the woman for normal development or is frozen for later use



Why it is wrong

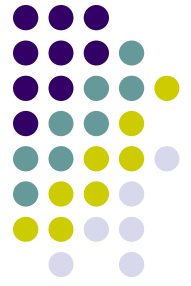
- IVF Problems:
 - Not Unitive
 - Creative aspect of the conjugal act missing -
Creation is hard to see
 - It is outside the couple



IVF – Why it is wrong. (Con't)

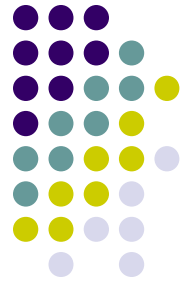
- Killing of life – extra embryos killed
- Frozen
- Immoral way semen was collected
- If pregnancy is successful they sometimes donate their embryos to others
- The church has said in its teaching that it is not a moral option *see Domnum Vitae*

Gamete inter-fallopian transfer (GIFT)

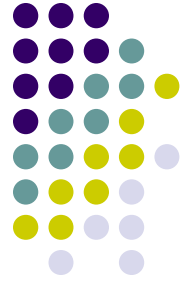


- Procedure
 - The collection of male gametes and female gametes
 - Placed separately into special catheter
 - Injected into the woman's fallopian tube using a surgical procedure called laparoscopy

GIFT con't

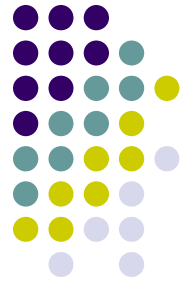


- Fertilization and pre-embryo implantation will occur just as it does naturally (Inside)
- In contrast to In Vitro Fertilization (IVF) where eggs are fertilized *outside* the body



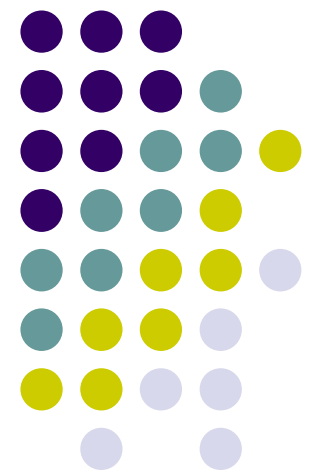
Life Issues – the Church

- Reproductive technologies
 - Gamete inter-fallopian transfer (GIFT)
 - Moral issues
 - “To Assist But Not Replace” – Pope Pius XII
 - The Church only allows GIFT assuming these external conditions:
 - The ovum and sperm come only from the spouses



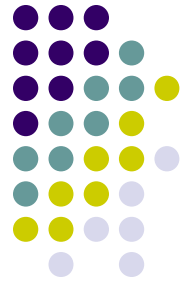
- The semen is collected only from a conjugal act
- The ovum is collected on the same day as the conjugal act
- The sperm is used within 72 hours of its collection – this is the period of fertilization

Research



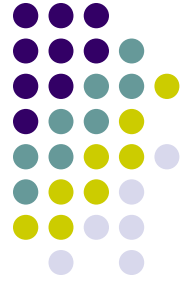
Donum Vitae (Instruction on Respect for Human Life In its Origin and on the Dignity of Procreation: Replies to Certain Questions of the Day, Sacred Congregation for the Doctrine of the Faith, 1987):

- "To use human embryos or fetuses as the object or instrument of experimentation constitutes a crime against their dignity as human beings having a right to the same respect that is due to the child already born and to every human person...
The corpses of human embryos and fetuses, whether they have been deliberately aborted or not, must be respected just as the remains of other human beings.Furthermore, the moral requirements must be safeguarded, that there be no complicity in deliberate abortion and that the risk of scandal be avoided" (I.4).





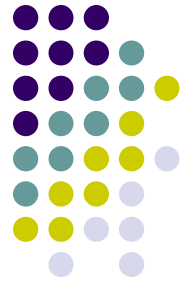
- *"It is a duty to condemn the particular gravity of the voluntary destruction of human embryos obtained 'in vitro' for the sole purpose of research..." (1.5). Declaration on the Production and the Scientific and Therapeutic Use of Human Embryonic Stem Cells (Pontifical Academy for Life, 2000):*
"Is it morally licit to use ES [embryonic stem] cells, and the differentiated cells obtained from them, which are supplied by other researchers or are commercially obtainable?"
"The answer is negative, since: Prescinding from the participation – formal or otherwise – in the morally illicit intention of the principal agent, the case in question entails a proximate material cooperation in the production and manipulation of human embryos on the part of those producing or supplying them" (Libreria Editrice Vaticana, p. 17).



Various issues

- Issues of informed consent
- AIDS
 - Privacy

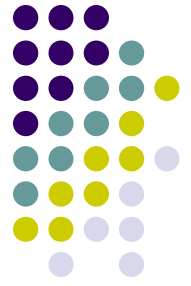
Proxy decision making – Living Wills & Power of Attorney



- Appoint someone who has the strength of character to make good judgments in painful circumstances.
- Appoint someone who you know can trust to make decisions on the basis of the Church's teaching. **The prudent person will select an agent who will act as he or she would have acted in whatever circumstances evolve.** (emphasis added)

Revised:10-29-07
Adapted from District of Columbia Pastoral letter *Care of the Sick and Dying: A Pastoral Letter – 1995* quoted by May, William *Catholic Bioethics and the Gift of Human Life*. Our Sunday Visitor. 2000. page 271

Proxy decision making – Living Wills & Power of Attorney



- No one should agree to act as an agent for another person if that person would expect or require the agent to make decisions which disregard the teaching of the Church. It is not morally acceptable to carry out immoral decisions on behalf of someone else. No agent and no physician should ever feel obliged to act contrary to their well informed consciences, even on behalf of another person.

Revised:10-29-07
Adapted from District of Columbia Pastoral letter *Care of the Sick and Dying: A Pastoral Letter – 1995* quoted by May, William *Catholic Bioethics and the Gift of Human Life*. Our Sunday Visitor. 2000. page 271

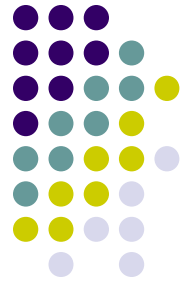
Proxy decision making – Living Wills & Power of Attorney



- Appoint someone who is likely to be available to care for you in the distant future... it may be advisable to name alternate agents, in the event that your first choice proves unable or unwilling to act for you when the need arises.
- Discuss the specifics of your directive with the person whom you wish to choose as your agent....

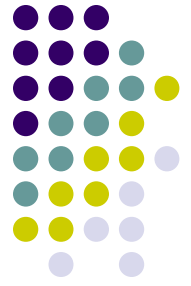
Revised:10-29-07
Adapted from District of Columbia Pastoral letter *Care of the Sick and Dying: A Pastoral Letter – 1995* quoted by May, William *Catholic Bioethics and the Gift of Human Life*. Our Sunday Visitor. 2000. page 271

Proxy decision making – Living Wills & Power of Attorney



- Generally avoid: 1. Stating that you wish to reject certain treatments under all circumstances except in case of imminent death or when one's present medical condition makes it clear in advance that such treatments would be futile; 2. Stating without qualification that you want medical remedies restricted in the event that you become permanently unconscious or terminally ill. Such stipulation can amount to providing a premature self-diagnosis. You should allow your health care agent and physician latitude to offer you appropriate care based on your actual condition.

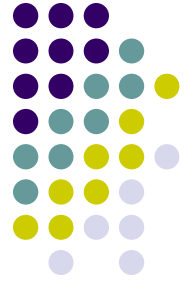
Proxy decision making – Living Wills & Power of Attorney



- Include a provision regarding treatment at the time of imminent death. Recall that the Church allows a person on the verge of death to refuse a treatment which would result in only a burdensome prolongation of life. Your advance directives should authorize your agent to observe this norm.

Revised:10-29-07
Adapted from District of Columbia Pastoral letter *Care of the Sick and Dying: A Pastoral Letter – 1995* quoted by May, William *Catholic Bioethics and the Gift of Human Life*. Our Sunday Visitor. 2000. page 272

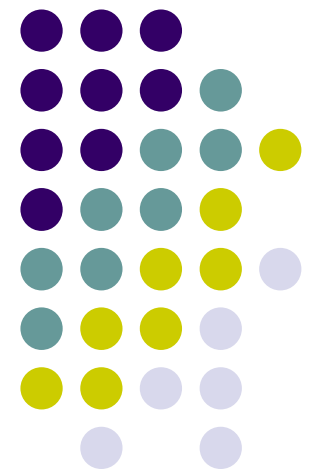
Proxy decision making – Living Wills & Power of Attorney



- Periodically review the provisions of your directive... Make copies of your directive and distribute them to your agent and each of your health care providers and anyone else you deem appropriate.

Benefit vs. harm

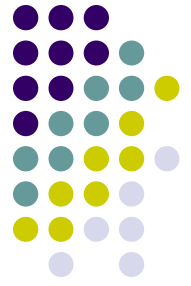
Issues during life





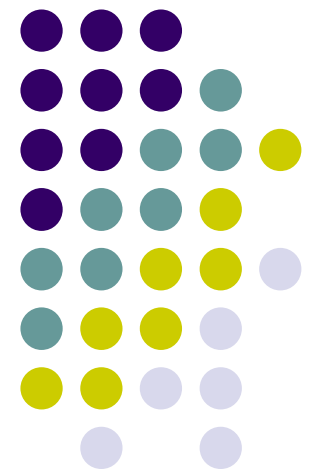
Benefit vs. harm

- Benefit vs. harm
 - If the patient is competent, then she should make her own decisions regarding medical treatment (Catechism of the Catholic Church, no. 2278). The Ethical Directives and Religious Directives for Catholic Health Care Services (NCCCB [1995]) provide:

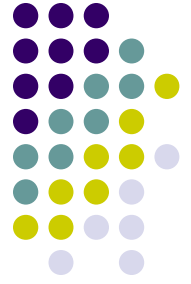


- *While every person is obliged to use ordinary means to preserve his or her health, no person should be obliged to submit to a health care procedure that the person has judged, with a free and informed conscience, not to provide a reasonable hope of benefit without imposing excessive risks and burdens on the patient or excessive expense to family or community.
(no. 32)*

Double Effect



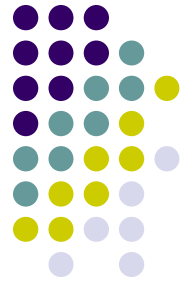
DOUBLE EFFECT



- **In order that one may do an action from which two effects, one good and one bad, will necessarily follow, four conditions must be simultaneously verified. If any one of these four conditions are violated the act is not morally permissible.**



- **1) The action must be in itself a morally good action, or at least a morally indifferent action.**
- **2) The good effect of the action must precede the evil effect or at least be simultaneous with it.**
- **3) The motive prompting the action must be directed to the achievement of the good effect, never in any way to the evil effect.**
- **4) The good effect must be at least equivalent in importance to the evil effect.**

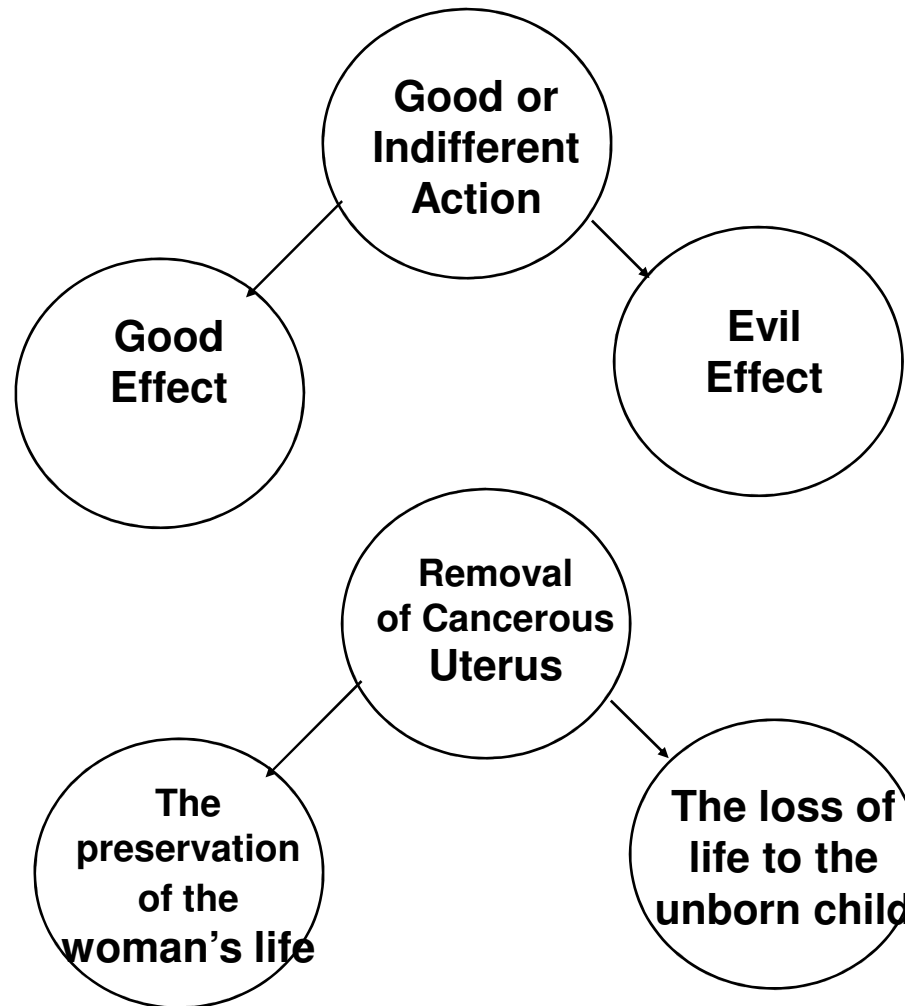


Moral Dilemmas

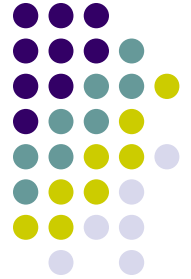
- Two scenarios:
 - A pregnant woman (2 months) is diagnosed with an aggressive form of uterine cancer. Without the immediate removal of the uterus, the woman is diagnosed to die within three months. The Church would consider it morally allowable to remove the uterus knowing that in turn it would cause a spontaneous abortion.



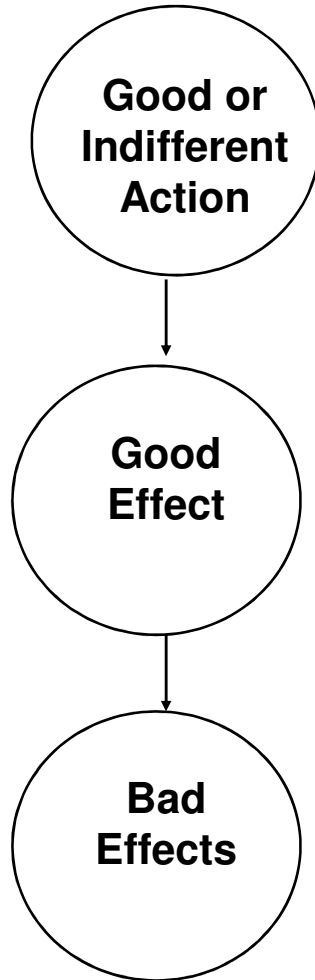
- A pregnant woman with severe diabetes is told by her doctor that if she does not abort the child, her life will be greatly endangered. The Church would consider the abortion morally illicit.



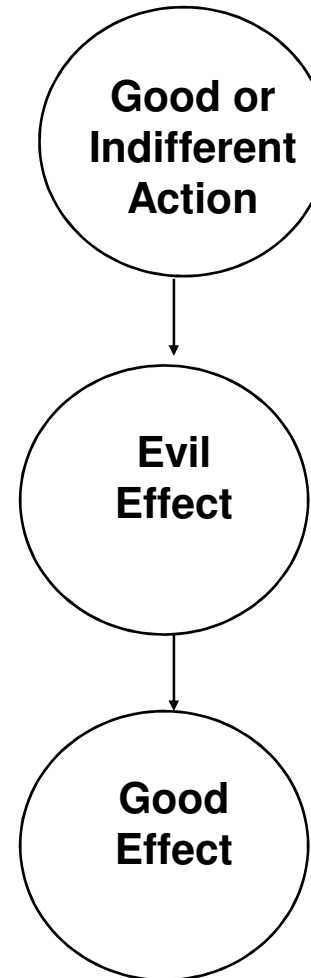
The good objective is not attained through the medium of the evil effect, and the second principle is therefore fully verified in the sample case. Her life is preserved because the cancerous uterus is removed, not because her child died. There must be a clear proportion between the good and bad effects. For example, the cure of a cold is in NO SENSE proportionate to the loss of a child's life.



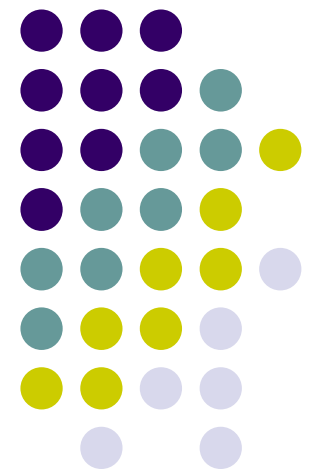
Permissible

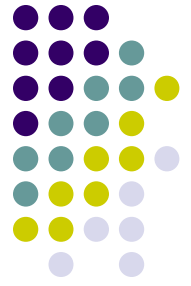


Not Permissible



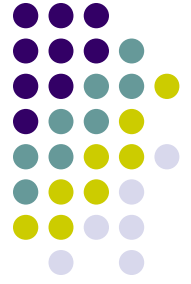
Transplants





Transplants

- Pius XII states “A person may will to dispose of his body and to distain it to ends that are useful, morally irreproachable and even noble; among them to aid the sick and suffering. One may make a decision of this nature with respect to his own body with full realization of the reverence, which is due it. The decision should not be condemned, but positively justified.”

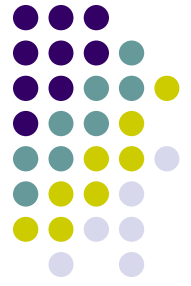


- Quoting from his encyclical *The Gospel of Life*, the Holy Father said, "...One way of nurturing a genuine culture of life is the donation of organs, performed in an ethically acceptable manner, with a view to offering a chance of health and even of life itself to the sick who sometimes have no other hope" (No. 86).
- The ethics behind it goes back to the principle of Totality (There is a hierarchy of organs)



Transplants

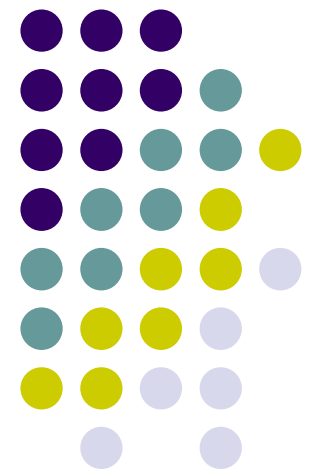
- **Tissue, a paired organ or bone marrow from a living person.** The tissue or organ must not be essential for the life or health of the donor, such as one of two kidneys.
- Pope John Paul II stated in 1991 to a group on organ transplants: "... A person can only donate that of which he can deprive himself without serious danger or harm to his own life or personal identity, and for a just and proportionate reason. It is obvious that vital organs can only be donated AFTER DEATH."



- **Criteria**

- risk involved to the donor in a transplant must be proportionate to the good of the recipient
- The removal of the organ must not seriously impair the donor's health or bodily functions
- the prognosis of acceptance is good for the recipient
 - there health is strong enough and well enough to undergo the transplant
 - they have reasonable sense that they will not reject it
- the donor must make an informed and free decision recognizing the risk involved

PRINCIPLE OF TOTALITY

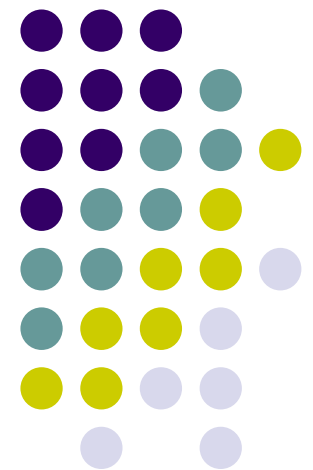


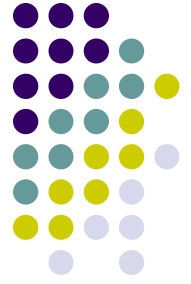


PRINCIPLE OF TOTALITY

- The principle of totality states that an individual organ may be sacrificed for the good of the whole.
- Related to the principle of totality is the principle of integrity, perhaps best understood as being respectful of the hierarchical ordering of the members of the body.

Ordinary vs. Extraordinary





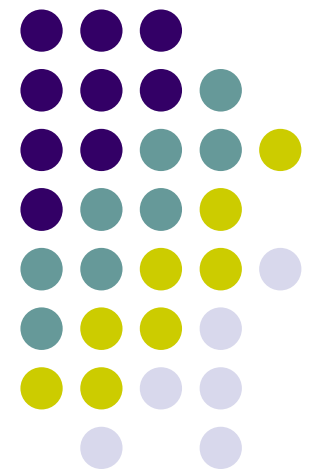
Ordinary vs. Extraordinary

- Because the determination of whether a given means is ordinary or extraordinary can only be made with reference to the “concrete circumstances” of the case, it is impossible to formulate an a priori list of ordinary and extraordinary means. Though one may refuse extraordinary means, one may also elect to use extraordinary means, even if these are at the experimental stage and are not without a certain risk. The Church also recognizes that one may “interrupt those means where the results fall short of expectations.” Such means must not “impose on the patient strain or suffering out of proportion with the benefits which he or she may gain from such techniques.” (Congregation for the Doctrine of the Faith, Declaration on Euthanasia [1980].)

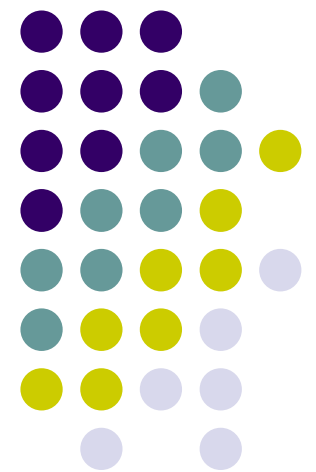


- **It is important to note here that the medical profession defines the terms “ordinary” and “extraordinary” differently than does the Catholic ethical tradition. In medicine a means is ordinary which is 1) scientifically established; 2) statistically successful; and 3) reasonably available. (Russell Smith, “Ordinary and Extraordinary Means,” Ethical Principle in Catholic Health Care [Boston, MA: NCBC, 1999], 89.) It is important that Catholics not rely solely on doctors or nurses in making medical treatment decisions, but consult with a priest or a Catholic knowledgeable of church teaching.**

End of Life (Dying)



Death



Death

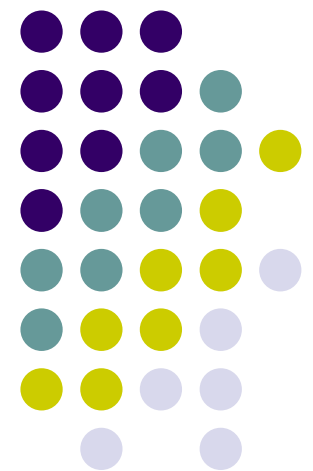
1989 Working Group of the Pontifical Academy of Sciences

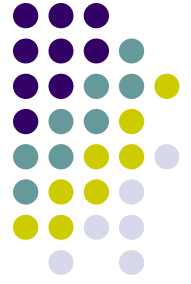


- Spontaneous cardiac and respirator function have irreversibly ceased, which rapidly leads to a total and irreversible loss of all brain functions, or
- There has been an irreversible cessation of all brain functions, even if cardiac and respirations function which would have ceased have been maintained artificially.

May, William *Catholic Bioethics and the Gift of Human Life*. Our Sunday Visitor. 2000. page 290

Nutrition and Hydration





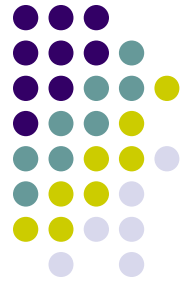
Nutrition and Hydration

- We reject any omission of nutrition and hydration intended to cause a patient's death. We hold for a presumption in favor of providing medically assisted nutrition and hydration to patients who need it, which presumption would yield in cases where such procedures have no medically reasonable hope of sustaining life or pose excessive risks or burdens. Recognizing that judgments about the benefits and burdens of medically assisted nutrition and hydration in individual cases have a subjective element and are generally best made by the patient directly involved, we also affirm a legitimate role for families' love and guidance, health care professionals' ethical concerns, and society's interest in preserving life and protecting the helpless. In rejecting broadly permissive policies on withdrawal of nutrition and hydration from vulnerable patients, we must also help ensure that the burdens of caring for the helpless are more equitably shared throughout our society.

Nutrition and Hydration: Moral and Pastoral Reflections

A Statement of the NCCB Committee for Pro-Life Activities

Revised 10/29/07
April 1992

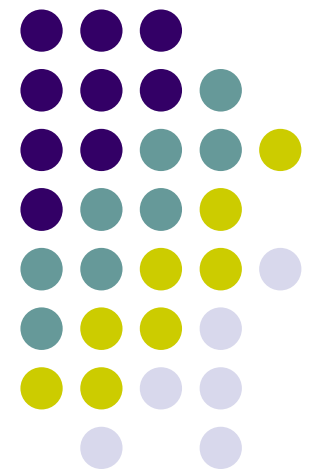


Life Issues

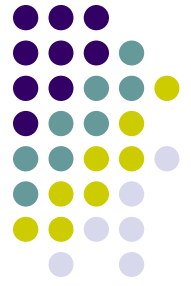
- The Church's commitment to human dignity inspires an abiding concern for the sanctity of human life from its very beginning, and with the dignity of marriage and of the marriage act by which human life is transmitted. The Church cannot approve medical practices that undermine the biological, psychological, and moral bonds on which the strength of marriage and the family depends.

From: Issues in Care for the Beginning of Life
Ethical and Religious Directives for Catholic Health Care Services
National Conference of Catholic Bishops
November 1994

Euthanasia

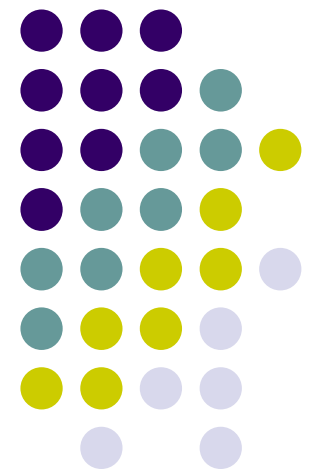


Euthanasia

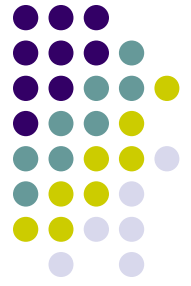


- *Euthanasia must be distinguished from the decision to forego so-called ‘aggressive medical treatment,’ in other words, medical procedures which no longer correspond to the real situation of the patient, either because they are by now disproportionate to any expected results or because they impose an excessive burden on the patient and the patient’s family. ... Certainly there is a moral obligation to care for oneself and to allow oneself to be cared for, but this duty must take account of concrete circumstances. It needs to be determined whether the means of treatment available are objectively proportionate to the prospects for improvement. (Evangelium vitae, no. 65; emphasis added).*

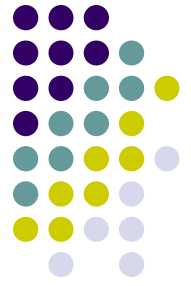
Values in Medical Moral Decision Making



Values in Medical Moral Decision making



- Integrity
 - integration of physical, emotional, spiritual dimensions of the person.
- Dedication to the truth
 - All intervention done out of love for the person

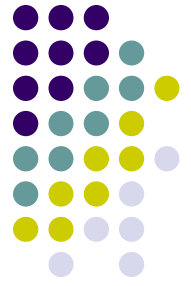


- Capacity to Love
 - All people have capacity to love
- Authentic Freedom
 - All persons have the right to act within moral value system which physicians must respect.
Right to natural death and non-treatment
- Peace
 - All medical decision should result in peace, serenity before God for choices made.



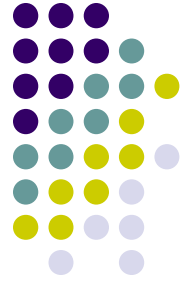
- If the patient is competent, then she should make her own decisions regarding medical treatment (Catechism of the Catholic Church, no. 2278). The Ethical Directives and Religious Directives for Catholic Health Care Services (NCCB [1995]) provide:





- *While every person is obliged to use ordinary means to preserve his or her health, no person should be obliged to submit to a health care procedure that the person has judged, with a free and informed conscience, not to provide a reasonable hope of benefit without imposing excessive risks and burdens on the patient or excessive expense to family or community. (no. 32)*

Ethical and Religious Directives for Catholic Health Care Services
National Conference of Catholic Bishops
November 1994



Directives

1. When the marital act of sexual intercourse is not able to attain its procreative purpose, assistance that does not separate the unitive and procreative ends of the act, and does not substitute for the marital act itself, may be used to help married couples conceive. note #27.
2. Those techniques of assisted conception that respect the unitive and procreative meanings of sexual intercourse and do not involve the destruction of human embryos, or their deliberate generation in such numbers that it is clearly envisaged that all cannot implant and some are simply being used to maximize the chances of others implanting, may be used as therapies for infertility.
3. Heterologous fertilization (that is, any technique used to achieve conception by the use of gametes coming from at least one donor other than the spouses) is prohibited because it is contrary to the covenant of marriage, the unity of the spouses, and the dignity proper to parents and the child. note #28.
4. Homologous artificial fertilization (that is, any technique used to achieve conception using the gametes of the two spouses joined in marriage) is prohibited when it separates procreation from the marital act in its unitive significance (e.g., any technique used to achieve extra-corporeal conception). note #29.
5. Because of the dignity of the child and of marriage, and because of the uniqueness of the mother-child relationship, participation in contracts or arrangements for surrogate motherhood is not permitted. Moreover, the commercialization of such surrogacy denigrates the dignity of women, especially the poor. note #30.
6. A Catholic health care institution that provides treatment for infertility should offer not only technical assistance to infertile couples but also should help couples pursue other solutions (e.g., counseling, adoption).



7. A Catholic health care institution should provide prenatal, obstetric, and postnatal services for mothers and their children in a manner consonant with its mission.
8. Abortion (that is, the directly intended termination of pregnancy before viability or the directly intended destruction of a viable fetus) is never permitted. Every procedure whose sole immediate effect is the termination of pregnancy before viability is an abortion, which, in its moral context, includes the interval between conception and implantation of the embryo. Catholic health care institutions are not to provide abortion services, even based upon the principle of material cooperation. In this context, Catholic health care institutions need to be concerned about the danger of scandal in any association with abortion providers.
9. Catholic health care providers should be ready to offer compassionate physical, psychological, moral, and spiritual care to those persons who have suffered from the trauma of abortion.
10. Operations, treatments, and medications that have as their direct purpose the cure of a proportionately serious pathological condition of a pregnant woman are permitted when they cannot be safely postponed until the unborn child is viable, even if they will result in the death of the unborn child.
11. In case of extrauterine pregnancy, no intervention is morally licit which constitutes a direct abortion. note #31.
12. For a proportionate reason, labor may be induced after the fetus is viable. note #32.



13. Prenatal diagnosis is permitted when the procedure does not threaten the life or physical integrity of the unborn child or the mother and does not subject them to disproportionate risks; when the diagnosis can provide information to guide preventative care for the mother or pre- or postnatal care for the child; and when the parents, or at least the mother, give free and informed consent. Prenatal diagnosis is not permitted when undertaken with the intention of aborting an unborn child with a serious defect.
14. Non-therapeutic experiments on a living embryo or fetus are not permitted, even with the consent of the parents. Therapeutic experiments are permitted for a proportionate reason with the free and informed consent of the parents or, if the father cannot be contacted, at least of the mother. Medical research that will not harm the life or physical integrity of an unborn child is permitted with parental consent. note #33.
15. Catholic health institutions may not promote or condone contraceptive practices but should provide, for married couples and the medical staff who counsel them, instruction both about the Church's teaching on responsible parenthood and in methods of natural family planning.
16. Direct sterilization of either men or women, whether permanent or temporary, is not permitted in a Catholic health care institution when its sole immediate effect is to prevent conception. Procedures that induce sterility are permitted when their direct effect is the cure or alleviation of a present pathology and a simpler treatment is not available. note #34.
17. Genetic counseling may be provided in order to promote responsible parenthood and to prepare for the proper treatment and care of children with genetic defects, in accordance with Catholic moral teaching and the intrinsic rights and obligations of married couples regarding the transmission of life.