

800-U-CAN-SUE

Many of us have wondered for years why abortionists have not been sued for cases where they have maimed or even killed the mother during the abortion procedure. It seems like such a logical way to wound these people where they least want to be hurt....in the pocketbook!

I am going to tell you of one state where this is happening, and why, but I have no idea how widespread malpractice suits against abortionists have become, for the network anchormen never tell us. They will bombard us regularly with the story of Dr. Slepian, killed by a sniper's bullet; described not as an abortionist but rather as "an obstetrician who delivered a lot of babies and who also provided abortion services." But if one of these hired executioners flies in from another state, disguised or with a mask on (not for his personal safety but because he doesn't want his neighbors back home to know what he is doing most Saturdays!) and causes the death of a young woman, you will not hear about it on the Evening News.

In one state, Florida, there is plenty of malpractice activity going on, thanks to Mike Conroy. I know practically nothing about the man, other than that he has 12 children and so he must be Catholic, and he is a pro life activist. He has formed and heads an organization called *Legal Action for Women*, whose purpose it is to assist women maimed by abortion, or families of women killed by abortion, to recover monetary awards through the courts. And we are talking here about big lawsuits, not frivolous ones, ones that could well drive the perpetrator out of business.

Does it work? Yes. One abortionist, who flew back and forth to service his five abortuaries in Mississippi and Alabama, was slapped with a \$10,000,000 judgment for allowing a patient to bleed to death. He is now bankrupt, and out of his sleazy business. Another lost his license to practice in Florida because of information supplied to the Board of Medical Examiners by Conroy.

These people are becoming more and more vulnerable because of the soaring costs of malpractice insurance, and the more suits they lose the more their rates increase. The *Los Angeles Times* reported recently that many abortionists have sharply curtailed or even discontinued their "services" because of skyrocketing malpractice insurance premiums. Did you know that the National Abortion Federation

turned to Lloyds of London for group malpractice coverage? And Lloyds, known worldwide as "the insurer of last resort," turned them down!

Back to Mike Conroy again. Do you know how he advertises? In addition to the usual ways.....billboards, fliers, etc....he has a banner reading "Injured by Abortion? Call 800-U-Can-Sue" pulled behind a plane which circles the Florida beaches during their busiest seasons, and also packed football stadiums in the fall. He refers callers to one of his stable of "aggressive, hungry, pro-life attorneys," who takes it from there. He has the unqualified endorsement of many high-profile leaders in the pro-life movement, including Fr. Frank Pavone and Dr. Bernard Nathanson.

Make no mistake about it: the abortion clinic owners and the executioners they hire are not at all concerned with "women's rights." It's all about money. Abortion is a huge, multi-billion dollar industry, and any action that can seriously make a dent in their cash flow would be to our advantage. It has become pretty obvious in the past 27 years that we are not going to break the momentum of the pro-death people with letters to our representatives and fliers in the church pews. We must continue to do these things, and to pray, in order to maintain the support and the strength that we do have. But I think it will take something much more forceful and sensational to turn the tide, and this may be it.

A few huge awards could start a chain reaction....these could lead to impossibly high malpractice premiums, causing even more abortionists to drop their insurance, with the end result that one large suit could lead to bankruptcy. Wouldn't it be ironic that the courts which gave these people such awesome power over life itself would be the ones who stripped them of their power and their fortunes?

If you agree, and if you are able, you may want to contribute to Mike Conroy's movement. The address is: Legal Action for Women, Dept. W., P.O. Box 11061, Pensacola, FL., 32523. I like to think that my contribution will pay for one trip of that banner around the beach at Fort Lauderdale during a Spring Break.

PRAY TO END ABORTION

Webster's defines "euphemism" this way: The substitution of an agreeable or inoffensive expression for one that may offend or suggest something unpleasant. The Culture of Death movement has employed this figure of speech repeatedly, and effectively. Pro-choice sounds so much more palatable than pro-abortion, embryo or fetus so much more clinical and non-human than unborn baby. We are not pro-life, we are anti-choice. Induced abortion becomes termination of pregnancy. What we call partial-birth abortion is referred to as dilatation and extraction. A newborn baby becomes a neonate. Physician assisted suicide is now being called physician assisted dying (notice how softer that sounds....we would all like to have a physician assist us in dying!).

But no euphemisms can detract from the horror of the recent story from New England. An unmarried teen-age couple, both from the wealthy New Jersey suburb of Wycoff, checked in at a motel in Delaware last November 12 and delivered their son, beat him to death with blows to the head (according to the coroner's report), wrapped him in a plastic bag, and threw him in a trash bin. I have not read the details of the trial, but I can't imagine how their attorneys could mount any effective defense for their gruesome crime. They had not neglected a neonate; they had murdered a baby. The jury agreed, and both have been sentenced to prison. As yet, not even the most rabid pro-abortionists have surfaced with any argument that could diminish the seriousness of the pre-meditated killing of this innocent little boy.

I bring up this sordid story to make a point. You have probably already thought about this, but think about it some more. If this pathetic young girl had gone to an abortion clinic, instead of a motel, say the day before....she could have had her baby killed by partial-birth abortion, and **no crime would have been committed!** No crime, no charges, no trial, no conviction. No eyebrows would have been raised by our federal judges, by a significant percentage of our physicians and attorneys, by a large minority of our congressmen and senators (including many nominally Catholic ones), and not by the President of the United States. No case could better highlight the absurdity of the Roe v. Wade decision of 1973 and of all the related decisions that have been handed down since then.

Is there any difference between killing a baby

the day before he is born and the day after he is born? Of course not! "Personhood" is not something bestowed by the government. It is bestowed by God. It is a gift of God. It does not begin with the first breath of air or with the first cry. It begins when life begins.

And when does life begin? Our faith underlines what modern science has taught us....human life begins at conception. It does not become life at viability, or with "quickening", or when the heart beat is audible, or when the brain waves are measurable. It begins at that magic moment when reproductive cells from the mother and the father come together and a new being is created....a unique being, unlike any other in the past, present, or future, with fingerprints and footprints and DNA unlike any in the history of the world. If left alone, and nourished, this microscopic "zygote" will become a newborn infant, a child, an adolescent, an adult, a senior citizen, eligible at any stage when called by God to eternal happiness that He has promised us.

It is hard to believe that the same vapid arguments to justify abortion that we have been hearing for twenty-five years are still being parroted, and are still effective. The right to privacy....the one the Supreme Court embraced. A woman has a right to her own body. It is a terrible irony that, to justify the killing of the life in her womb, she will use the exact words Jesus used when He instituted the Eucharist: "This is my body." This is my body, I can do with it what I want.

Oceans of innocent blood are being spilled across this country, and around the world, and they are crying out for justice. The silent holocaust all around us cries out for justice. We cannot let the slaughter of the innocents continue. We must remind ourselves that, yes, we are pro-choice. We choose the will of the Father.

Pray to end abortion.



BABYPARTS.COM

Every time we think things can't get any worse, they get worse. When abortion on demand first became legal in the early 1970's, we thought that this was the crowning insult to the sanctity of human life, that we had reached the low point of the degradation of our society.

But then we began hearing of young girls being aborted without their parents' knowledge or consent; in many states parental consent was required for ear-piercing but not for abortion. We began reading of dumpsters discovered filled with baby corpses, of abortion clinics not being held to state sanitation laws, of young women permanently scarred or even killed by botched abortions, of late-term aborted babies being smothered or drowned if accidentally born alive. Then came Partial Birth Abortion, the ultimate horror of horrors, twice rejected by Congress only to be twice overridden by presidential veto, and therefore still legal. Stories came from China, where a woman can have only one child and must abort any subsequent pregnancies, that fetuses were actually being sold for human consumption.

And now we are hearing more and more about fetal parts being sold for medical research. Actually, this is old news. I wrote about it a couple of years ago, pointing out that fetal tissue research was not only becoming widespread but was backed by many organizations that you may be supporting financially....including the American Cancer Society, the March of Dimes, the National Hemophilia Foundation, the American Heart Association, and others. All this support has been prompted by many wildly exaggerated and completely unproven claims of potential cures for Parkinson's Disease, diabetes, paralysis from spinal cord injuries, and a host of other medical problems. What is new, at least to me it is, is how easy it has become to "order" baby organs....right from the Internet.

Now, I am not sure if you or I could order a liver or a brain, but Frankensteins working in American universities and research laboratories can, and do. For example, human embryonic and fetal tissues are available from the Central Laboratory for Human Embryology at the University of Washington. Specimens are obtained within minutes of passage and tissues are aseptically identified and immediately processed for shipping. A price list is even available! Where do they get these tissues from? From abortion clinics. The "middlemen" set up shop there, slice up

each aborted baby immediately, then sell the parts to the laboratory. There are federal laws that prohibit this despicable form of commerce. But they have found ways to circumvent the laws.

Just how widespread is this? I don't know for sure. Like you, I only know what I read in the newspapers or hear on radio and television, and the media are notorious for slanting facts about abortion. I can tell you of one item that recently surfaced. It was discovered four months ago, and widely publicized, that the University of Nebraska Medical Center has been conducting research on tissue obtained from aborted babies **for the past seven years**, with the help of a subsidy from the National Institute of Health. The baby parts were coming from the clinic owned and operated by LeRoy Cahart, the state's most notorious abortionist.

When the news broke, the aroused pro-life people influenced the state legislature to introduce a bill to put a stop to this sleazy business. How this will fare I have no idea. I can tell you how the university reacted to the brouhaha. When Governor Johanns asked the university president to call a halt to the research, he refused. That should not surprise us. Secular humanism flourishes in our universities, while their hierarchy prattles on about academic freedom, multiculturalism, and intellectual diversity.

The problem we face in challenging this ghoulish business is compounded by the tremendous emotional appeal generated by the prospect of finding a cure for certain incurable diseases. If you or a family member are afflicted by Parkinson's Disease, or spinal paralysis, or hemophilia, I can imagine your excitement over the prospect of a cure. I recently saw Pennsylvania Senator Arlen Specter on TV, rhapsodizing over a possible cure for Michel J. Fox's Parkinsonism or Christopher Reeves' paralysis, as though we were right on the verge of a cure. Certainly we are all hopeful for cures for them. But, after all these years of experimentation and all the scientists' hyperbole, there is not a shred of evidence that fetal tissue implants will cure any of these disorders.

Keep all of this in mind as you speak with others, and as you write your Congressmen, and as you vote, and as you pray.

JOHN CARDINAL O'CONNOR, R.I.P.

On May 3, 2000, we all lost a friend. Without question he was the most prominent clergyman in the pro-life movement, frequently praying in front of abortion clinics and leading the annual March for Life in Washington. He gave dozens of sermons on the sanctity of human life from the pulpit in St. Patrick's Cathedral in New York and he wrote countless papers and articles in defense of the unborn. He was an inspiration to everyone in the right to life movement.

As the accolades began pouring in after his death, the one adjective that everyone seemed to favor in describing him was "courageous." He was a man of courage, in life and in death. When he knew he was carrying Christ's message, he would stand up to anyone. The most publicized of his confrontations took place in 1989 in St. Patrick's, when a band of homosexual and pro-abortion activists stormed the church as he was celebrating Mass, smashing statues and stained-glass windows and desecrating the Blessed Sacrament. He bowed his head and led the congregation in the Rosary, which continued until the police arrived and cleared the church, and then he continued with the sacrifice of the Mass.

We all knew of his politically incorrect stance against homosexuality. What many of us did not know was how active he was in instituting an AIDS hospice in his archdiocese and in personally helping care for the residents. Many nights and week-ends he would drop in unannounced, and spend several hours bathing patients and emptying their bedpans. What a beautiful example of a shepherd teaching his flock by example, showing them that his mission was not to be served but to serve, teaching them to love the sinner while hating the sin.

He was aware long ago of the movement toward assisted suicide and euthanasia, writing and preaching passionately against them. His message was that death with dignity did not come from the ability to choose one's own final exit, but rather from putting one's life in the hands of God.

And he practiced what he preached as he faced his own demise, surrendering himself completely to the will of God. His family and friends, who were with him until his death, all reported that he was totally at peace during his last days, that he actually **prayed for complete dependency** (so that he might suffer more for Christ), and that he died a death of true dignity.

Of all the tributes to Cardinal O'Connor that I

heard on television and read in the print media the one that touched me the deepest was the one-page testimony of Ed Koch in *Newsweek*. The two men were close friends, this Jewish ex-mayor and this thoroughly Catholic clergyman, in spite of the vast differences of opinion on such major topics as abortion, and homosexuality, and, of course, Jesus. They focused more on what they had in common rather than on their differences, and we all could and should learn a lesson from them on this point. Koch was quite proud of the fact that when O'Connor went to the Vatican to be made cardinal in 1985 he asked him....this pro-abortion Jewish politician....to be one of the witnesses at one of the ceremonies! Koch admits that he wept when he received what he knew would be a final note from his friend of 16 years, saying, "I'll miss my good friend and spiritual leader, one of the few truly heroic figures in our lives. I weep for him, but even more for all of us, who can no longer draw on his strength." Courage may be the virtue everyone associates with the memory of this great man, but to me his outstanding trait was humility, the one virtue we all aspire to but never quite reach. On the night of his death one of the TV networks showed a video of an interview with him, apparently done after his diagnosis was made but before his anti-cancer treatment had distorted his features. He was asked how he would like to be remembered. Without hesitation he replied, "Not as a cardinal with a red hat and with everyone kissing my ring. I would like to be remembered as a good priest." I suspect that when he got to the "pearly gates," if asked to identify himself he probably replied, "John O'Connor here, from Scranton."

In my fantasy I see and hear millions of tiny angels, whose voices were never heard on earth, singing this great man's praises, welcoming him to his eternal reward, and thanking the Father for "sending him to us."

When he chose O'Connor to head the Archdiocese of New York in 1984, the Holy Father is reported to have said, "I want someone just like me in New York." He got what he wanted.

SEMANTIC GYMNASTICS

One of the most effective ploys the pro-abortionists have used to push their agenda has been to dehumanize the unborn baby. Condition people to think of unborn babies as intruders, or parasites, or as a “disease” to be eradicated, and abortion will be much more readily accepted.

This was accurately predicted by a prophetic editorial in *California Medicine* in September 1970, long before the Roe decision. The author used the phrase “semantic gymnastics” to describe the promotion of abortion, acknowledging “...the very considerable semantic gymnastics which are required to rationalize abortion as anything but taking a human life”, concluding that “...this schizophrenic sort of subterfuge is necessary” in order to come to widespread acceptance of abortion.

The attack began softly enough, with the baby always referred to as a “fetus”, or an “embryo”, or “a blob of tissue.” But the rhetoric gradually became much more inflammatory, and pregnancy was soon to be regarded as a disease. A paper was presented at a national conference in 1976 in which pregnancy was referred to as the second most common sexually transmitted disease; the author was the head of the Center for Disease Control and a Nobel Prize winner. Other equally disparaging labels soon followed...“garbage,” “waste,” “rubbish,” “refuse.” Carl Sagan called the unborn baby “a blood-sucking parasite.”

Contrast that language with the description of an unborn baby in *Williams Obstetrics*, the standard medical school textbook in the 1950’s and 1960’s: “a patient who should be given the same meticulous care by the physician that we long ago have given the pregnant woman.” We were taught, and this is still true today, that when you have a pregnant woman in your office you have two patients, each deserving of the best care the profession has to offer.

I think the best example of how effective these people have been with their semantic gymnastics is the way they have convinced so many people that their motives are altruistic. We hear so much about reproductive rights, about liberating women by giving them the right to kill their unborn babies, about a woman’s “choice.” Rubbish! Abortion is about money, not women’s rights. It is a multi-million dollar business. If abortions were free, we wouldn’t have a problem.

There is no question that all this double-speak

and all these euphemisms have been very effective.

This is particularly ironic in today’s world, where multiculturalism and the push for diversity have raised the public’s awareness to the impact of toxic speech. We have to be most careful when speaking of minority groups to avoid the derogatory labels of times past. And yet it is entirely politically correct to refer to killing a baby as “terminating a pregnancy” or calling a perfectly-formed and healthy unborn child “refuse” or “tissue,” and to refer to destructive lethal operations as “medical procedures.” If abortion is a “medical procedure,” why do we never see one on television? Surf the net often enough and you will see just about every surgical procedure performed at one time or another, but not abortion. If one partial-birth-abortion were to be performed on network television in prime time I am positive that the furor it would produce would cause that horrible procedure to be banned forever.

One wonders how long it will take before the abortion culture gives way to the life-affirming perceptions of the unborn child brought about by the opening of new windows into the womb by the development of ultrasound, fetoscopy, and hysteroscopy. We marvel at the new development in the field of fetal surgery. Did you see that awesome picture in the press lately...the one of the unborn baby being operated upon, in utero, to repair a spina bifida deformity? During the surgery the baby had reached up and wrapped his tiny little fist around the surgeon’s finger! Have anyone look at that picture and ask him if he is looking at a baby, or a blob of tissue, or a blood-sucking parasite.

All these semantic distortions have to be met head-on with the truth. We have to educate ourselves first, and that shouldn’t be too difficult, if we don’t confine our learning to the secular news media. And then, not always as simple, we must pass on the truth to our young people...in our homes, in the schools, and from the pulpits. This will not be easy, surrounded as they are by the sounds and sights of an amoral world. We must expose and defuse the war of words directed against God’s unborn children...although stopping verbal assaults will not alone halt the murder of the unborn, it would be a great leap forward toward ensuring that our definition of humanity embraces all human lives, whatever their status, their condition, or their stage of development. Such an expansive definition of humanity was given by the Holy Father

in his encyclical *The Gospel of Life*. In advocating replacing the culture of death with a new and enduring civilization of life and love, he said, “Now more than ever, we need to have the courage to look the truth in the eye and to call things by their rightful names.”



STEM CELL RESEARCH

I have written about this before, but we should look at this again, in the light of recent developments.

The main source of stem cells is human embryos. This is somewhat of an oversimplification of a very complicated process, but these cells can be extracted either from live frozen embryos or from those left over from in-vitro fertilization. These cells are “undifferentiated,” and by that we mean they can be “trained” or “taught” into becoming various types of cells: neurons for the central nervous system, pancreatic cells that manufacture insulin, and many others. Now everyone would have to admit that this is very exciting news. Predictions are being made that we may be looking at a cure for Parkinsonism, hemophilia, traumatic spinal cord paralysis, and other as yet incurable conditions.

But....you are snuffing out the life of a tiny, unborn human to save the life of one lucky enough to have already been born. Our Church could not be more explicit on the illicitness of this type of experimentation. *Evangelium Vitae* says it quite clearly: “The human being is to be respected from the moment of conception, and therefore from that same moment his rights as a person must be recognized, among which in the first place is the inviolable right of every innocent human being to life.”

This subject has been debated by ethicists, theologians, politicians, scientists, and pharmaceutical companies for years. There has been much opposition from our Church, but also from Congress, which for years has opposed federal funding for research in which human embryos are destroyed. Pushing hard from the other side has been the National Institute of Health, the National Bioethics Advisory Committee, and a host of Hollywood and TV celebrities.

Well, last week, while the attention of more than 50 million Americans was focused on who would survive on *The Survivor*, Clinton issued a presidential order that this research may proceed, and you and I and the other taxpayers will pick up the tab. This unprecedented decree went virtually unreported in the major news magazines. Grants have already been applied for, and you can be sure they will be approved and the dirty work will begin before the election in November.

Incredibly, the *New York Times* casually explained that we pro-life people are against this because we “consider embryos capable of life.” Can you believe

that? After 27 years they are still referring to live unborn babies as “potential human life,” this in spite of the huge strides made in genetic research in recent years. As soon as conception takes place, a new human being with its own DNA is formed, a unique being, unlike any that has ever walked the earth since the beginning of time. And we believe that, even for the noble purpose of curing an incurable person, you can never sacrifice the life of another.....not an embryo on a Petri dish, or a baby born alive without a brain, or a child with multiple abnormalities who will never see her fifth birthday, nor a convicted murderer on Death Row. Now, our Church conceivably in the future could change her laws on mandatory worship on Sunday, on contraception, on priestly celibacy, and others. But on abortion.....never. For this is not a Church law, but God’s law.

And now for the *piece de resistance*. Live embryos are not the only source of these remarkable stem cells. They can be obtained from the bone marrow of healthy adults! There would be no ethical problems here, any more than there are with blood transfusions. Why not this route then? I don’t know for sure, but I understand “training” the cells is a lot more complicated, and getting people to volunteer would unquestionably be more troublesome and time-consuming and probably more expensive. This would hardly compare with the virtually inexhaustible supply of embryos on Petri dishes in every major city across the country.

IVF REVISITED

I have written about In-Vitro Fertilization before. I think it is time to reexamine the subject. It has become increasingly popular, almost commonplace, and the media are giving it more and more attention. If the procedure succeeds (which is not often the case), and if the woman is a prominent figure, we will hear much about this latest “miracle pregnancy.” Just this week the whole world is expected to be titillated over the announcement that Celine Dion has been artificially impregnated. Now, we are all delighted to hear that a woman judged to be infertile has conceived, but morality compels us to look hard at the circumstances and see if the end justifies the means.

Does every woman have a “right” to have a child? No. Not any more than does any of us have a right to be born without a deformity, or to have a perfectly happy life, or to live to be 80. All these things are free gifts from God. Is it O.K. to resort to medical science to help a woman conceive? Of course it is....up to a point. And that’s what we need to examine. And especially now, for we will soon have a second state-of-the-art infertility clinic right here in Lafayette. You will no longer have to go to Baton Rouge or New Orleans to have your baby conceived on a Petri dish.

I don’t claim to be an expert on either science or theology. But you need no expertise in these areas to appreciate the complexity of the moral and ethical issues involved in IVF. All you need to know is that ova from the woman and sperm from the man are taken from their bodies and joined on a culture medium in the laboratory. Multiple germ cells from the donors are used, so that multiple fertilizations may take place. Now if you believe what our Church teaches, each one of these fertilized eggs represents a new life, a unique individual with its own genetic code, which, if left alone, will become a person unlike any that has ever walked the earth since the beginning of time or any that will ever be born again if the world goes on for thousands of years.

After a brief time of observation, the physician selects the embryo that appears the healthiest, and implants it in the womb, hopefully to grow and mature for nine months. But what about the others? This is a critically important question, for if what we are taught to believe is accurate then “the others” are tiny, human beings. What happens to them? One of two things....they are either frozen or they are discarded,

flushed down the drain. I understand that in our state they cannot be discarded, but must be frozen. It is reported that there are already several thousand frozen embryos in Louisiana. What will become of these tiny, human lives, hibernating quietly in sub-zero concentration camps? A few, a very few, may be implanted in wombs in the future, with the possibility of growing to maturity. Most will eventually be discarded, for each will have an “expiration date”....literally.

To digress for a moment, there has been a lot of ballyhoo lately over using these discarded embryos as a source of “stem cells” for research toward cures for Parkinson’s disease, diabetes, traumatic spinal paralysis, and other maladies which are currently incurable. Christopher Reeves and Michael J. Fox and other celebrities recently made emotional appeals to Congress to allow these embryos to be used for such research purposes. Their argument goes like this: they are going to be discarded anyway, why not put them to good use?

In a recent issue of *America* magazine, Fr. John Kavanaugh answers that question this way: why not use criminals on death row for their “parts”? Why not harvest their livers, kidneys, corneas, or hearts and lungs?...after all, they are going to die anyway. No one in his right mind would even consider this for a second? Why not? Because they are human beings. Well?

Prevalent in our society is this mindset that humanness depends on size, and degree of maturity. That’s why so many people out there may disapprove of late-term abortions but not earlier ones. The smaller the baby the less distasteful the procedure, in their view; and, believe me, this attitude is widespread. But this is wrong. A baby is a baby is a baby. Size has nothing at all to do with it. Can something this small be someone? Yes, it can, and is. Morally and ethically there is no difference between flushing a one-week embryo down the drain and suctioning a three-month old unborn baby from the womb.

Certainly we empathize with the barren couple. Happily, many can be helped to reproduce with methods and procedures perfectly acceptable to our Church teaching, and we rejoice with them when a pregnancy can be achieved and a term baby delivered. But growing babies on agar plates represents a mechanization of the generative act and will lead to

an increasing tendency in our secular society to perceive human life as a gift of man rather than a gift from God. Any procedure which flies in the face of God's beautiful and miraculous plan, and the process by which human life is transmitted, must be condemned, and especially if in the process of bringing about one new life a number of embryonic lives are destroyed.

END OF LIFE DECISIONS

The fear of dying is very powerful in all of us. Even more powerful may be the fear of not dying, of prolonged invalidism, of uncontrolled pain, of loss of independence, of being a burden on one's family.

We especially fear prolonged suffering and loss of dignity. The strongest push for euthanasia and assisted suicide stems from the failure of modern medicine to reassure us that it can manage our death with dignity and comfort.

A recent article in the *Journal of the American Medical Association*, widely quoted in the lay press, calls attention to a disturbing trend in modern medical practice. A huge study was done in six scattered medical centers over a two year period, a study in which an attempt was made to find out just how physicians respond to the wishes of terminally ill patients as regards their preferences as to the aggressiveness of treatment. We have heard much about living wills in which each of us can stipulate in advance the limitations we would like imposed on high-tech measures to prolong life when both the body and the spirit are disposed to depart from it. The findings of the study were chilling. In half of the cases where the patient wanted to avoid CPR their wishes were ignored. Half of all patients were in moderate to severe pain in the last three days of life. Hospital culture is geared to high-tech treatments: all these machines are available, we must use them. And hospital protocol still seems to discourage adequate dosing of narcotics. To put it bluntly, if you think you can pre-determine the amount of undesired medical intervention you will receive when you are trying to die, think again.

Where is the problem? Mainly, it lies in the way doctors are trained. The modern physician is highly trained to delay imminent death. Clinical medicine knows that every one of us will eventually have a fatal illness; scientific medicine won't accept this, and demands that every potentially fatal illness be treated as if it is reversible and must be reversed. Death becomes not just an enemy, but a defeat. Every life must be "kept going," regardless of the inevitability of the approaching demise, regardless of the cost, figuratively and literally. To do less is to practice out-of-date medicine.

The problem does not lie entirely with the doctors. Admittedly, the patients' families often pressure the physicians to continue intensive treatment long after the futility of such a course of

therapy has become obvious. Many are still in some state of denial, many are overwhelmed by a mixture of feelings of love and fear and guilt and self-pity, and not well prepared to accept the certainty of the impending death. These people need to be talked to honestly and forthrightly by the medical team; they need to be helped to try and put aside their own angst and think only of the patient, who may well be ready for death....and, in fact, may be praying for it. In my years of hospice work our nurses and I have had hundreds and hundreds of sessions like this with the families of dying patients; frankness and sincerity are almost always well-received and appreciated and even welcomed. Family pressure is no excuse for futile high-tech over-treatment of a person in the final stages of illness.

This relentless over-treatment of the terminally ill is cannon fodder for the proponents of assisted suicide and euthanasia. Most of us would like to die with some dignity, as free of pain as is technically possible (and it is practically always possible), surrounded by family and close friends.

A painless lethal injection has a certain appeal if one is faced with the prospect of a nightmarish final exit in the sterile atmosphere of an intensive care unit, fettered by tubes and catheters and beeping machines. No one wants to die that way. I have never known anyone to request this kind of treatment in his living will. And yet this is exactly the way many die every day in every hospital in the country. And the *JAMA* study tells us that there is no sign on the horizon that this situation is improving.

Death is an unavoidable part of life. When it becomes inevitable, society's most important goal should not become to sustain life as long as is technologically possible, but rather to take whatever measures available to maximize physical and emotional comfort. If this involves withholding or withdrawing extraordinary treatment modalities, we must be prepared to help the attending physicians with these wrenching decisions, as patients ourselves or as loving family members.

Letting go, when the prognosis is hopeless and the time has come, is not easy. In many instances the choice to abandon the all too common intensive care in favor of a quiet course of palliative care is not so much a medical alternative as it is a moral imperative. It is not just good common sense and good morality....it is good medicine.

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