

# Do Doctors Need Spirituality?

**“T**hank God for you,” people often tell Marilyn “Mimi” Pattison, MD, a hospice physician. They mean they are glad that *someone* is willing to provide care for seriously ill people, because they fear they couldn’t do it themselves. What Pattison thinks, although she doesn’t say it out loud, is, “Thank God I have found this work.”

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people—and  
rich nations?

The title of Pattison’s article, “Finding Peace and Joy in the Practice of Medicine” (p. 22), might serve as the overall banner for this issue’s special section on physicians and spirituality. Kim Van Oosten, a CHA communications specialist, has brought together a group of writers who believe that spirituality, far from being made obsolescent by medical science, remains a crucial component of it. We think you’ll enjoy reading what they have to say.

## GENOMICS AND THE DEVELOPING WORLD

Like other health care media, *Health Progress* has in recent years published a number of articles concerning ethical issues raised by the new science of genomics. Often the issue is access to genetic medicine. Won’t such medicine, being expensive, be limited to rich people? How can it be administered justly?

“Justice and Genetics: Whose Holy Grail?” by Maura Ryan, PhD (p. 46), examines the problem on an international scale. Health care disparities in the United States are relatively slight when compared to those between developed and developing nations. Noting that a single diagnostic test for susceptibility to disease can run into the thousands of dollars, Ryan asks what relevance such a test might have for, say, the Democratic Republic of the Congo which in 2002 spent an average \$15 for medical care for each of its citizens.

Ryan is associate professor of Christian ethics, University of Notre Dame, Notre Dame, IN. Her article is the second in *Health Progress*’s new series “Social Justice and Catholic Health Care.”