In November 2000, a group of physicians and health care leaders gathered to explore the foundational values of Catholic health care at the Physician Leaders’ Forum, held in Amelia Island, FL. Participants agreed that a highlight of the forum occurred when physicians came forward to relate experiences at their institutions that exemplified, in a tangible way, what is special about Catholic health care. Dr. Santiago’s talk from the Forum has been adapted for Health Progress.

One afternoon, I received a call from the intensive care unit of the hospital I worked in at that time. They said, “We have a case you might find interesting and we need your help.” Because they called me, the corporate medical officer, I knew what they really meant was, “We have a terrible case and we want nothing to do with it.”

This patient, a 22-year-old woman who had taken an overdose, had been admitted from the emergency department. She was on life support and, according to the neurologists, was in a vegetative state. Her condition held no hope of recovery. Complicating matters, she was 16 to 18 weeks’ pregnant.

The staff had called me to talk to the patient’s mother, who was at the hospital. The mother had three other children at home, was working two jobs, and hadn’t seen her daughter in approximately five years. Before that, they had had a poor relationship. According to the staff, nothing could be done for the patient. Social Services was looking for a long-term care facility where the mother could send her daughter; the mother was contemplating ceasing life support after transfer.

In medicine, I was taught that “when in doubt, do something.” This idea needs to be revised to “when in doubt, do nothing.” He who hesitates may not be lost. Although a mother may give life to a child, in this case a child gave life to a mother.