

THE FULLNESS OF LIFE

Integrating Patient Care, Teaching, and Research

BY BR. DANIEL P.
SULMASY, OFM, MD



Br. Sulmasy is assistant professor of medicine, Division of General Internal Medicine, and research scholar, Center for Clinical Bioethics, Georgetown University Medical School, Washington, DC.

Articulating what it means to be a Catholic medical school in late twentieth century America is a daunting task. Catholic institutions' Catholicity can no longer be taken as a given. If Catholic medical schools are to be truly faithful to the Gospel, they will begin the effort to identify their mission by first affirming Christian teaching regarding the dignity of human life. In the Gospel of John (10:10), Jesus proclaims that he has come that we "might have life, and have it to the full." A Catholic medical school ought to be animated by a faith that proclaims and serves this fullness of life.

A Catholic medical school ought to lead the way for a society and a profession desperately looking for a ground on which to grapple with the ramifications of technological prowess. Forming Catholic clubs at secular medical schools will not suffice. The task is important enough to deserve centers of excellence dedicated to the pursuit of medicine in the Catholic tradition.

The task of medicine and medical schools for the twenty-first century will be one of integration. Institutionally, Catholic medical schools must integrate the three foundational constituencies of Catholicism, medicine, and the university. Apostolically, Catholic schools must integrate the three missions of patient care, teaching, and research. What I imagine is a web of relationships: The Catholicism of a Catholic medical school in the

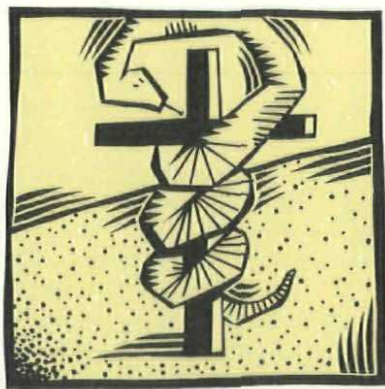
United States must affect and, in turn, be affected by medicine and the university.

A NEED FOR MORE RESEARCH

Contemporary medicine too often rejects the total person for the sake of the part. As Aristotle reminded the ophthalmologists of his day, "Someone setting out to heal the eyes must acquire knowledge about the whole body as well" (*Nicomachean Ethics*, 1102a:19-20). The same must be said today to persons who set out to heal the kidney, the heart, the stomach, or the bone marrow. And physicians must know about much more than the body if they are to minister to the fullness of human life. They need to be aware of their own souls and the souls of their patients. Medicine needs to regain its soul.

But in serving the fullness of life through the three missions of patient care, teaching, and research, Catholic medical schools as a rule have made their least contribution in the area of research. The reasons for this are historically complex. They include the facts that Catholic medical schools were once almost exclusively devoted to

teaching poor immigrants, have had problems obtaining funding, and have often been caught in arguments over the separation of church and state. In addition, perhaps the Catholic commitment to education as service has contributed to a view that research is self-serving and detrimental to the mission of education. Perhaps also the long-standing feud between the Catholic Church and modern sci-



ence has made Catholics reluctant to engage in basic medical research, as if they were avoiding consort with the enemy.

But such views are now superseded by the spirit of *Gaudium et Spes* (1965). And while excessive attention to research is detrimental to a medical school's health and balance, it is also unhealthy for a medical school to neglect its mission to advance the frontiers of human knowledge.

THE HUMAN GENOME PROJECT

The human genome project is a case in point. It promises to be the crowning achievement of modern, scientific medicine. Enormous amounts of scientific resources are being poured into the project, and, doubtless, enormous human benefit will accrue. The sequencing of the entire human complement of DNA may, in fact, represent the limit to which scientific reductionism can take the study of human beings.

But where are Catholic medical schools in this project? Except for a few isolated researchers, Catholic medical schools are largely on the sidelines. Catholic medical schools can play a very significant role, however, if they pay attention to what the project ultimately means and remain faithful to their mission to direct faith-filled medicine to the service of the fullness of life. Once the project is completed, it will produce wonderful spin-offs, and Catholic medical schools can play a great role in developing treatments for genetic disorders, guided by intellectual creativity, Gospel compassion, and the moral context in which to evaluate treatments.

Catholic medical schools, above all, ought to anticipate the deeper questions. They must articulate the reverence appropriate to the completion of such a project. They must remind physicians and scientists, in the words of St. Bonaventure, that they should not be deceived into believing their "reading is sufficient without unction, speculation without devotion, investigation without wonder, observation without joy, work without piety, understanding without humility, endeavor without divine grace."

The more reflective will be asking questions

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molecular biology cannot address. The answer to the question, Who are we? is not to be found in the 6 million base pairs that constitute the human genome. The concern of medicine is not just the double helix, but the fullness of life around which the nucleotides are woven. Perhaps it will require such a watershed event as completion of the human genome project for the medical scientific

community to understand this. No other institutions in this country should be better prepared to announce this message than Catholic medical schools.

And a further meaning arises from the human genome project, which Catholic medical schools also should be especially prepared to recognize and develop to its fullest implications. At a time when patients feel as if they have been dissected into isolated organ systems and the medical profession is so fragmented by specialization, it seems that molecular biology has become the ultimate expression of medicine's reductionism and sub-specialization. Yet something paradoxical is also happening.

The focus of medical research has shifted dramatically—from the specialized functions of individual organs to the molecular mechanisms that cells from every organ share. Consequently, medical scientists from different departments, such as cardiology and oncology, who previously never spoke to each other, are now sharing techniques and ideas and occasionally even changing departments. Every organ has the same DNA, encoding the same genes, differing only in which genes are expressed. Science has discovered that the various parts of the body speak the same language. This is a cause for great hope.

Plunged to the ultimate depths of reductionism, medicine has discovered a new kind of holism. The fullness, the integration, and the universality that medicine needs now has a foundation in the basic sciences as well.

A TRANSFORMING REALITY

In *Gaudium et Spes* we read that Catholics ought to "integrate human, domestic, professional, scientific, and technical enterprises with religious

values, under whose supreme direction all things are ordered to the glory of God" (no. 43). The following are some suggestions for how Catholic medical schools might make this vision a transforming reality.

Reforming Medical Education Catholic medical schools should be leaders in the reform of medical education, articulating plans informed by the holistic spirit of the Second

Vatican Council. Part of Catholic medical schools' commitment to this reform must come from an institutional commitment to the pastoral care of students as whole persons.

Caring for the Poor Catholic medical schools should be leaders in the struggle for healthcare reform. They should look for new ways to rekindle the alliance between medical schools and the poor communities they often serve.

Medical Research Catholic medical schools must be active in the research process, but also challenge the research community to high ethical standards. The manner in which research is conducted and the results are used has critical ethical implications, and Catholic medical schools can become model settings for the conduct of ethical research only if they are highly visible and active as centers of research.

This research must be independent. Pope John Paul II recently told a group of bishops "that it is necessary to respect the legitimate autonomy of the human sciences." The magisterium of the Church must uphold this conviction. But the independence of medical research has far greater threats than the Catholic Church. Catholic medical schools must explicitly reject, for example, the conflicts of interest created by researchers' investment in the products they are researching. Catholic medical schools also must champion the independence of research programs from the insidious influence of the medical-industrial complex.

Cross-cutting Research The Department of Medicine at Georgetown University has already begun to explore ways to conduct research collaboratively across subspecialties. Physician investigators in various departments and divisions plan to collaborate in research centers organized along themes such as molecular biology, immunology,

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and health services research.

Not only does this promote an exchange of ideas, it fosters a genuinely Catholic sense of community. And prudently, in Catholic medical schools where resources for research are few, such a plan builds a critical mass more quickly than if each division developed its own research program.

Multidisciplinary Study

The inherently multidisciplinary nature of medical ethics, health policy, and medical economics makes Catholic medical schools, dedicated to integration, outstanding centers for work in these fields. Such programs are now beginning to emerge at Catholic medical schools, but more are needed.

Defining Pluralism Many faculty members and students at Catholic medical schools are not Roman Catholics. In recognizing and even embracing this pluralism, Catholic medical schools must nonetheless never forgo their right and duty to proclaim the Gospel. All must be welcome on the campus of a Catholic medical school. But they must be prepared to accept the Catholicity of the school, which welcomes them to join in a common mission, and they must accept that such a school must and will express its Catholic nature without apology.

RESHAPING MEDICINE

Catholic medical schools can play an important role in reshaping medicine. The task that lies ahead is primarily one of integrating scientific medicine with spiritual vitality, which alone can actuate true healing.

The Second Vatican Council has articulated the context in which to integrate the foundational constituencies of the Church, the university, and the medical profession with the missions of patient care, teaching, and research. This integration is the path of true reform, filling out the hollow frame of secular, scientific medicine, which is, in itself, insufficient to meet the goals of medicine as a whole.

The fullest potential of medicine can ultimately only be realized in the Church, which is the body of Christ, "the fullness of him who fills the universe in all its parts" (Ep 1:23). □