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John P. Grimaldi

John G. Zoll

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The Physician As Christ's Apostle In The 20th Century

JOHN P. GRIMALDI, M.D. AND JOHN G. ZOLL, M.D.

The Lay Apostolate did not begin with the Decree on the Apostolate of the Laity of Vatican II. One cannot be a physician without affecting patients' attitudes toward God. No one ever studied medicine without a deep desire to help his brother. A physician is a lay apostle whether he ever considered himself as such or not. Few physicians emulate Tom Dooley or Albert Schweitzer but all at some time or other have foregone a party or athletic event to remain with a sick patient.

Pope John called for an aggiornamento of the Church. Can there be a refurbishing of the Physician's Apostolate? We would answer this question in a two-fold manner: the individual physician's apostolate and the group apostolate.

THE INDIVIDUAL PHYSICIAN'S APOSTOLATE

Let a physician review his actions during one day and study them in the light of Christian doctrine, virtue and sacrifice; then let him modify his ways as indicated. Does the image he presents in his home impress his wife and children, leading them toward a love of the Christian manner of living? Does he set an example by prayer in the home and by participation in the liturgy when attending religious services? Is he expected to give some individual attention to each of his children and to his wife regularly? Does he check the children's

growth spiritually, mentally and physically, exerting a guiding and stimulating influence?

A physician's manner of attending to such details may embellish the Christian image not only in the minds of his own family but in the minds of friends who visit his home or otherwise have contact with his family. In all areas "... Christian families give testimony to Christ before the world by remaining faithful to the gospel and by providing a model of Christian marriage throughout their lives."

The gross anatomy of that part of a doctor's life, which relates strictly to his practice, may not reveal any Apostolic tendencies. Looking closely at one day's activities, might uncover some apostolic opportunities which we might ordinarily miss. Our manner with office help, with our patients in the office and the hospital, our actions in staff meetings, or patience with nurses, and in the operating room may have Christian or unchristian reflections. We may berate nurses for mistakes or we may show forebearance and teach them how to avoid error. Our manner toward our fellow physicians and our charity toward patients are reflections, too, which have apostolic meaning. A physician is always proud of being knowledgeable, up-dated, and proficient in his field, but does he think of this as being a reflection of a

Christian way of life? However, it is Christ who said, "Be perfect as your Heavenly Father is perfect."

This could be the age of the Laity. Vatican II has given laymen wide berth in its Decree on the Apostolate of the Laity. We are skeptical about the modern laity stepping forward into the roles urged upon them. Will they leave major steps for some other generation? "The laity must take on the renewal of the temporal order as their own special obligation."

Extra curricular activities are not essential for a physician's practice of medicine although some of them are related to health. Some are truly a duty, as being aware of legislation and voting with knowledge. There are physicians who are so involved in their practice of medicine that they actually have no time for anything else except to fulfill their obligations to their families and they may even be failing in that regard. Physicians come to realize that they cannot treat everyone in their district who needs help, that they must be able to say no, and be willing to let other physicians take their place at times. They begin to see that if they die or if they become disabled, patients are still taken care of.

We maintain that in choosing a field of the lay apostolate that appeals to him, a physician ought to analyze what he does from two viewpoints. First, is he going to thrust aside someone who is already doing this work well? Secondly, will he supplant someone of a different profession, who could perform this particular work very well and not some other activity that only a physician might

do better? Life consists of seaso s like the calendar and a physici i will have more extra time at o e period of his life than another.

Once a physician is working n some special field of the apostolate e ought to review his status every for years and determine whether is present activity could be performed by a younger physician and whether he himself could take over a now function which is not within ne capabilities of a younger man. When his children have grown, he can evote time to projects that would hove been inappropriate when the children were younger.

The physician should try to be a leader in generating ideas or persuding others to become involved. A new spirit needs developing, one by which the layman does not always need instructions from the clergy. It requires courage and persistence and versatility. Such leadership should not usurp the clergy's role but should supplement their work and should look for areas where the clergy has need of the layman to show initiative. It is a type of leadership that makes primary use of a layman's own professional skill and knowledge.

If a physician decides he can afford to spend some extra time in the apostolate, what choices are available to him should he prefer to work alone? He may instruct in Christian Doctrine; he may perform works of charity; seek for areas in his own neighborhood that are in need of extra medical help; give personal or material medical aid to the missions. He may write on appropriate subjects.

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Of course for fulfillment in whatever task he prefers, the physician will need to continually increase his knowledge of sociology and religion by reading or perhaps by attending special classes or seminars on theology and the social teachings of the Church. Spiritual exercises will give him strength and effectiveness and help him to find the guidance of the Holy Spirit.

THE PHYSICIAN'S GROUP APOSTOLATE

Besides performing individually as a disciple of Christ, the physician is also called to participate in a broader and more encompassing enterprise, the group apostolate. There is no question that he can serve God effectively in his own individual activities and efforts. Because we are social beings, God has willed that we act according to this aspect of our nature and thereby work together in groups toward a final goal in order to fulfill the work of Christ on earth. This is called the group apostolate. The Christian works with others to achieve a far greater objective than he could if he struggled by himself. To illustrate: the labor union achieves far greater results than the individual laborer working alone; a political party can do far more than a single politician and the teachers' association can far surpass an individual instructor in attaining results. So with the Christian apostle. A united effort usually is essential in solving the many complex and grave problems of our modern era. The group apostolate, to be most effective, should be organized with people of common ideals and attitudes and, if possible, of the same occupation or AUGUST, 1967

profession. In this specific instance, it would mean physicians working with physicians utilizing the principle of "like on like." The Church has recently told us that "it is especially important that the apostolate concern itself . . . with the common attitudes and social background of those members for whom it is designed. Otherwise, those engaged in the apostolate will often be unequal to the pressure of public opinion or of social institutions."3 Such organizations should infuse the spirit of the gospel into various communities and spheres of life. They should be concerned with specific apostolic needs and react to them by using their common talents, abilities, and interests. One essential ingredient of each type of apostolate is a strong spiritual formation of the members through prayer, Mass, the sacraments, spiritual reading, discussion and study, and especially thinking with the Church.

Now let us ask where is the physician's place in all this and what can he do? First, he should decide what organization would best suit his position in life and his goals. Through which group can he best act in and through his profession to re-Christianize the pagan ideas, customs, and attitudes which permeate our modern society? The one organization which stands out is the Catholic Physician's Guild, primarily because it fulfills all the requirements cited above for a true group apostolate. Not only is it active on a local level, but also in the national and international spheres. Again the Church advises us that "... the global nature of the Church's mission requires that apostolic enterprises of Catholics should increasingly develop organized forms at the

international level."⁴ Perhaps working together, the guilds could establish some communication with the World Health Organization and influence this organization through their combined efforts.

Another organization is the National Council of Catholic Men, which is composed of men of various vocations and ideals but who can still combine their talents in a common Christian goal on a national scale.

Catholic doctors as a group can be active in their local, state and national medical societies with good effect on the rest of the organization as a whole, speaking and acting in unison.

Other organizations not specifically medical through which the physician can work are: Holy Name Societies, which strive to bring Christ to all men; through professional sodalities, which are dedicated to the very goals cited above; through Christian Family Movements, whose objectives are common to every Catholic man and woman. One must always bear in mind that an apostle can exert his influence better through established secular organizations including political parties, labor unions, teachers' associations, business groups, cultural organizations, etc.

Let us briefly mention some of the fields of activity for a physician no matter what group apostolate he joins. Closest to our hearts are the various medical-moral "dilemmas," e.g. the moral means of family limitation having bearing on the population crisis. The problems of sterilization and abortion are becoming more and more pressing with

each passing day. We have not nly a right but a duty to express our ws on these matters even while con ering we are living in a plure stic society. Doctors can participa in family life clinics, pre-cana co lerences, sex education discussion and medical aid to the missions. Nar tics addiction, alcoholism, and the ing suicide rate are all problems of the highest importance. The social dilemmas of our day are certain not foreign to our profession-po rty, slums, poor housing, racial prejudices, unjust wages, our risin divorce rate and crime rate unequal distribution of food and medical care. In politics we can strive for honesty, credibility responsibility, and just and neded legislation.

Let the physicians heed the vords of Pope Paul and Pope John by acting in and through the profession in the group apostolate in an effort to infuse the word of God into all aspects of the profession and further in all fields of our social milieu.

The call of the King is heard now. This is the era of the laity. We must begin to act now in a decisive manner, never again to fall back into our past apathy and indifference.

We all know such endeavors generally are slowed by buffs and rebuffs. Courage and persistence and the ability to survive frustration and failure as well as Divine Help are needed. Fortitude like Mary had when she met her Son on the way to Golgotha can propel us a good stretch of the way. Those who employ her intercession will enjoy additional strength in whatever apostolic pursuit they choose

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DRS. GRIMALDI and ZOLL are members of the Catholic Physicians' Guild of the Diocese of Buffalo and the Buffalo Professional Sodality.

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