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# PAIN AND ANESTHESIA: A PAPAL ALLOCUTION

COMMENTARY BY

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On February 24, 1957, Pius XII received in audience an international group of some five hundred physicians and surgeons assembled in Rome, and spoke to them on the subject of pain prevention and anesthesia.<sup>1</sup> His choice of topic was occasioned by three questions submitted to His Holiness some months previously by the Ninth National Congress of the Italian Society of the Science of Anesthetics. The questions were these:

1. Is there a general moral obligation to refuse analgesia and to accept physical pain in a spirit of faith?
2. Is it in accord with the spirit of the Gospel to bring about by means of narcotics the loss of consciousness and of the use of a man's higher faculties?
3. Is it lawful for the dying or the sick who are in danger of death to make use of narcotics when there are medical reasons for their use? Can narcotics be used even if the lessening of pain will probably be accompanied by a shortening of life?

The first of these questions refers to man's obligation, if any, to endure physical suffering, and might be paraphrased in some such

<sup>1</sup>The official text of this address, delivered in French, is contained in *Acta Apostolicae Sedis* 49 (Mar. 27, 1957) 129-47. The English translation of excerpts quoted in this commentary is taken from *The Pope Speaks* 4 (Summer 1957) 33-49. See also *Catholic Mind* 55 (May-June 1957) 260-78.

words as these: is one always obliged in conscience to accept the bodily pain with which he may be afflicted, or are there legitimate means of avoiding or alleviating it? The problem here presented prescind from the nature of the analgesic to be used, whether it involve total or partial anesthesia. It is concerned exclusively with the end-product achieved, viz., escape from pain, and inquires as to the lawfulness of that intended effect.

The second question goes a step further and, in anticipation of a favorable answer to the first, asks whether it would be "compatible with the spirit of the Gospel" to make use of those analgesics which induce even total unconsciousness and thus suspend the functioning of one's rational faculties. The point at issue here is not the morality of avoiding pain, but rather the lawfulness of escaping it by means which affect adversely the operations of intellect and will. (It is not immediately clear whether the phrase "compatible with the spirit of the Gospel" was intended to mean "in accordance with one's strict conscience obligations" or "consistent with that ideal of

Christian perfection which is beyond the call of strict duty." But as will be seen, the Pope answered the question as understood in either sense.)

The final problem posed is a still further assumption on the preceding two: in the likelihood that narcosis, besides relieving pain, will also hasten death, may one licitly administer to the dying or those in danger of death analgesics which are medically indicated?

(Before taking up these specific problems, the Pope spoke at some length on the nature, origin, and development of anesthesia over the last century. His words pay high tribute to those men of both past and present generations who have contributed most to the science and art of anesthesiology. The modern anesthetist, so often the "forgotten man" on the surgical team, should find this first section of the Pope's address especially gratifying in its laudatory recognition of the important and exacting role which proper anesthesiology plays in successful surgery.)

#### MUST PHYSICAL PAIN BE ENDURED?

There are certain extraordinary circumstances, as Pius indicates, which might demand the acceptance of physical suffering as a matter of serious obligation. If one is faced with but two alternatives, viz., either to endure pain or in escaping it to act contrary to a grave moral obligation — the choice, for instance, of either submitting to martyrdom or denying the faith — only the one alterna-

tive, suffering, is permissible. But such a situation admittedly is not the one envisioned by the doctors who proposed the question. What concerned them was the possibility that pain in itself, regardless of circumstances, is obligatory whenever God permits it to strike, and that in conscience we have no choice except to bear what suffering comes our way.

Understanding the question in this sense, the Pope gave the negative answer that was to be expected: speaking in terms of strict obligation, we are never required to will suffering for its own sake. "Physical suffering becomes necessary, and must therefore be accepted, insofar as without its aid, mastery over self and its disorderly tendencies is unattainable. But to the extent that it is not required for this purpose, it cannot be asserted that there is any strict obligation in the matter." In other words, pain is not a necessary end in itself, but can sometimes be a means for avoiding sin or the danger of sinning. Only insofar as it becomes a necessary means to that end can its acceptance be called obligatory and its rejection sinful.

But apart from any consideration of obligation and sin, does not the deliberate evasion of pain contradict the ideal of Christian perfection and imply a lack of the spirit of faith? At first sight it may seem that the individual who avoids suffering is to that extent refusing to share fully in the imitation of Christ and thereby rejecting an opportunity to achieve the ultimate in Christian perfection. But to put a theological truth

quite prosaically, first things come first. The prime essential to the following of Christ is the will to love God and to obey Him in all His commandments. In some circumstances physical suffering is helpful or even necessary to that end, and is accordingly either advisable or obligatory. But in many instances pain is an obstacle to the fulfillment of more important functions, and as such is more prudently avoided, if possible by legitimate means. Pius, for example, draws a picture of the ideal follower of Christ:

When a Christian performs, day after day, from morning till night, all the duties imposed by his state in life, his profession, and the laws of God and man, when he prays with recollection, works wholeheartedly, resists his evil passions, shows his neighbor the charity and service due him, and endures bravely, without murmuring, whatever God sends him, he is always living under the standard of Christ's Cross, whether physical suffering is present or not, whether he endures it or avoids it by permissible means.

Can these first duties be best carried out while suffering pain or only if relieved of it? As each one answers that question honestly for himself, he more prudently chooses either to endure physical suffering or to take lawful means to escape it.

Thus, in summation of his answer to the problem of obligatory suffering, the Pope concludes:

The patient desiring to avoid or relieve pain can in good conscience use those means discovered by science which, in themselves, are not immoral. Particular circumstances can impose another line of conduct, but the Christian's duty of renunciation and of interior purification is not an obstacle to the use of anesthesia, for that duty can be fulfilled in another way. The same rule applies also to those precepts of the Christian ideal which go beyond the requirements of duty.

If this is true for patients, it also follows for anesthetists that:

The fundamental principles of anesthesiology, as a science and an art, and the end it pursues, give rise to no difficulties. It combats forces which, in a great many respects, produce harmful effects and hinder greater good.

The doctor who accepts its methods enters into contradiction neither with the natural moral order nor with the specifically Christian ideal. He is seeking, according to the Creator's ordinance (cf. Gen. 1, 28), to bring suffering under man's control. To do so he makes use of scientific advances and technical skill in keeping with the principles We have set forth and which will guide his decisions in specific cases.

#### NARCOTICS AND LOSS OF CONSCIOUSNESS

It may strike doctors as strange that an issue should be made of the lawfulness of anesthesia, either total or partial, since the use of anesthetics, especially in surgery, is so often patently necessary and so generally accepted. But the fact remains that recourse to anesthetics is permissible only under certain conditions, although beyond question these conditions are frequently verified, especially in surgical cases. The first requirement is that there be sufficiently serious necessity — which generally consists in the physical needs of the patient and his own greater good — for suspending the function of rational faculties either totally or partially. In this regard the moralist demands no more of the anesthetist than would the latter's own medical conscience: to employ that anesthetic which is surgically indicated and best adapted to a successful operation. While stressing the importance of proportionate reason for inducing unconsciousness, and condemning the use of

narcotics merely for the pleasurable sensations they arouse, the Pope readily concedes that the decision to anesthetize and the proper choice of anesthetic is essentially a medical consideration.

(Pius also calls attention to the obligation of professional secrecy which must be observed by the surgeon and his assistants who may hear from a semi-comatose patient information of a private nature. Their responsibility in these circumstances is in a sense greater than usual, since the patient has no control over his speech and under the influence of drugs may reveal matters which in his rational moments he would conceal even from his doctor.)

It is in this section of his address that the Pope makes his most explicit statement to date concerning the medical use of hypnosis. After stating the precautions which should attend the use of anesthesia in general, Pius goes on to say: "There is no essential difference, from the moral standpoint, whether this result [reduced consciousness] is obtained by the administration of narcotics or by hypnosis, which can be called a psychic analgesic." However, just as the administration of any anesthetic must conform to certain medical standards, so also must the practice of hypnotism:

The subject which engages Us here is hypnosis practiced by the doctor to serve a clinical purpose, while he observes the precautions which science and medical ethics demand equally from the doctor who uses it and from the patient who submits to it. The moral judgment which We are going to state on the suppression of consciousness applies to this specific use of hypnosis.

But We do not wish what We say

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of hypnosis in the service of medicine to be extended without qualification to hypnosis in general. In fact, hypnosis, insofar as it is an object of scientific research, cannot be studied by any casual individual, but only by a serious scholar, and within the limits valid for all scientific activity.

It is not a subject for a group of laymen or ecclesiastics to dabble in, as they might in some other interesting topic, merely for experience or even as a simple hobby.

This is substantially what the logicians have been teaching about hypnosis in recent years since the practice became acceptable as an effective and respectable medical tool. Its indiscriminate use cannot be countenanced, especially at the hands of the professionally untrained. But when valid medical reasons can be adduced for hypnosis it is permitted subject to those same precautions which must attend the administration of any anesthetic.

But is this degree of freedom under natural law entirely compatible with the example of Christ on Calvary Who "refused the wine mixed with gall because He wished to drink to the dregs in full consciousness the chalice which His Father offered Him"? Again the Pope assures us that no rule of Christian perfection prevents us from taking advantage of legitimate means to relieve pain, even to the extent if necessary of inducing unconsciousness. The example of Christ remains as a source of consolation and strength in those sufferings which none can avoid or which some freely choose to bear; but nothing in the Gospel or in the teaching of the Church obliges us to endure pain when-

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ever, regardless of conditions and circumstances, an occasion to suffer presents itself.

In conclusion the Pope provides this brief summary of his answer to the second question proposed: "... within the limits laid down, and provided one observes the required precautions, narcosis involving a lessening or suppression of consciousness is permitted by natural morality and is in keeping with the spirit of the Gospel.

#### ANALGESICS FOR THE DYING

As the Pope observes, this final problem is essentially no more than an application of the two previous solutions to the special case of the dying, although it does introduce a further complication of sorts by underlining the medical fact that in some cases death may be unintentionally hastened by drugs administered to relieve pain. In his answer, Pius first prescind from this last detail and discusses only the more fundamental question as to whether the approach of death creates an obligation to bear suffering where none existed previously. He then deals with the matter of the incidental shortening of life by the use of analgesics.

#### Must the Dying Suffer?

Do the dying have any moral obligation beyond that of others to accept suffering or refuse its alleviation? The Pope's immediate answer is a flat negative: neither from natural law nor from Christian revelation can such an obligation be deduced. Even for the dying, pain remains no more than a possible means to an end and not an end in itself. For some, suffering will be a source of merit, an effective instrument for their

growth in love of God and resignation to His will. Many others, however, will find that intense, protracted pain has rather the contrary effect—it makes prayer most difficult or even impossible, and creates an insurmountable obstacle against those dispositions of soul which are most desirable at the moment of death. In the one case, suffering is spiritually advantageous, and such a patient has a special motive (though not necessarily an obligation) to accept pain as approaching death signals the end of his opportunities for acquiring supernatural merit. In the other case, suffering becomes a spiritual threat which can perhaps best be averted by analgesics.

In either instance it should be clear that the decision to endure pain or to escape it by legitimate means is essentially a decision for the patient himself to make if he is able. When a dying person is able and willing to suffer, it would be clearly an injustice to force drugs upon him against his express refusal.

This answer of the Pope is, of course, based on the supposition that (1) the dying patient has already prepared himself spiritually and materially for death and that (2) serious medical reason urges narcosis. If either of these conditions is lacking, certain qualifications would have to be made.

First, it should be clear that a dying person is not justified in seeking release from consciousness if he thereby makes it impossible for himself to fulfill serious obligations which he could otherwise discharge. Most important of

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these obligations for a Catholic would be that of receiving the last sacraments, if possible, while still in possession of his rational faculties. Even for a non-Catholic there remains the serious duty of making his peace with God according to his conscience convictions and the grace at his disposal. Proper disposition of one's worldly affairs can be another consideration of serious moment. To evade such responsibilities as these at the hour of death, by deliberately and unnecessarily making oneself permanently incapable of them, cannot be reconciled with moral law. And it follows as a corollary that the doctor who would grant such a patient's request for narcosis would be equally guilty, and far more so the doctor who on his own initiative would render a dying patient incapable of discharging these obligations.

But suppose a dying patient in great distress, who obstinately refuses to make proper preparation for death and persists in his demand for narcotics which will deprive him of the adequate exercise of his rational faculties. Is the doctor then justified in yielding to his request? If reasonable efforts fail to persuade the patient to do the proper thing, the doctor can with good conscience administer a proper narcotic. For as Pius explains, it is then the patient's perverse will which is totally responsible in the moral sense for the sin involved. The doctor, intending only to relieve from pain, merely permits the resultant evil (unrepentant death) and does not

cooperate in it in any sinful fashion. "Whether or not he [the patient] obtains relief from pain," the Pope concludes, "his behavior will be the same. He will not carry out his obligation. Granted that the possibility of repentance is not excluded, there is still no serious probability of it, and who knows even that he will not be hardened in evil?"

Another possibility suggested by the Pope himself is that of a dying patient—presumably one who has already made adequate preparation for death—whose pain, if any, does not require the type of drug which would deprive him of consciousness. What is to be said if such a patient is administered a narcotic which, without in any way hastening death, would nevertheless induce unconsciousness? Certainly Pius is not speaking here of medication which might be required to insure a normal amount of sleep for a patient—the ordinary sleeping pills prescribed at ordinary intervals. What he seems to imply is a more or less permanent comatose state induced solely in order to obliterate the realization of approaching death.

The suggestion of such a procedure—even on the understanding that death is in no way hastened thereby—would probably offend the sensibilities of any person of faith, although he might be at a loss to specify the precise reasons why it is offensive to him. The Pope gives three: (1) the practice would be, without adequate reason, at variance with the example of Christ Who chose to meet death fully conscious; (2) it

is contrary to the mind of the Church as expressed in her ritual prayers for the dying; and (3) it is repugnant to human sensibilities to deprive a Christian of the help and consolation to be derived from a final prayer and word with those closest to him.

#### Narcotics Which Hasten Death

There can be no discussion about the permissibility of using any medication deliberately intended to hasten death, even of a person already doomed. Direct killing, i.e., recourse to any lethal means with the intention of terminating or shortening innocent human life, is always forbidden, even if "dignified" under the title of euthanasia. But it is a matter of medical fact that the condition of a dying person may be such that drugs, by their nature designed to relieve pain and administered solely for that purpose, may have the additional effect of hastening the moment of death. May drugs of this kind be prescribed for such a person if no less harmful analgesic is available? This is the final question considered by the Pope in this address.

First, it must be stipulated that the drug in question be truly an

analgesic in its own right and not merely a lethal agent; i.e., it must be capable of deadening pain, not through the intervention of death, but because of its own analgesic properties. Secondly, death may not be the object of direct intention on the part of either patient or physician. And finally, the condition of the patient must be serious enough to compensate for the incidental shortening of life; i.e., the pain from which he seeks release must be serious and beyond the control of any less harmful remedy. Granted these conditions, the final question submitted to Pius may be given an affirmative answer. Or in the summary words of the Pope himself:

... you ask Us: "Is the removal of pain and consciousness by means of narcotics (when medical reasons demand it) permitted by religion and morality to both doctor and patient even at the approach of death and if one foresees that the use of narcotics will shorten life?" The answer must be: "Yes — provided that no other means exist, and if, in the given circumstances, that action does not prevent the carrying out of other moral and religious duties."

There is nothing theologically novel in this papal allocation. But it does provide authentic confirmation of what theologians generally have taught on matters which should be of vital concern to doctors.

