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Essence of Concern

Presidential Address of Dr. J. E. Holoubek to the Executive Board delegates attending the annual meeting in Atlantic City, New Jersey, June 16, 1963.

It is a great pleasure for me to welcome the delegates of our constituent groups to this annual Executive Board meeting of the National Federation of Catholic Physicians' Guilds. I should like to recall the words of Dr. Count Gibson at our winter gathering in Denver in December, 1961, when he stated: "One meets so many physicians who give so much of themselves and of their substance to the work of the National Federation of Catholic Physicians' Guilds, although they probably have little of each to spare."

The increased growth of the organization is reflected more and more in the activity of the Board sessions. All "old timers" (this is my fourteenth meeting) remember when a few delegates would transact the Federation's entire business as one committee. Now, an entire day prior to the official meeting is devoted to special committee discussions. Indeed, some chairmen meet with their groups throughout the year. And this is the way it should be.

It would have been my wish to have visited every Guild in the past year, but it was impossible to travel more than I did. One could easily devote all of his time to this organization and thoroughly enjoy it.

I wish to pay tribute to the tireless work of the committee

chairmen. May we also give high praise to our central office staff. The work in St. Louis has greatly increased and in the interest of economy is handled by just two persons. My own secretary and the nurses in my office have also been of great assistance.

We are pleased to note the new format of *Guilds in Action* and hope you will keep us informed of your activities so that this newsletter can reflect the projects of our groups and keep us united as fellow Guild members.

The *Guild Manual* has been published and distributed to each president and moderator. It is also used in the promotion of new Guilds.

It is with pleasure that I report on the Health Care of Religious Program. It has been a most successful project in the Diocese of Alexandria, Louisiana. His Excellency, Most Reverend Charles P. Greco, our Bishop, will present the Program at the annual meeting of the American Hierarchy this Fall. He will also outline his concept of a diocesan Program for all clergy and religious. At the same time His Excellency will review other activities of the Federation, including those of our membership committee, urging the formation of Physi-

cians' Guilds in all dioceses. Gathering copies of all published material on the Health Care Program, Bishop Greco had opportunity to present the Program to His Eminence Cardinal Cicognani, Papal Secretary of State, from whom he later received a note advising that he would recommend it for consideration at the next session of the Second Vatican Council.

We extend our thanks to those who have engaged in this activity and particularly commend Dr. James T. Nix of New Orleans, chairman of the committee, for his continued efforts.

Now, I would like to step back and take a penetrating look at the Federation. As a Catholic physician I have asked myself these questions and now ask them of each of you. Am I satisfied with the image of the National Federation that has been created in the minds of our colleagues, Catholic and non-Catholic? What image has the Federation created for the Church, for the Bishops, for laymen? Indeed, has it really created an image at all? Are we considered simply to be a pious professional society and nothing else? To what extent do we utilize the talents God has given us to develop the apostolate of the Catholic physician? Do we, as individual physicians and as groups do as much as we should to extend the principles of morality in the light of the teachings of the Church among our Catholic co-workers as well as non-Catholic physicians?

Today the Federation is about the sixth largest medical organization in the country. But it has the potential to climb even higher, second only to the American

Medical Association. We are proud of our 7,000 membership. There are, however, 30,000 Catholic physicians in the United States. What is our apostolate concerning those others not in our number? Are we endeavoring to contact every Catholic physician in our diocese, or are we as Catholic doctors withdrawn because of social status, national origin, or even the color of skin? Were we to communicate with all of these physicians, we would perhaps have fewer of them making public statements and practicing a level of medicine contrary to God's law.

Are we doing anything in an organized way to meet our Catholic medical students, residents and interns and those in the Armed Forces? Much is being done by our membership committee on a national level, but each of us should feel responsible in this area. Six Catholic medical schools in the United States have an enrollment of 2,108 students, approximately two-thirds of whom are Catholic. There are eighty-one non-Catholic medical schools with an enrollment of 28,217. About one-fourth of these students are Catholic. This is a sizeable number and we should be looking after the interests of this group. The Newman Clubs in these medical schools need our assistance.

Our Catholic interns and residents deserve special consideration. There are 863 Catholic hospitals in the United States, 194 of which are approved for internship. There are 582 interns in these institutions. Do we teach these men and women by example and instruction, or do we relegate this to the Sisters on

the wards or in the operating rooms? Among the 20,690 interns and 7,822 residents in non-Catholic hospitals, approximately one-fifth are Catholic. They, too, are our special concern.

I would like to suggest that our Guilds provide some type of membership in the National Federation for our Catholic medical students, interns, and residents and make available THE LINACRE QUARTERLY, our journal, at the same time establishing a program that would give them priority consideration in our apostolate. This would, of course, be at no charge to them. Those in the Armed Forces should have like attention.

In Government service, there are, 6,273 physicians in public health, 3,500 in the Navy, 3,500 in the Army, 3,300 in the United States Air Force, and 5,560 in the Veterans Administration. This is a total of 22,133. At least one-fifth of these are Catholic.

In short, we should reach every Catholic physician throughout the land. Our diocese of Alexandria comprises the northern half of Louisiana, an area of 20,000 square miles. We have seventy-six Catholic physicians either in practice or internship, residency, or the Armed Forces. All but two are members of this Federation.

Let us consider another important phase of the Federation. We publish an official journal, THE LINACRE QUARTERLY. While the magazine's circulation is substantial, it is not read by all Catholic physicians, and, as we have mentioned, medical students, interns, and residents. Much of the material contained in its pages would benefit our parish priests as well as our non-

Catholic colleagues. Each of us should assume responsibility to increase the subscription list beyond Guild membership. Editorial material is in constant demand; LINACRE is our voice and to be heard, articles are needed for publication. A strong plea is made in this direction.

In recent years some of our physicians have been serving the Church in foreign medical missions. We are capable of doing even more. Our Los Angeles Guild has been a leader and done monumental work through the establishment of the Mission Doctors Association. Physicians of other Guilds have given short as well as long term service. Many have inspired their local medical societies to do similar work. The example of Doctors J. Leshock, C. Maternowski, J. Slaughter, J. Grady, J. Ebbish and others serving for short periods is exemplary and claims our respect and admiration. We have Dr. J. Foust with us today who has just returned from four years work in the missions of Africa. If these men serve, should not we, who do not, at least contribute in other ways? Are we satisfied merely to give some mission our worn out equipment, our drug samples and out-dated medicines and boast that we are doing our share? Are we giving of our substance? Or, are we giving just of our medical excess?

To come back home, to what extent are we reaching all the physicians in the country in the language they understand, the language of scientific research. The work of the Health Care of Religious Committee attests to this; substantial grants have been provided to promote efforts

in this regard. But there are other fields to cover also, Medico-moral principles need constant attention; the focus of attention on the anovulant drugs is certainly a case in point today. Innumerable research facilities are available to us. As we have mentioned, there are 863 Catholic hospitals in the United States. The kind of research that could come from the cooperation of the National Federation and The Catholic Hospital Association should be unequaled in the world.

Will the National Federation ever be a leader among Catholic medical societies of the world? Will it plan to send official delegates to important world congresses or rely on someone who "happens" to be attending to represent us? The XI International Congress of Catholic Doctors will be held in the Philippines in 1966. If the Catholic Physicians' Guild of the Philippines could send its president to Munich for the IX International in 1960, and to London for the following one in 1962, can we do less? As a matter of fact, we should invite this Congress to the United States at some future date. It would be costly. But if the Catholic physicians of Munich could afford the IX Congress in 1960, only fifteen years after the devastation of their country, and if the small number of Catholic physicians of London could provide the one in July 1962, perhaps we could see our

way clear to extend a like invitation.

To speak further of mundane matters, may we speak of Federation finances. If we do not have the cooperation of our Guild treasurers in remitting promptly for dues, supplying us with membership lists, and otherwise responding to our communications, the effectiveness of the entire organization suffers. Much of the work at the central office, also the expense of follow-up, could be eliminated by closer affiliation of our constituent groups with our national office. A study of our structure by the Finance Committee indicates that this growing organization operates on the very meager dues of \$1.00 for each member which is not adequate to meet expenses and provide for expansion. The officers and committee chairmen who expend personal finances on their projects should be reimbursed for actual expense. Ways and means to augment our budget are certainly in order.

The foregoing are my questions and some of my thoughts. More detailed recommendations have been made to the committee chairmen. Our Federation has the potential, with the help of God, to make it a powerful and active organization, using to the utmost our talents He has given us. For if we choose to do nothing, in time our talents may be taken away. The choice is ours.