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### Ethical Issues: The Pope and Terri's Tube

On March 20, 2004, in a papal allocution delivered at the Vatican, Pope John Paul II made statements regarding the feeding of patients diagnosed as being in a persistent vegetative state. These statements have rekindled the longstanding ethical debate about futility and the patient's right to choose or refuse "artificial nutrition and hydration" as a form of artificial life support.<sup>i</sup> His speech addressed physicians scientists, ethicists from over forty countries at an international congress: "Life-Sustaining Treatments and Vegetative State: Scientific Advances and Ethical Dilemmas"

Four points were made:

1. There is intrinsic value and personal dignity of every human being, not matter the circumstances.
2. Vegetative state is frequently misdiagnosed, and the state of complete unresponsiveness and lack of awareness is now being questioned scientifically.
3. Artificial nutrition and hydration is a "natural" (rather than medical) means of preserving life and should be considered ordinary and proportional, and as such is morally obligatory. Ie: patients deserve *normal* care that is due all persons out of respect for their human dignity.
4. Caregivers of patients in this state should receive all possible support including respite care.

These comments are clearly in response to the plight of Terri Shiavo and the legal battles now occurring in Florida.<sup>ii</sup> It has been widely accepted among Catholic moralists since the sixteenth century that one need only employ "ordinary" means of preserving life, but not those deemed "extraordinary", which is to say those measures that fail to offer a proportionate hope of benefit or impose excessive burdens.<sup>iii</sup> For many, this allocution has created an ethical time bomb for health care institutions and providers, and may set legal standards and policy pertaining to patient autonomy and what encompasses "artificial means" of life support back thirty years. *Cruzan* clearly affirmed the right of competent patients to refuse life-sustaining treatment, and considered artificial nutrition and hydration equivalent to other forms of disproportionate life sustaining treatment.<sup>iv</sup> Subsequent to *Cruzan*, and consistent with Catholic moral teaching, patients and physicians have been much more comfortable withholding or withdrawing feeding tubes near the end of life, especially when requested by the patient or their family. With the Pope's allocution, there may now be a resurgence of professional "obligation" to insert, or refuse the removal of, feeding tubes regardless of the patient's wishes if such treatment is again considered to be routine comfort care.

Some commentators view the Pope's message as not declaring an absolute moral obligation to provide assisted feeding in all cases.<sup>v</sup> However, this will be difficult to interpret until Church leadership makes further study of these comments. In the mean time interpretation is left to the individual providers, systems, and patients who must confront the day-to-day suffering of illness. There is no doubt that feeding tubes are fraught with complications and often impose further suffering.<sup>vi</sup> Feeding tubes may also be a burden to patients who do not wish to have interventions of any kind, including artificial feeding and hydration, if there is no realistic hope of recovery. Yet, in the present climate many may now feel obligated to insert feeding tubes in spite of beliefs, prognosis, or treatment goals.

Pope Paul's allocution does well by underscoring the intrinsic value of human dignity and the importance of recognizing the needs of caregivers of patients with chronic illness. These values spring from the very core of medicine. It is a reasonable implication that confirming respect for human dignity also underscores the competent patient's right to decide when continued intervention of any form, including artificial nutrition and hydration, has become disproportionately burdensome and that its time to stop.

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<sup>i</sup> Papal Address on Feed and Water. In: *Ethics & Medics* 2004; 29(6): 1-3

<sup>ii</sup> **Fleming D.** The Terri Shiavo Crisis. *Inside Track*. II(11): 5

<sup>iii</sup> Church Teaching on the Duty to Preserve Life, Forgoing Nutrition and Hydration, and Euthanasia. *CHA Ethics*. 2004 . [www.chausa.org](http://www.chausa.org)

<sup>iv</sup> **Annas GJ, Arnold B, Aroskar M, et al.** Bioethicists' statement on the U.S. Supreme Court's Cruzan. decision.[see comment]. *New England Journal of Medicine*. 1990;323(10):686-7.

<sup>v</sup> See note 1.

<sup>vi</sup> **Finucane TE, Christmas C, Travis K.** Tube feeding in patients with advanced dementia: a review of the evidence.[see comment]. *JAMA*. 1999;282(14):1365-70.