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A Concluding Editorial Comment On A Right To Health Care

Vitale H. Paganelli, M.D.

1 Cor. 12: Now brothers I do not want to leave you in ignorance about spiritual gifts . . . to one the Spirit gives wisdom in discourse, to another the power to express knowledge. Through the Spirit one receives faith, by the same Spirit another is given the gift of healing.

Who among us has not recognized and contemplated that we physicians have been given a very special spiritual gift in the charisma of healing! True, we have developed well the talent which God gratuitously provided. By the same token, no amount of personal desire could have overcome a deficit of innate ability. So we are what we are, viz, physicians, ultimately by virtue of a charisma, a spiritual gift.

This it seems to me, is the key of the Christian physician's disposition of his services. No one can doubt the value of labor especially since Marx hove into view. But if some labor has a greater or lesser intrinsic value than does another, a christianization of the concept of the value of labor would demand acknowledgement of the fact that the ability to perform one form of labor rather than another traces its origin to a diversity of gifts gratuitously given by God.

Christ's gift to mankind was Himself. This is unquestionably a difficult act to follow. Within our limited human (finite) framework it is His act which points the direction for us. The power to heal our fellow man frequently in soul as well as in body is the gift of this same Lord and God.

Can we be niggardly with this gift? Decidedly not. In fact, among men should we not be the most generous? Can pride in being a physician mean anything other than acknowledgement of the gift? Should we not be overjoyed at every opportunity to lay on our hands, to heal the sick and comfort the dying? Who among men has ever been similarly gifted, has had similar opportunities to be Christlike?

It is a practical world where money or goods are exchanged for labor. The physician, like the apostle, is worth his labor. A christianization of the meaning of labor does not negate the need for practical recompense even for such an exalted gift as ours.

The New England Journal of Medicine (Dec. 2, 1971) printed a

special article by Robert M. Sade, M.D., entitled "Medical Care As A Right: A Refutation". This refutation was based essentially on the principle that a physician's right to dispense his service follows as a consequence of his right to support his own life. Dr. Sade's essay treats the problem as though the physician's right was exercised in some sort of cosmic vacuum. Neither is there mentioned that the physician has obligation(s) which parallel his rights in a society nor are the rights of the rest of the human race considered by this author. Furthermore, Dr. Sade would have us believe that the physician could dispense his services in the absence of an absolutely essential assist from people as varied in capacity as the frequently underpaid hospital orderlies and dietary aides, to the hospital superintendents, boards of directors and our own office personnel.

But most importantly, in my opinion, Dr. Sade's essay ignores the fact that a man is capable of becoming a physician only as a result of a gift over which gift this same man exerts a control solely in its development and in no way over its existence. Further, he neglects mentioning that the physician must always relate the gift to its provider. This to be sure is a theistic conceptualization of the problem. But if one was not a theist, Dr. Sade's treatment of social problems would still leave much to be desired: ("this is the *only* (italics mine) proper function of government: to provide for the

defense of individuals against those who would take their lives or property by force"). No modern society can ignore the concept of common good if for no less practical reason than the fact that the "have nots" will not accept indefinitely that status. (Cfr. the American, French and Russian revolutions). Common sense recognizes that in this day of astronomically increasing hospital costs, it is far less expensive for society to keep its members healthy than it is to permit them to become ill and utilize expensive hospital beds. But even this is less important than recognition of the need of each human person in a modern society to an elemental or basic level of health care. For academic purposes we have attempted to elucidate a rationale for this conclusion and I for one believe that we have succeeded.

In conclusion I might note that while it may in general be agreed (with Dr. Sade) that a totalitarian approach to the physician's service is to be damned (cfr. Father McCormick's essay in this issue) neither can Dr. Sade's attempt to absolutize the physician's right be condoned. Dr. Bornemeier has pointed out carefully that neither as individuals nor as a profession have we been entirely self-centered and yet much remains to be done. This is particularly true of the physician qua theist who will continually recognize his profession essentially as a gift for which gift he must eventually give account.