

# Euthanasia Movement Faces New Challenges

By Religious News Service

A burgeoning euthanasia campaign, under the slogan, "Death With Dignity," is being met by a growing countermovement on the part of clergymen and doctors.

The "right to die with dignity" campaign was launched several years ago by the New York City-based Euthanasia Society of America and its public information agency, the Euthanasia Educational Council.

A major goal of the campaign is the championing of the "right" of terminal patients to reject all the technical equipment by which dying persons are kept "alive" usually at great cost and often in isolation from the person's family.

The campaign struck a responsive chord. Membership in the Euthanasia Society jumped from 600 in 1969 to over 50,000 in 1974, and at least 300,000 model "Living Wills" — supplied by the Educational Council — have been distributed by churches, doctors, and even schools.

The legal-looking document (which is not legally binding) declares that "if there is no reasonable expectation of my recovery from physical or mental disability, I (name), be allowed to die and not be kept alive by artificial means or heroic measures. I ask that drugs be mercifully administered to me for terminal suffering even if they hasten the moment of death."

Since the campaign espouses "passive" euthanasia, a kind of "pulling the plug and let nature take its course approach," rather than "active" or direct action to hasten death, it initially garnered support from many religious moralists.

Of late, however, a number of clergymen, doctors, and other experts have begun to express doubts about, or even outright opposition to, the implications of the "right to die with dignity" campaign. They question whether dying is all that simple, or whether it is a "right" that can be isolated from society's right to protect human life.

"The Living Will is hard for me to swallow," says Dr. Austin

## "A death with dignity may turn out to be something rare and uncommon, like a life with dignity."

H. Kutscher, president of the Foundation of Thanatology, an educational and research organization that promotes "new" understanding of dying among professionals and lay persons. "An individual signs it under circumstances when he is not concerned with his own death. It becomes operative when he is 100 per cent involved. There's no provision for canceling out."

Research psychologist and gerontologist Dr. Robert Kastenbaum describes the right to die campaign as a "cop-out" that gives the medical profession an excuse to limit, rather than improve, care of the dying.

"It's much easier to talk about mercy killing," he says, "than to try to add comfort and value to a terminal state."

A bill in the Massachusetts legislature that would allow individuals to draw "wills" providing that they need not be kept alive by "extraordinary means" if they are "terminal" patients has met strong opposition from the state's Roman Catholic bishops.

Testifying in March on behalf of the bishops, Msgr. Paul V. Harrington, head of the marriage tribunal for the Boston archdiocese, insisted that "only God has the right to terminate (human) life."

In Maryland, a similar "euthanasia" bill that would give legal force to what it described as the "right to die with dignity" was unanimously rejected by a Senate Committee.

In this instance, Maryland church leaders expressed a wide range of responses. Cardinal Lawrence Shehan, recently retired Archbishop of Baltimore, said he would be "obliged" to oppose publicly the proposed legislation.

Some critics of the "right to

die" concept point out that it necessarily entails "the right to be mistaken," and that mistakes in this context are truly fatal.

Dr. Avery Weisman, a Boston psychiatrist and professor at Harvard Medical School, who is a member of the Euthanasia Council's Medical Advisory Committee, has, himself, never signed a "Living Will."

"I don't want someone pulling the plug on me because they need the bed," he had been quoted as saying. "I know some doctors that I wouldn't want in charge of telling me the time of day, let alone the time to die."

Other critics of the "Living Will" think that it may operate as a subtle document of self-rejection. Dorothea Jaeger and Leo W. Simons, in their book, "The Aged Ill," maintain that, because the elderly "see an image of themselves as not useful citizens, (they) are likely to go tacitly along with euthanasia programs."

A strong boost to the "right to die with dignity" campaign came in June with publication of a "Plea for Beneficent Euthanasia," signed by more than 40 persons, including clergymen, scientists, philosophers, and lawyers.

The document, which appears certain to provoke a sharp ethical debate, recommends not only "passive" euthanasia, but "active" euthanasia as well. It defines "active" euthanasia as "the administration of drugs to relieve suffering until the dosage reaches the lethal stage."

The document was published in the July-August (1974) issue of *The Humanist*, the bimonthly journal of the American Ethical Union and the American Humanist Association.

One of the 40 signers is a former priest, now Roman Catholic theologian, Daniel C.

Maguire of Marquette University in Wisconsin, author of a recent book, *Death by Choice*.

The book examines the major issues involved in the "right to death" controversy and defends the thesis that active euthanasia, or what Dr. Maguire calls "mercy killing," may be ethically justified in some cases.

On the other hand, a strong push to the countermovement has been given by one of the scholars who first spoke out against excessive medical care for the dying.

Writing in the June issue of the *Hastings Center Studies*, Dr. Paul Ramsey, Harrington Spear Paine Professor of Religion at Princeton University, argues that the idea of death with dignity is now being too readily promoted, and death itself too easily accepted.

The Methodist theologian, whom Dr. Maguire describes as "probably the most influential writer in contemporary ethics," says that to suggest, "as many proponents of euthanasia do, that death is an occurrence as natural as birth smacks of 'whistling before the darkness descends.'"

It is "soap-opera stuff," says Dr. Ramsey, to state that "death can be beautiful. . . . Death is the ultimate indignity."

Citing St. Paul's Letter to the Romans in support of the traditional Christian view that death entered the world as "the wages of sin," Dr. Ramsey insists that death remains "the enemy," and that "true humanism" still depends on a "dread of death."

He suggests that romantically investing death with a bogus dignity may in fact hinder the care for the dying.

In the same issue of the *Hastings Center Studies*, Dr. Leon Kass, a physician and molecular biologist who works in biomedical ethics, expresses his concern that euthanasia sloganeering might mask "our prejudices against the old and the 'useless' and, in some cases, our simply crass and selfish interests."

"A death with dignity," he says, "may turn out to be something rare and uncommon, like a life with dignity."

# Grape Juice for Altar Wine? A Clarification

By Father Robert F. McNamara

Since Vatican II the secular news media have shown more interest than before in broadcasting Catholic news items. I suppose this is good; but I wince every time journalists and newscasters feature a "news flash from the Vatican." More often than not the item comes to us out of context and upside down.

Recently the media (including the prestigious *Walter Cronkite*) have informed us that the Church will permit priests who have problems with alcohol to use unfermented grape juice at Mass. Another puzzler to disturb Catholics who wonder where the Church is going! But also (I write to assure the disturbed) another example of incomplete reporting.

To understand this new and very restricted concession by the Holy See, we must understand a little of the background.

The material elements for the Sacrifice of the Mass are bread and wine. That is because Christ used bread and wine at the Last

Supper when he instituted the Eucharist, and told the Apostles to "do this in memory of me." The Church's duty, in order to protect the validity of baptism is to insist that it be administered with true water. To protect the validity of the Eucharist, it is also the Church's duty to insist that it be consecrated with true bread and true wine. True bread comes from wheat, true wine from ripe grapes.

Sometimes practical questions have arisen as to what is true wine. Supposing a priest on a desert island wants to offer Mass. He has some wheaten bread, but nothing closer to wine than a bunch of grapes. Can he simply squeeze the grapes into a cup and use that liquid, even though it has not yet fermented to produce wine in the usual sense?

Yes, he can, and the Church has long taught so. While it would normally be forbidden to do this when pure wine, completely fermented, is available, it would be valid in cases of necessity. As any vintner will tell

you, fermentation actually begins as soon as the grapes are crushed. You see the dust-like coating that is found on the outside of grapes is yeast, the agent of fermentation. The juice pressed from grapes may not at that moment be completely fermented, but it is already on the way to becoming wine.

So much for background. Now what did Rome say about the use of grape juice by priests who have problems with alcohol?

It should come as no surprise that some Catholic priests find alcoholic drinks a problem. After all, alcoholism is a major problem in all contemporary society — especially in this country. Usually the only course for an alcoholic is to utterly avoid drinks that contain alcohol. In the Eucharist, the wine is changed into the Blood of Christ, but as we well know, the change is a sacramental rather than a physical change. Consecrated wine loses none of the chemical traits that it had before consecration.

Does this pose a problem to

some priests? Apparently it does, for the Vatican ruling was in response to requests made by some bishops on behalf of priests who were under treatment. Thoughtful of the physical and spiritual needs of such priests, the Holy See, on May 2, 1974, came up with the following solution:

Priests who are undergoing a treatment for alcoholism or have undergone this treatment "(and only these priests) should henceforth present their situation to their bishops. The bishops are then authorized to allow them: (a) to receive Communion only under the form of bread when they celebrate with other priests; or (b) when they have to celebrate Mass with concelebrants to use 'unfermented grape juice'."

Cardinal John Krol, as president of the National Conference of Catholic Bishops, asked Rome for further clarification about the type of grape juice that was permitted in these rare cases. The reply was that it must be pure grape juice without additives. A further check was made by church officials to see whether

any commercial American grape juices would qualify. One producer was approached — Welch, the major American bottler of grape juice. The company assured the questioners that its product was pure juice from grapes, without added sugar or chemicals. If other producers can give the same answer, their juice is equally acceptable. Of course, this grape juice is pasteurized when bottled, and the original yeast is destroyed. But when the bottles are opened the juice is again susceptible to fermentation from yeast in the air. While it is unfermented juice, it thus still remains fermentable.

I understand that the American bishops intend to study this matter still further in the coming months. Meanwhile, three things are quite clear: 1) That this concession will affect only a small number of priests; 2) That it is not a new departure, but is based on a broader interpretation of an old ruling; 3) That it does not mean the Church intends in the future to replace wine with Coke, Seven-Up, or Rich's Root Beer!