

Rochester Diocese releases end-of-life statement

The Diocese of Rochester has issued the following statement on end-of-life issues:

On March 20, 2004, Pope John Paul II commented on the care and treatment of a very particular group of medical patients. Commonly referred to as living in a persistent or permanent "vegetative state," such people suffer from very low levels of neurological functioning. In his statement, Pope John Paul II said, "...the administration of water and food, even when provided by artificial means, always represents a natural means of preserving life, not a medical

act. Its use, furthermore, should be considered, in principle, ordinary and proportionate, and as such morally obligatory..."

This statement has generated considerable discussion among moral theologians, leaders of Catholic health care institutions, medical practitioners and individuals. Some have asked about the relation of Pope John Paul's statement to the strong moral consensus that has emerged over the past 50 years regarding the refusal of treatments which are not likely to benefit or assist in the recovery of medical patients. This moral consensus is expressed in a statement

of the Catechism of the Catholic Church, "Discontinuing of medical procedures that are burdensome, dangerous, extraordinary, or disproportionate to the expected outcome can be legitimate; it is the refusal of 'overzealous' treatment (2278)."

In understanding the recent statement by Pope John Paul II it is important to note that he refers only to a limited category of patients: those patients living in a PVS who do not also suffer from medical conditions likely to result in their imminent death. His remarks do not refer to individuals, medically competent or not, who may face de-

isions involving the refusal of treatments which are not likely to result in benefit or healing for them.

The statement by Pope John Paul II was issued "in principle" and does not offer a medical directive about the care of any individual patient.

Catholic health care institutions in the United States will continue to honor the Ethical and Religious Directives for Catholic Health Care Services, Fourth Edition issued by the NCCB/USCC, June 15, 2001 as the meaning and implications of the Pope's statement are further discerned in the months ahead.

Answers offered regarding pope's comments

The Diocese of Rochester has prepared the following questions and answers in response to Catholics' concerns related to Pope John Paul II's March 20 comments about care of patients in a persistent vegetative state.

What does the church teach about human life and death?

The church teaches that all human life is made in the likeness and image of God and is sacred; that the human body is the dwelling place of the Holy Spirit and each person must be treated with the utmost respect and dignity. Death is accepted as part of the human condition. The ultimate goal of a Catholic is to experience everlasting life with God.

Why have I been reading so much about "changes" in the church's teaching about the care seriously ill people should receive at the end of life?

Last March, Pope John Paul II presented a teaching statement, also called an allocution, to doctors, scientists and ethicists participating in a conference about scientific advancements and ethical dilemmas in caring for people in a vegetative state. The Holy Father Pope John Paul II said that when caring for people in the vegetative state, the administration of water and food is a natural means of preserving life and should be considered a moral obligation.

Does this mean that all dying people must be kept alive with tube feedings and intravenous hydration?

No. The Pope's teaching draws a distinction between people who are dying of medical conditions with no hope of recovery, and those who are living with disabilities — even the disability of having very low levels of neurological functioning; referred

to as a "vegetative state." In such cases in which there is no chance of recovery, the *Catechism of the Catholic Church* teaches, it is legitimate to discontinue "extraordinary" medical procedures.

What exactly is a "vegetative state?"

Diagnosis of the vegetative state is difficult and can be confused with a number of other medical conditions. Medical authorities generally define a vegetative state as a condition in which a person shows awake and sleep patterns, but does not give evidence of awareness of self or others. Because of these patterns, it is not the same condition as a coma. It is a low level of neurological functioning that can occur after resuscitation from injury or illness. At one time, people in this medical state were not thought to experience pain, but recent advances in medical imaging indicate that these individuals may feel pain, although they cannot express themselves. Recovery is rare but some cases have been documented.

Why does the pope's teaching consider it morally wrong to withhold food and water from a person in a vegetative state, since they cannot feed themselves?

The dignity and sacredness of the human person is not diminished by the circumstances of his or her life. Catholic social and moral teaching and the Catholic health-care tradition emphasize solidarity with the most vulnerable among us, and so providing appropriate shelter, food and water to these very disabled people is an affirmation of our shared humanity. Because withdrawal of food and water would mean certain death from dehydration or starvation, this might be considered eu-

thanasia by an act of omission. In fact, people in a vegetative state are not considered to be dying but are surviving and awaiting therapy that might one day allow them to recover.

Shouldn't the quality of a person's life be a determining factor?

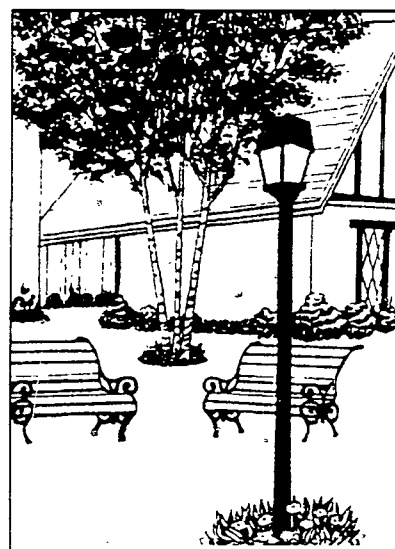
The church teaches that human life is a gift from God and human dignity is an enduring birthright; circumstance or tragic illness does not change that. Our responsibilities as Catholics are to form relationships with all people in ways that reflect God's love for each of us, responding appropriately to an individual's needs, and never denying their humanity. That is why the Holy Father is encouraging all involved to use the term "living with low levels of neurological functioning" to refer to such people instead using the term "in the vegetative state," thereby af-

firming their human dignity.

Does the pope's teaching mean that I no longer need to fill out advance directive forms regarding my care at the end of life since Catholic teaching is understood on these issues?

It is most important that you discuss your wishes and the teachings of the church with your loved ones and complete advance-care directives. Science and medicine change and theologians and ethicists continuously study issues such as disability and end-of-life care, and the church will continue to study and clarify its teaching over time.

For further information contact: Jann K. Armantrout, Life Issues Coordinator, Diocese of Rochester, 1150 Buffalo Road, Rochester, NY 14624; 585/328-3210, ext. 1304; or e-mail armantrout@dor.org.



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