

The dilemmas of a Catholic doctor

Press coverage of 'Celebrating Life' conference

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I have an irrational prejudice against doctors. The trouble is, I spend a lot of time with women in labour and

childbirth, and the doctor is the very last person we want to see in a birth room.

Many doctors are perfectly respectful and considerate towards the labouring woman in their care, but you still get the odd throwback who marches in unannounced with bad news and an even worse attitude, an invasive presence threatening invasive procedures.

You can rely on this type of doctor for confidence-shattering, bossy remarks like “We will give you one hour to have this baby then we will proceed to an instrumental delivery”.

If you have a phobia of a particular profession, then finding yourself in a room full of them is supposed to cure you, so it was a good thing that I spent last Saturday afternoon at an outstanding and inspiring conference of Catholic doctors

organised by the Westminster Diocese and hosted by Opus Dei in an elegantly modernist conference hall in Hampstead.

My job was sorting out written questions from the audience to a distinguished panel of experts in medical ethics led by the Cardinal himself, and including Dr Philip Howard, of St George's Hospital, who started the day with a brilliant and illuminating commentary on *Evangelium Vitae*.

I was privately amazed by how many medical students and keen sixth formers had given up a precious Saturday in front of the telly to think about medical ethics, so the written questions which rained down on my desk over lunch were a wonderfully mixed bunch. There were abstruse philosophical questions from the senior medics mixed up with blatant attempts from sixth formers to get

the panel to do the questioner's weekend homework for free – and once we had weeded out the thinly disguised essay titles, the questions written in a more youthful hand turned out to be an intriguing selection.

For example: “Have you ever experienced prejudice in your medical career because you are a Catholic?”

Two of our panel members, Dr Charles O'Donnell and Dr Anne Carus, the NaPro Fertility expert, said that no, they had not experienced any overt prejudice. But I would not really expect them to: Dr O'Donnell is a totally upfront Catholic doctor who works extensively with student and junior doctors on medical ethics. And Dr Carus, being a natural fertility expert, is also in area of work in which, by its very nature, she is not likely to encounter prejudice,

because the more prejudiced people in society are not likely to cross her path.

Both travel, as it were, with warning lights on and probably most anti-Catholic or anti-Christian elements simply move out of their way as they approach.

But our keynote speaker, Dr Philip Howard, told a chilling story about how an Oxford college turned him down after he gave a pro-life answer to an interview question.

Logic dictates that if there were one career in which you should expect to find Christians aplenty, then surely the medical profession must be it. Learning to heal the sick and tend to the dying has to be the simplest, most obvious way of answering Christ's call.

So is extraordinary that the concept of prejudice against any Christian

within the caring professions should be a worry for Catholic medical students. Yet it is clearly what most worries them. Another student asked, “Have you ever been tempted to do something which went against your faith and ethics but which you knew would further your career?”

The assumption was that being a Christian, in particular a Catholic, is in some way going against the grain of medical life. Either you are going to encounter prejudice at the best, or find your faith at odds with what your superiors expect you to do. And that is a terrible indictment of the way in which we regard doctors.

I realised that my own particular totally irrational bias against obstetricians is probably an offshoot of this: we no longer think of doctors as experts who trust and respect the human body, rather as interfering busybodies who want to “play God”.

It seems we need more doctors who are Catholics, and more Catholic doctors such as Dr Howard, with the confidence to speak up for their convictions.

As for Dr Howard's story: well, he was accepted by another college – and he discovered years later that his rejection “on grounds of his faith” had become common knowledge – not to his shame, but, it turned out, to the eternal shame of the college which rejected him.

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