



The Holy See

**ADDRESS OF HIS HOLINESS PIUS XII
TO PARTICIPANTS IN THE VIII CONGRESS
OF THE WORLD MEDICAL ASSOCIATION***

Giovedì, 30 settembre 1954

It is a pleasure to be once again among doctors, as has so often been the case in recent years, to say a few words to them.

You have made it a point to inform Us of the aims of the World Medical Association, and of the results which it has achieved during the seven years it has been in existence. It was with great interest, that We learned of this news, and of the large number of tasks to which you have devoted your attention and your efforts: the establishment of contact with, and the grouping of, national medical associations; the exchange of experimental data among them on a reciprocal basis; the study of problems which are today of concern to various countries throughout the world; the conclusion of formal agreements with numerous related organizations; the creation of a general secretariat in New York; the founding of your own publication, the *World Medical Journal*. Then, too, in addition to these accomplishments of a predominant character, several important questions which concern the profession and medical practice in general, have been settled, and your conclusions put into effect; the honor and reputation of the medical fraternity have been upheld; an international code of medical ethics, already approved by forty-two nations, has been carefully drawn up; a newly edited version of the Hippocratic Oath (the Geneva Oath) has gained acceptance; and euthanasia has been officially condemned. Among a great many other questions, moreover, you have also taken up those which pertain to the adaptation and advancement of university instruction intended to further the training of young doctors and, more particularly, the ends of medical research. And these are only a few of the many problems with which you have dealt. To the program of the Eighth Congress, which is currently in session, you have added, for example: the duties of a doctor in time of war, with particular reference to bacteriological war; the position of the doctor with respect to chemical and atomic war; and, finally, with regard to experimentation on man.

You are fully qualified to deal with the medical, as well as the technical and administrative aspects of these questions, but we would like to call your attention to several points which pertain to their moral and juridical nature. Many of the problems with which you are presently concerned have equally been of concern to Us, and been made the subject of special discourses on Our part. Thus, on September 14, 1952, we spoke (at their request) to those who took part in the First International Congress on the Histopathology of the Nervous System on the moral limits of modern methods of research and treatment. Our remarks were linked to a study of the three principles from which medical science derives justification for such methods of research and treatment: the scientific interest of medicine, the interest of the patient, and that of the community – or, as it is commonly designated, the common good, the «*bonum commune*» (*Discorsi e Radiomessaggi*, vol. XIV, pp. 319-330). Again, in an address to the members of the Sixteenth International Congress of Military Medicine, We spoke of the basic principles of medical ethics and medical law, and discussed their origin, their nature, and their application (October 19, 1953, *ibid*, vol. XV, pp. 417-428). The Twenty-sixth Congress of the Italian Association of Urology, in turn, had asked us the widely discussed question: Is it morally permissible to remove a healthy organ in order to prevent the progress of a milady which jeopardizes human life? Our reply to this question was contained in an address delivered on October 8 of last year (*ibid*, vol. XV, pp. 373-375). And, finally, We had occasion to touch upon the questions which are of particular concern to you in the present Congress those relating to an ethical evaluation of modern warfare and its methods – in an address given on October 3, 1953, to those participating in the Sixth International Congress of Penal Law (*ibid*, vol. XV, pp. 337-353).

If, notwithstanding their importance and their scope, We do nothing more now than mention briefly some of these points, We do so with the hope that all previous discussion of such matters on Our part will be taken into consideration as supplementary material; moreover, in order not to prolong unduly Our remarks at this time, We shall cite such commentary in full in the form of footnotes when We refer to it.

That the doctor has both a particular and a privileged role to play in time of war is not to be denied. At no other time do so many human beings – soldiers and civilians, friends and foes alike – need to be cared for, and nursed back to health. The doctor must be given the unrestricted and natural right to intervene wherever his aid is so required, and this right should be guaranteed to him by international agreements. It would be an aberration of both the mind and the heart to deny medical assistance to a member of the enemy, and to permit him to die.

Now, does the doctor also have a role to play in the development, perfection, and extension of the means of modern warfare, and, in particular, those of A. B. C. warfare? This question cannot be answered before we have first resolved still another one: Is modern «all out warfare», especially A. B. C. warfare, permissible as a matter of principle? There can be no doubt, particularly in view of the untold horror and suffering induced by modern warfare, that to launch such war other than on just grounds (that is to say, without it being imposed upon one by an obvious, extremely serious,

and otherwise unavoidable violation of justice) would be an «offense» worthy of the most severe national and international sanctions. One cannot even in principle ask whether atomic, chemical, and bacteriological warfare is lawful other than when it is deemed absolutely necessary as a means of self-defence under the conditions previously stipulated. Even then, however, every possible effort must be made to avert it through international agreements or to place upon its use such distinct and rigid limitations as will guarantee that its effects will be confined to the strict demands of defence. Moreover, should the use of this method entail such an extension of the existing evil as would render man wholly incapable of controlling it, its use should be rejected as immoral. In such an instance it would no longer be a question of «defence» against injustice, and of the necessary «safeguarding» of legitimate possessions, but of the pure and simple annihilation of all human life within the radius of action. Under no circumstances is this to be permitted.

Let us come back to the doctor. If ever, within the framework of the limitations heretofore established, a modern war (A. B. C.) can be justified, and does, as a matter of fact, become justifiable, the question whether a doctor has the moral right to participate in such an enterprise can at that time be posed. You undoubtedly share Our preference, however, not to see a doctor engaged in such an occupation; there is too great a contrast between it and his basic duty, which is to aid and to cure, not to harm or to kill.

This will enable you to understand the meaning of, and justification for, what we have previously about the condemnation of war in general, and on the position and role of the doctor engaged in wartime service. (Notes 1 and 2)

According to the information you have communicated to us, you have added to the original program of this Congress the question of experimentation on living men.

The postwar trials of doctors have already made clear to us the extent to which this experimentation can be carried, and the abuses to which it can lead.

With regard to this subject, we shall take the liberty of referring you to a passage from one of Our earlier addresses. (Note 3)

That medical research and practice cannot dispense with all experimentation on living men is readily understood. The problem, however, is to determine the premises on which such experimentation should be conducted, as well as to determine also its limits, its basic motivating principles, and the impediments which lie in its way. In desperate cases when a patient is certain to die unless his case is given due attention, and there exists a remedy, a treatment, an operation which, without precluding all danger, nonetheless retains a certain possibility of success, a just and thoughtful person acknowledges without further discussion that a doctor may, with the explicit or tacit consent of the patient, proceed with application of the treatment. Research, life, and practice are not, however, limited to such cases; they both encompass them and go beyond them.

Even among sincere and conscientious doctors one hears the idea expressed that if we refuse to assume the risks involved in new procedures, if we refuse to try new methods, progress is impeded, if not altogether paralyzed. Especially in the field of surgery it is pointed out that many of the operations which today no longer entail particular danger have behind them a long past and period of trial – time which the doctor needed to study and put his knowledge into practice – and that a considerable number of fatalities were recorded while these procedures were still in an early stage of their development.

It is within your province as doctors to answer questions which have reference to medical premises, and to the methods which should be followed in experimentation on living men. The difficulty involved in examining these questions from a moral and juridical point of view seems, however, to make a few suggestions necessary.

We had occasion, in our address to doctors engaged in wartime service, to set forth briefly the main points to be followed with respect to this subject. (Note 4)

In order to deal with and resolve these problems, one has recourse as can be seen in the text cited to a series of moral principles of fundamental importance: the question of relationship between the individual and the community, that of the nature and limitations of the right to utilize the property of others, the question of premises and of extension of the principle of integrity, that of the relationship between the individual and social ends of man, and numerous others of kindred nature. Although these questions do not pertain to the field of medicine proper, medical science, like any other branch of human endeavor, should, nonetheless, grant them due consideration.

What pertains to the doctor with regard to his patient is equally applicable to the doctor with regard to himself. He is subject to the same broad moral and juridical principles as govern other men. He has no right, consequently, to permit scientific or practical experiments which entail serious injury, or which threaten to impair his health to be performed on his person; and to an even lesser extent is he authorized to attempt an operation of experimental nature which, according to authoritative opinion, could conceivably result in mutilation or suicide. This also applies, moreover, to male and female nurses, and to anyone who feels himself disposed to offer his person as a subject for therapeutic research. They cannot expose themselves to such experimentation. This basic prohibition has no bearing upon the personal motive of an individual who wilfully undergoes self-sacrifice and self-denial in order to help an invalid, nor does it have any bearing upon man's desire to collaborate in the interests of serious scientific study seeking to aid and serve humanity. If such were the case, an affirmative answer would be forthcoming automatically. In any profession, and particularly in those of medicine and nursing, there are always people who are prepared to devote themselves wholeheartedly to others and to the common good. We are not concerned here, however, with questions of such motivation and devotion. The question this time is basically that of disposing of a non-personal good without having the right to do so. Man is only the custodian, not the independent possessor and owner of his body, his life, and of all that the Creator has given to

him to make use of in accordance with the ends of nature. The fundamental principle «Only he who has the right to dispose is competent to exercise that right, and then solely within the limits which have been imposed upon him», is one of the oldest and most universal norms of action, to which spontaneous and sound judgment resolutely adheres, and without which the juridical order and that of man's everyday life in society would be impossible.

With respect to the question of removing a dead man's bodily parts to further therapeutic objectives, no doctor should be given the right to do with a corpse as he pleases. It is up to public authority to enact appropriate legislation regarding such matters. But public authority, on the other hand, does not have the right to proceed arbitrarily. There are certain provisions of the law to which it is possible to have serious objections. A norm, such as that which would permit a doctor in a sanatorium to remove parts of a body for therapeutic purposes — all thought of personal profit being duly forsworn cannot be honored because of the existent possibility that it might be interpreted too freely. Then, too, the rights and duties of those whose obligation it is to assume responsibility for the body of the deceased must also be taken into consideration. And, finally, the demands of natural morality, which forbid us to consider and treat the body of a human being merely as a thing, or as that of an animal, must at all times be dutifully respected.

Running through a list of the results which you have achieved over a period of seven years, We were particularly interested, as you can readily understand, to note there the preparation of an international code of medical ethics which has already been accepted by forty two countries.

To some, the creation of a uniform code of medical ethics may appear to be an ordinary accomplishment. The basic laws and characteristics of human nature are, no doubt, the same throughout the world; the goal of medical science, and consequently that of the conscientious doctor, is also the same: to aid, to cure, and to prevent disease, not to harm or to kill.

This being the case, then, there must be certain things which no doctor would do, that no doctor would tolerate, or would attempt to justify, but which he would, assuredly, condemn. And, likewise, there must also be things which no doctor would fail to do, things which, on the contrary, he would insist upon and put into execution. Such would be, if you wish, the doctor's code of honor and of duty.

In truth, however, medical ethics are still far from being uniform and complete throughout the world. There are relatively few principles which enjoy universal acceptance. But this relatively small number is in itself worthy of consideration, and should' be acclaimed proudly and positively as a point of departure for future development.

On the subject of medical ethics, We would like to propose for your consideration three basic ideas:

1. Medical ethics should be based upon being and nature.

This stems from the fact that, medical ethics should conform to the essence of human nature, and to its laws and immanent relations. All moral norms, including those which pertain to medical science, necessarily proceed from corresponding ontological principles. Whence comes the maxim: «Be what you are»! It is for this reason that a purely positivistic code of medical ethics is self-repudiating.

2. Medical ethics should conform to reason and finality, and should be based upon positive values.

Medical ethics do not find expression in things, but in men, in individuals, in doctors, in their minds, their personalities, and in their conception and recognition of values. For a doctor the problem of medical ethics manifests itself in the form of numerous questions which he must answer according to the dictates of his own conscience: «What does this norm of action entail? How can it be justified?» (That is to say, what ultimate goal does it pursue and set for itself ?) «What is its independent value, its value to man, and its value to society?» In other words: «With what is it concerned?» «Why? For what purpose? What is its worth?» Men of moral principle must not be superficial and, if they are so, they must not remain so.

3. Medical ethics should be rooted in the transcendental.

What man, in the final analysis, has established, he can also, in the final analysis, do away with; hence, if necessity or personal desire so dictate, man has the capacity to free himself from the end results of his own creation. Opposed to this, however, are the constancy of human nature, of its intended purpose and ultimate objectives, and the absolute and imprescriptible character of its moral demands. Indeed, these demands do not suggest: «If, as a doctor, you wish to judge wisely and do what is right, do this!» On the contrary, they make their presence felt in the depths of the individual conscience on an entirely different basis: «You should do what is right, whatever its cost! Hence, you should act in this way and in no other!» The absolute character of moral demands remains constant, whether man pays heed to them or not. Moral duty is not dependent upon the pleasure of man! He is only concerned with moral action. The absolute character of the moral order, a phenomenon to which men have always been able to attest, compels us to acknowledge that medical ethics are, in the final analysis, rooted in the transcendental, and subject to higher authority. In Our address to the Congress of Military Medicine, We had occasion to enlarge upon these considerations, and to speak of the forces which govern medical morality. (Note 5)

We would like to add a word on medical law, with which We have previously dealt in greater detail.

Fixed and clearly defined norms are needed to regulate the life of men living in a community, but

these norms should be no greater in number than is demanded by the common good. Moral norms, on the other hand, are much broader in scope, far more numerous, and in many respects – less precisely defined, in order to allow for the adaptation which is necessary to meet with the justified demand of particular cases. The doctor has a highly important role to play in private and community life by virtue of the profession which he practices. In society, he has need of broad juridical support; and, also, of personal security for himself and his medical activities. Society, on the other hand, seeks assurance with regard to the intelligence and competence of those who profess to be doctors and fulfill their functions. Now, all this points to the need for a national and, to the extent possible, international code of medical law. That is not to say that such a code should consist of detailed regulations established by law. On the contrary, the state should allow medical associations (national and international) as much freedom as possible in the drawing up of such statutes by granting to them the powers and sanctions which they need to accomplish their work. The state should play a broader supervisory role, grant ultimate sanctions, and assume full responsibility for the proper integration of the medical fraternity and its associations into the general structure of national life.

Medical ethics should find expression in medical law, at least to the extent that medical law should not contain principles which are inimical to medical ethics. On the basis of past experience, however, it is too much to hope that medical law will, in the foreseeable future, propose all that it should to satisfy the demands of natural ethics.

To summarize what has just been said: medical ethics are, fundamentally, based upon being, reason, and God; medical law depends, in addition, upon man.

We have singled out three topics for discussion from the many which are included on the program of your congress, and We have spoken briefly of war and peace, of experimentation on man, and of the efforts which have been made to draw up a world-wide code of medical ethics and of medical law.

In so doing, it has been Our aim to stimulate and to orient your own thinking, and to contribute, on Our part, to the fruitful advancement and deeper understanding of your

NOTES

NOTE 1

First among these is the crime of launching a modern war which is not dictated by the absolute demands of self-defence, and which, We can say without hesitation, would bring in its wake untold destruction, suffering, and horror. The nations of the world must be on their guard against unprincipled criminals who, in order to realize their ambitions plans, would not hesitate to start an all out war. It is for this reason that other nations, desirous of protecting their existence and prized possessions, and opposed to giving international criminals a free hand in world affairs, have no alternative but to prepare themselves for the day when they will be compelled to defend themselves. The right to arm in the interests of self-defense cannot be denied, even in our day, to any nation.

But this in no way alters the fact that an unjust war should be placed high on the list of the most serious crimes proscribed by international penal law, and should be made subject to the most severe penalties which can be brought to bear under its provisions ; nor does it alter the fact that those responsible for such a war should be without exception adjudged guilty and made liable to such punishment as has been previously prescribed. (*Nous croyons que*. Address to those participating in the Sixth International Congress of Penal Law, Oct. 3, 1953. In *Discorsi e Radiomessaggi*, vol. 15, p. 340-341. English translations in *Catholic Mind*, Feb. 1954; *Catholic Documents*, Feb. 1954; *National Catholic Almanac*, 1954; and *Irish Ecclesiastical Record*, July, 1954.- Ed.)

NOTE 2

This is a point of utmost importance as regards the doctor's position on war in general, and modern warfare in particular. The doctor is the enemy of war, and the promoter of peace. Just as he is ready to heal the wounds caused by war when they already exist, so, too, should he strive to prevent them as far as possible.

Mutual goodwill always permits one to avoid war as the ultimate means of settling disputes among nations. Just a few days ago, We again expressed the desire that any war not justified by the absolute necessity to defend oneself against a grave injustice affecting the community, and capable of being prevented only by granting a free hand in international relations to brutality and unscrupulous conduct, should be condemned on an international level. Therefore, defense against any injustice whatever is not sufficient reason for a nation to have recourse to the violent method of war. When the harm wrought by war is not comparable to that caused by «tolerating injustice,» one may be obliged to «suffer injustice».

What we have just said applies in particular to A.B.C. warfare: atomic, biological, and chemical. The question whether such a method may become necessary in order to defend oneself against an A.B.C. war cannot be discussed here. The answer may be deduced from the same principles which are decisive today for permitting war in general. In any case, another question takes precedence: Is it not possible by international agreements to outlaw and to avoid an A.B.C. war?

After the horrors of two world wars there is no reason for us to remind you that any glorification of war to be condemned as an aberration of the mind and heart. To be sure, courage and bravery to the extent of sacrificing life itself, when duty so demands, are great virtues; but to wish to provoke war because it inspires in men great virtues and affords them an opportunity to exhibit them, should be adjudged criminal and insane.

What we have said will help us to answer that other question: May the doctor place his knowledge and professional skill at the service of A.B.C. warfare? He can never abet «injustice», even in the service of his own country; and when this type of war constitutes an injustice, the doctor may not collaborate in it. (*Arrivés au terme*. Address to the members of the 16th International Congress of Military Medicine, *Discorsi e Radiomessaggi*, vol. 15, p. 421-22. English tr. in *Catholic Mind*, Jan. 1954 and in *Catholic Documents*, Sept. 1954.-Ed.)

NOTE 3

We must for the third time, however, ask ourselves the question: Is no moral limit to be imposed upon the nature and extent of what may be done in the name of the «medical interests of the community»? Are doctors to be granted «complete freedom of action» in all serious medical cases involving living men? Does this particular interest remove, moreover, those barriers which proved to be legitimate when applied to the interests of science or the individual? In other words: can public authority, on which rests responsibility for the common good, give a doctor, in the interests of science and the community, the power to conduct on an individual experiments aimed at determining and proving new methods and procedures, when such experiments are in violation of the individual's right to dispose of his own person? In the interests of the community, can public authority actually limit or suppress the privileges which an individual enjoys with regard to his body and his life, his bodily and psychological integrity?

To forestall a possible objection, We would like to make it clear that We are speaking here of serious research, of honest efforts to promote the theory and the practice of medicine, and not of some manoeuvre serving as a scientific pretext to mask other objectives and to attain them with impunity.

Many people have believed in the past, and they continue to believe in the present, that an affirmative answer should be given to the questions which have been asked above. To support their opinion, they cite the fact that the individual is a subordinate of the community, that the good of the individual should give way to the common good, and should, in fact, be sacrificed to it. They further state that the sacrifice of an individual for the purposes of research and scientific investigation works, in the long run, to the advantage of the individual.

The great trials which took place after the last war brought to light a terrifying number of documents attesting to the sacrifice of an individual to the «medical interests of the community». In the official records of those trials one can read testimony and reports which show how, with the consent and, at times, even under the formal order, of public authority, certain research centers systematically demanded to be furnished with human beings drawn from concentration camps to serve as the subjects for their medical experiments. There, too, one finds evidence of the manner in which these people were delivered to such centers: so many men, so many women, so many for one experiment, so many for another. There are reports on the conduct and the results of such experiments, of the objective and subjective symptoms of those observed during the different phases of the experimentation. It is impossible to read these accounts without feeling profound compassion for the victims, many of whom went courageously to their deaths undeterred by thoughts of such an aberration of the human mind and heart. But we can also add that those responsible: for these atrocities did nothing more than reply in the affirmative to the questions which We have posed, and reap the practical consequences of that affirmation.

Is the interest of the individual to be subordinated to the medical interests of the community to this extent – or, is there in this instance a breach, perhaps in good faith, of the most elementary demands of nature law, a breach which is not permissible for any medical objective whatsoever?

One would have to close one's eyes to reality to believe that there no longer exists in the medical world of today anyone who would uphold and defend the ideas which gave rise to the facts which we have cited. One has only for a short time to keep abreast of the latest reports on medical tests and experiments to convince oneself of the contrary. Involuntarily one wonders what has authorized, and what ever could authorize, any doctor to dare to undertake such an experiment. With calm objectivity, the experiment is described in all its stages and effects; notation is made of that which is verified, and of that which is not verified. But not one word is said about its moral legality. And, yet, this question exists, and one cannot suppress it by passing over it in silence.

To the extent that moral justification for experimentation in the aforementioned cases rests upon the mandate of public authority, and consequently upon subordination of the individual to the community, of the individual's welfare to social welfare, it is based upon an erroneous explanation of the principle involved. Careful attention should be paid to the fact that man in his personal being does not, in the final analysis, exist for society; on the contrary, the community exists for man.

The community is the means by which God and nature have intended to regulate the exchange of mutual needs and to aid each man to develop his personality fully in accordance with his individual and social abilities. Considered as a whole, the community is not a physical unity subsisting in itself, and its individual members are not integral parts of it. The physical organism of living beings, of plants, of animals, or of man does, when considered as a whole, have a unity subsisting in itself. Each of the members – as, for example, the hand, the foot, the heart, and the eye is an integral part, destined in every respect to be incorporated in the whole organism. Independent of the organism, it has, by its very nature, no meaning, no finality; it is entirely absorbed by the totality of the organism to which it is attached.

In the moral community, and in every organism of a purely moral character, it is an entirely different story. Here the whole has no unity subsisting in itself, but a simple unity of finality and action. Within the community, individuals are merely collaborators and instruments for the realization of the common end.

Now, what effect does all this have upon the physical organism? The master and beneficiary of this organism, which possesses a subsisting unity, has the right to dispose directly and immediately of its integral parts, members and organs, in keeping with their natural finality. He can also permit its members to be paralyzed, destroyed, mutilated, or separated as often as, and to the extent that, the good of the whole demands it. Such is not the case, however, when the whole possesses only a 'unity of finality and action. White the head of this whole – that is to say, in the present instance, public authority – undoubtedly has the right to make demands upon the activities of its parts as a direct outgrowth of the immediate supervisory power which it enjoys, it can in no case dispose directly of its physical being. Indeed, every direct attempt upon its essence constitutes an abuse of the power of authority. (*Ce Premier Congrès. Address to the First International Congress on the Histopathology of the Nervous System, Sept. 14 1952. In Discorsi e Radiomessaggi, vol. 14, p. 325-28. English tr. in Catholic Mind, May 1953, Irish Ecclesiastical Record, Mar. 1954; Linacre Quarterly, Nov. 1952.- Ed.*)

NOTE 4

... decisions made by doctors are justified if the best interests of science, the patient, and the common good are served. We have already dealt with the question of science. As for that concerning the patient, the doctor has the right to intervene only to the extent that the patient permits him to do so. The patient, the individual himself, has the right to dispose of his person, the integrity of his body, individual organs and their capacity to function, only to the extent that the general wellbeing of the whole organism demands it.

This is the key to the question with which you have been concerned: May the doctor apply a dangerous remedy, initiate steps probably, or certainly fatal, solely because the patient wishes it or consents to it? And it also helps us to answer the question which is particularly applicable to the doctor working just behind the front or at the military hospital: May he, in case of unbearable or incurable pain, or of grievous wounds, administer upon the expressed request of the patient injections which are tantamount to euthanasia?

In the interests of the community, the state has – in general – no right to dispose of the lives of innocent subjects, or to interfere with the integrity of their organs. We are not concerned here with the questions of corporal or capital punishment, since we are speaking of the doctor and not of the executioner. As the state does not possess the aforementioned right, then, it cannot possibly delegate it to the doctor. The political community is not a physical being like the body, but a whole which possesses only unity of finality and action; man does not exist for the state, but the state for man. He has the right to dispose at will of non rational beings, plants or animals (which does not free him of the obligation that he has before God, and in keeping with his own dignity, to avoid unnecessary brutality and cruelty), but he does not possess this right over other men or subordinates.

This furnishes the doctor engaged in wartime service with sound moral advice which, without relieving him of the responsibility of a decision, can help to guard him against errors of judgment, by providing him with a clear and objective norm. (*Arrivés au terme. loc. cit., vol. 15, p. 420-21. See end of Note 2 for locations of English translations - Ed.*)

NOTE 5

The ultimate authority is the Creator himself God. We would not do justice to the fundamental principles of your program, and to the consequences which they imply, were we to consider (them solely as human demands, as humanitarian ends. This, they most definitely are; but they are essentially something more. The ultimate source from which they derive their power and their dignity is the Creator of human nature. If it were a question of principles formulated by the will of man alone, one would be under no greater obligation to honor them than to honor men. They could be applied today, and discarded tomorrow; one country might accept them, and another reject them. When they are considered in the light of the Creator's authority, however, the whole complexion of the program changes. And the basic principles of medical ethics are a part of the divine law. It is for this reason that the doctor may place unlimited confidence in these fundamentals of medical ethics. (ibid, vol XV, pp 422-423).

**The Pope Speaks*, vol.1, n°4 p.347-359.

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