In the second part of the book, the author shifts his attention to contemporary trends in philosophy and theology. The third chapter, “On the Impropriety of Treating Theology’s Handmaiden like an Analytic,” the author examines the preponderance of analytic philosophy in Anglo-American faculties. If nature only receives ontological intelligibility with grace, then it belongs to theology alone to provide a real understanding of nature. Philosophy, then, is not only degraded from her traditional status as theology’s handmaiden, but is also deprived of her sapiential nature, reducing her to an instrument of logic susceptible to as many uses as there are philosophers. The fourth chapter, “Why Natura Pura Is Not the Theological Stalking Horse for Secularist Minimalism or Pelagianism,” sees the author responding to a criticism of the doctrine of natura pura, namely, if created nature were intelligible in itself without reference to grace, then the necessity of grace is undermined. Engaging the thought of Jacques Maritain, Jean Porter, and David Schindler, the author demonstrates both that a doctrine of natura pura does not undercut the necessity of grace and that a healthy public culture relies on an approbation of the praecambula fidei and the truths of natural law, two doctrines that rely on the intelligibility of nature per se.

The present volume marks a real contribution to Thomistic studies and philosophical theology. Long’s intelligence, close treatment of Aquinas’s texts, and illustrative examples make this a useful text for all those interested in moral theology, grace, and Thomism. This handsome volume, put together as part of Fordham University Press’s Moral Philosophy and Moral Theology series, constitutes a necessary tool for understanding the mind of Aquinas on the doctrine of grace in relation to more modern theologians. Long’s text takes on difficult topics, but it will prove useful for both advanced undergraduates and graduate students. University libraries with a philosophy or theology section require this book.

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The Cancer Experience: The Doctor, the Patient, the Journey
by Roy B. Sessions


Roy B. Sessions, MD, a distinguished retired otorhinolaryngologist and current professor of otorhinolaryngology at the Medical University of South Carolina, has written a book whose title suggests a focused analysis of the disease of cancer and the challenges faced by patients and physicians contending with its often harsh existential reality. As such, it may recall other books offering insights into the medical profession and physician culture, such as How Doctors Think, by Jerome Groopman, MD (Boston: Houghton Mifflin, 2007), which is directly intended to assist patients who are negotiating their treatments and hope to improve both their experience and outcome.

A cancer patient might be surprised to discover here a work that is far less specific to this end, one that instead surveys an extremely broad array of important social, cultural, and bioethical topics. The author’s
main focus is not the patient or the doctor, and certainly not the cancer journey. Rather, Dr. Sessions attempts to situate the medical profession amidst the current cultural landscape, which is diverse and, by nature, deconstructive. In doing so he puts forth an apologia for the profession, referring to its unique and former importance in order to re-establish and renew its relevance to patients and to society.

Dr. Sessions discusses his background, including the historical influence of his great-great-grandfather, Samuel G. Compton, a surgeon in the Army of Virginia during the Civil War. Early in the book he addresses his reasons for writing it, at times using patients’ stories to illustrate points. He sees an opportunity, based on his forty years of work, to defend the profession for which he obviously has great affection. His quest is to empower those in the profession—which he views as a “singular profession” and a vocation—both by encouraging the personal commitment of individual physicians and by demanding respect from society.

The author sees the work of physicians as a “higher calling,” and derides those in the profession whose work and lifestyles diminish this (9). He urges the public to contain their contempt for these physicians and to think positively about the profession as a whole (47). He also defends the medical profession against those “thoughtless and shortsighted people who seek to make doctors less than special” (9). He expresses resistance to those forces in society—“the absurd bureaucratic demons”—who seek to minimize the great mission of the medical profession (that is, the improvement of the human condition) and to make physicians no more or less important than “other public servants” (183).

Believing that the “high-minded ethics” and moral codes of the past are adaptable in the present, Dr. Sessions writes that the profession should stand for what is good and should follow a code that “recognizes that right is always right, and wrong is never right” (50). He affirms that physicians must be held personally to a higher level of morality and must strike a balance between high ideals of behavior and self-interest (51). On this basis he wishes to make the medical profession the standard-bearer and arbiter of bioethics. He goes on to say that physicians are “well-meaning public servants who intuitively behave in a moral and professional manner…in sync with the idealism of most of the original mission statement of the Hippocratic Oath” (46). However, he fails to address the lamentable fact that the Hippocratic Oath and its prohibitions on abortion and euthanasia have been almost universally rejected by most medical schools. Modern physicians have widely divergent opinions on the morality of these and other ethical dilemmas. In this current milieu, Dr. Sessions’ aim of restoring medical professionalism to a rarefied state of public service realistically would not provide answers to the ethical challenges facing patients, those with cancer or not, and, in particular, faith-based patients and their physicians.

There is no doubt that this highly respected surgeon is compassionate and deeply committed to excellent patient care. He came to realize that it was a “gift to have the opportunity to interface with cancer patients and to reap the rewards of success—not by always conquering the disease…but by finding the human connection that helps guide and support patients in their time of extreme need” (17–18). A restoration of medical professionalism on the personal level certainly will help restore the faith that patients want to have in their doctors for their own care. However, the larger questions regarding those complex ethical issues facing doctors, patients, and society are not so readily addressed or answered by the solution he proposes, that is, a renewal of professionalism based on a model of altruism, public service, and former codes of ethics (182, 183).

Dr. Sessions advocates for “reliance on the ethics and values of our [physician] forefathers” to influence present and future physicians and to recapture the relevance of the medical profession in a diverse and changing world (183, 184). However, his stories reveal that his underlying approach to ethical analysis is to appeal to a utilitarian worldview and not to absolute moral principles or norms, such as those that are foundational to Catholic patients and physicians.
such as the sanctity of all human life from conception to natural death and the inherent dignity of all human persons. Christians—and others of various faith traditions that espouse objective norms—may thus find his appeals, although pragmatic and at times notably compassionate, quite troubling in the end. Flannery O’Connor reminded us that true compassion can only exist where the objective source of compassion is acknowledged—Jesus Christ himself. Without this, horrible acts may be committed in the name of compassion. The decency of individual physicians, if not guided by objective norms, can never be counted on to ensure against assaults on human life.

The author tells a story from early in his career. A pregnant woman and her husband were referred to him by their obstetrician because the wife had a large thyroid mass. She was thirty-five years old and had had a prior miscarriage. The couple’s joy in the pregnancy quickly turned to sadness when Dr. Sessions strongly recommended a therapeutic abortion. (The Catholic Church teaches that direct abortion is never morally permissible, making no distinction between therapeutic abortion and abortion for reasons of convenience. In both cases there is a direct attack on the unborn child and, in therapeutic abortion, the death of the child is the intended “therapy.”) This mother, who was clearly disposed to allow her child to be born, was also terribly anxious about her own health, and consequently followed the doctor’s advice. After having the abortion, the woman returned for a thyroidectomy and possible radiation therapy. The patient’s biopsy showed that the tumor had not been extremely aggressive, and her condition had not been causing imminent harm to her or to their unborn child. The surgery could have waited until later in the pregnancy, when it posed no threat to the child, and radiation therapy could have waited until after the birth.

It is ironic that in the same chapter Dr. Sessions writes, “Be careful what you recommend to people, they may do it. And once it is done, you own part of the consequences” (57). He admitted postoperatively that he “overreacted to a low-risk cancer.” And he blames himself, but not for the assault on the innocent human life in utero, but rather for failing the patient and her husband by subverting patient autonomy (58, my emphasis).

In the discussion that follows, Dr. Sessions affirms that life begins at conception and that abortion is the taking of a life. He refers to Catholic doctrine on the sanctity of human life and discusses the principle of double effect, but his own moral reasoning uses a much different process—one not encumbered by objective moral reality. He warns physicians (and others) of the danger of becoming increasingly desensitized to abortion and other assaults on human life (like euthanasia and capital punishment) but concludes that “there is no generic right or wrong” (64), except, perhaps, for the wrong of assaulting the secular principle of autonomy.

His discussion and moral conclusions concerning physician-assisted suicide and euthanasia are consonant with Catholic teaching but for different reasons, which reflect a pragmatic and utilitarian approach. He strongly opposes physician involvement in inducing patient death. His principle defense is based not on the sanctity of human life but on the certainty of the slippery slope and the resulting desensitization of physicians to the act of killing. Such acts by physicians and non-physicians (as assisted suicide is practiced in places like Switzerland) encourage what he calls “mischief of the worst kind” (79).

Although Dr. Sessions does not believe in original sin (he oddly inserts this claim here), his conclusion is based on a lack of confidence in the inherent goodness of human beings. Also, here he refers back to the traditional moral code of the profession, the guiding ethos for physicians, to cure and to care but never to kill. Physicians who kill lose the respect and trust of their patients, to the detriment of their future counsel. The sanctity of all human life and the prohibition on killing innocent persons, objective moral norms for Christians and others, play no role in his moral calculus.

Dr. Sessions’ motive for writing this book was a desire to “immortalize some of my
practical wisdom” (12). Interestingly, the late, eminent Catholic bioethicist, Edmund D. Pellegrino, MD, provides the foreword and extols the author’s attempt to recast the role of the profession, rooting it in both the technical competence and moral commitment of physicians. As a physician, I appreciate his efforts to restore the respect and, in some ways, the beneficent authority that the profession has lost over time. The doctor–patient relationship, for one, would benefit from a more open, shared-decision-making style that avoids the earlier paternalistic approach or the more recent corrective (or perhaps reactive) information-overload model.

The author goes beyond this, however, and attempts to reclaim a grander role for the profession, as a type of centralized moral gatekeeper informed by an ill-defined traditional ethic, a reinterpretation of ancient codes that guide physicians as they, in turn, guide their patients and the culture. He champions the restoration of a modern medical professionalism because he believes the physician is a kind of super public servant and, as such, is best suited and trained to mediate both individual health care and those attendant bioethical problems posed by such issues as abortion and euthanasia.

Dr. Sessions bestows far too much authority on the medical profession to set the “standards by which all these questions are answered”—the same “medical profession that understands and advocates what is right as opposed to what is wrong” (13). In this, the problem resounds, as no single secular professional code of medical ethics appeals to all physicians and patients, least of all to those whose faith is in Jesus Christ, who is the truth and the objective foundation of Catholic ethics.

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Love and the Dignity of Human Life: On Nature and Natural Law by Robert Spaemann

William B. Eerdmans, 2012, paperback, $12

German philosopher Robert Spaemann’s thought has received increasing attention as his major works have made their way to an English-speaking readership. His books include Basic Moral Concepts (1989), Happiness and Benevolence (2000), and Persons: The Difference between “Someone” and “Something” (2006). More recently, two shorter works have become available: his Essays in Anthropology: Variations on a Theme (2010) and Love and the Dignity of Human Life: On Nature and Natural Law (2012). This last work provides readers with an excellent and approachable introduction to several themes that have characterized Spaemann’s work over several decades.

Born in 1927, Spaemann completed his doctorate in philosophy in 1952 at the University of Münster. From 1969 to 1973, he taught at the University of Heidelberg and then, until his retirement in 1992, as a member of the Faculty of Philosophy at the University of Munich. His writings cover a broad range of topics, from the thought of Restoration France and reflections on Fénelon and Bossuet, to Rousseau, politics, ethics, and the nature of personhood. Broadly speaking, his work can be viewed as an extended reflection on the nature of modernity and its consequences for the human person.

In 2010, Spaemann gave the McGivney Lectures of the Pontifical John Paul II Institute.