

## ***A MORAL PHILOSOPHICAL BASIS FOR BIOETHICS***

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Once, after speaking on informed/substitute consent, a pediatrician told me: "Father, I decide on behalf of the parents, because I know better." On another occasion, a physician said to me: "Father, I love my patients so much that I carry out their requests." How do we evaluate the actions of these two physicians? What will be the bases for our ethical judgment? I hope we shall be able to answer those questions properly after reflecting on the topic "A Moral Philosophical Basis for Bioethics."

From the Philippines and in a global perspective, I plan to develop the theme in four parts. First, I shall speak on bioethics and its possible groundings; second, on the most radical philosophical foundation of bioethics, namely, the human person, his/her dignity and rights; third, on the radical principle of ethics and bioethics, that is, the principle of respect for human beings, and fourth, on the intrinsic ethical principles, namely, virtues.

### **1. BIOETHICS AND ITS FOUNDATIONS**

*"The purpose of ethics is to make people good, that is, virtuous"*  
(P. Kreeft)

*What is bioethics?* **Bioethics is a kind of ethics**, concretely of professional ethics, and like any kind of ethics, it is grounded on the nature of the human person, who is an ethical being, that is, a free and responsible being who can do good and evil acts, but ought to do good acts, which help him/her become what he/she is as a human person in relation with others. The primary principle of natural moral law – of being human – is, as formulated by St. Thomas Aquinas, "the good is to be done and pursued; the bad is to be avoided."

**Ethics** or morals is the study of the conduct of the human person as an ethical being, based on human nature and developed by human reason. It is, then, "the science of right and wrong conduct, praise or blameworthy behavior"

(Paul Ramsey). With moralist Marc Oraison, we may define ethics as *"the science of what man ought to be by reason of what he is."* Morals is a science (systematic reflection), a normative science, of what man ought to be (man is an unfinished project, a becoming), by reason of what he is (a rational being, an autonomous and relational animal, a creature of God). Pindar wrote: "Become what you are." Interesting point: "Man is the only creature capable of not wanting to be what he is" (A. Camus). Ethics is, indeed, the science of human praxis, of correct human doing.<sup>1</sup>

Etymologically, **Bioethics** (*bios*: life; *ethics*: ethics) means **life-ethics**, or ethics of the life sciences. It refers mainly not to a technical science (biology), but to a normative science (ethics) that studies ethical principles, values and virtues, norms and practices concerning biomedical interventions on all life, above all, human life. Bioethics studies and promotes human life at its beginning, its end – and in between.

Substantially, bioethics is not "a fundamentally new ethics, but the application of ethics and its basic principles to the new possibilities open up to us by modern biology and biotechnology with regard to human life."<sup>2</sup> And yet, bioethics, while including medical ethics, goes beyond it to encompassing social and environmental ethics, and focusing on scientific ethics. It takes into account, too, the legal dimension of social life; unfortunately, what is legal may not be moral!

Bioethics is divided into **general** or theoretical ethics, that analyzes principles, virtues, norms; and **special** or practical ethics, which considers clinical cases in ethical perspective, that is, it applies principles to particular cases. Practical or clinical ethics pre-requires theoretical or basic ethics: every practice demands a theory, a principle, a foundation.

**Foundations** of bioethics may be purely philosophical, or philosophical / theological. While philosophical foundations are constructed by reason, philosophical / theological (such as Catholic bioethics), by reason and faith, which are like the two wings of human reflection and contemplation.

There are different philosophies and, therefore, different foundations for bioethics. Among the *different philosophical approaches to bioethics*, we have bioethics of **principles**, bioethics of **virtues**, bioethics of **duties**, bioethics of **cases** (casuistry) and also bioethics of **caring**. Among the theories of ethics studied today we mention the following: *Natural law ethics* (of the natural moral

law of reason, of being human), *teleologism* (goal-based ethics), *deontologism* (duty based ethics), *utilitarianism* (consequence-based ethics), *proportionalism* (based on proportion between good and evil in human actions), *liberal individualism* (freedom-based ethics), and *communitarianism* (community-based ethics). For us, the most convincing approach or theory is integral *personalism*, which, based on the natural moral law, combines virtue ethic with an ethics of principles and virtues. Both are based on the foundations of the human person as an ethical and theological being.

No ethical theory or approach is perfect, and not one of them should be made the exclusive approach. The various approaches fertilize each other, although we evaluate them with different moral density. **Principles and cases** interact with each other; **virtues and caring** perfect one another, and, above all, **principles and virtues** give us a good system to approach ethics and be ethical. In fundamental or general bioethics, as well as in professional ethics, the two approaches that seem to stand out are the principle-based and the virtue-based bioethics.

There are, then, different ethical theories or systems to approach bioethical issues and make proper ethical decisions. Trying not to get too entangled in the forest of ethical theories, we prefer with many others to focus our attention on **the human person as the most radical criterion** to ground principles and virtues, to solve clinical cases, and to encourage ethical practice. (Of course, there are other basic moral categories that qualify our actions as good or evil, and help us become flourishing human beings, namely, the *sources of morality* (the object, the circumstances – including the consequences -, and the end) and the *norms of morality*: law and conscience.)

The human person is the basic foundation of all kinds of bioethics, philosophical as well as theological. The basic questions of any kind of ethics are: *Who am I? What must I do to become more human?* A good bioethics is grounded on a good anthropology.

The human person is always on the **process of becoming** more what he or she is, that is, a person. The great Chinese philosopher Confucius explained this beautifully: the human person is a perpetual moral project; he walks towards perfection through the constant performance of his duties. His disciple Mencius explained further that with regard to human nature we distinguish two things: *what is given* and *what is yet to become*. With what is given to us (nature), we can become better and better in a given cultural and historical situation.

On our way to become more what we are, there is always a threatening obstacle: our **selfishness**. Writes Iris Murdoch: "In the moral life the enemy is the fat relentless ego. Moral philosophy is properly, and in the past has sometimes been, the discussion of this ego and of the techniques (if any) for its defeat. In this respect, moral philosophy has shared some aims with religion. To say this is of course also to deny that moral philosophy should aim at being neutral."<sup>3</sup>

## 2. BASIC FOUNDATION OF BIOETHICS: THE HUMAN PERSON

*"You have made him little less than a god"*  
(Ps 8:5).

Philosopher Ortega y Gasset wrote: "If God became man, to be man is the greatest thing that man can be." *What is the human person?* The human person is many things to many people: a "rational and political animal" (Aristotle), "a reed that thinks" (Pascal), "libido" (Freud), "an economic animal" (Marx), "a useless passion" (Sartre), "*animale utopicum*", or utopian animal (E. Bloch), a loving being, "*ens amans*" (M. Scheler), dust, but "dust in love," or "*polvo enamorado*" (Quevedo). Created in the image and likeness of God, the human person is a creature and a child of God destined to eternal life (Jesus Christ).

Man or woman is many things to many people, because he or she is a complex reality (body and soul), a unique reality (individual and person), a mystery! The human being is, in a manner of speaking only, many things to many people, because he or she is *not a thing*: not something, but someone, not an object but a subject. We do not ask, *what is the person?* But *who is the person?*

The human being is **union of body and soul** (soul: spiritual and immortal). He or she is body-soul, one corporeal-spiritual whole, an embodied spirit, a sexualized individual. The human person is "one in body and soul," the body is the matter, and the soul is the form that informs and animates the body.<sup>4</sup>

The human person is an **individual**, self-subsistent substance. He/she is indivisible and different from any other human being: an unrepeatable human being with a unique genetic make-up or code (DNA: DeoxyriboNucleic Acid). As an individual, the human being is, then, an *autonomous being*.

Moreover, the human person is not merely an individual, but an individual of a rational nature, that is, a unique individual, a **person**: "*Omne individuum rationalis naturae dicitur persona*" (every individual of rational nature is called

person), in the words of St. Thomas Aquinas. Because the human being is a person he or she possesses equal ontological dignity. Every human being is "a person, that is, possessing intelligence and freedom" (John XXIII). With reason to understand the world and will to direct himself to true good, the perfection of the human person is found "in the search and the love of the truth and the good" (CCC).<sup>5</sup>

As a human person, he/she is **relational**: the human being is open to himself or herself, and to others; he/she is "self-presence-in-relation." This openness implies, as Marciano Vidal points out, interiority and relationship: *interiority*, that is, self-consciousness (intelligence) and self-possession (will and freedom); *relationship*, that is, open to others (to God, to other human beings, and to creation). As a *relational animal*, the human person is a religious, rational, social and ecological being. Hence, he/she is a *heteronomous being*, too.<sup>6</sup>

As a relational being, the human person is *intersubjectivity*, community, love: "To be a human being is to be a fellow human being (M. Buber); "I only exist in the measure I exist for others, for, after all, to be is to love" (E. Mounier).

The human being, then, is also relationship to another human being - a he or a she, or, better, a *thou*. A *thou* is not a thing, nor a nobody, nor an enemy, but an equal human being, a companion, a neighbor, another I. In Christian perspective, the other is a brother or sister: not merely a he or a she (relationship of justice) but a *thou* (relationship of love), also created by God (the Eternal Thou), redeemed by Christ, and constantly renewed by the Holy Spirit. He/she is a pilgrim on the way to heaven, to eternal happiness with God. The human person, then, is also a *theological being*.

The human person is a **social being**, and only as such can he/she attain self-realization (cf. Gen 1:27). As humans and as Christians, we are against *individualism*, which exalts unduly the individual person and personal freedom, and against *collectivism*, in which the individual is lost.

The human person is an **ecological being**: he/she is a member of the biotic community, a creature of the universe. As free and responsible beings, he and she ought to cultivate and care for the earth (Gen 1:28); in religious perspective they are stewards of God, not destroyers or exploiters of the environment. Unfortunately some of us – or many – are damaging the environment because we are not its responsible administrators: "Moral garbage is the cause of ecological garbage" (Fulton Sheen).

The definition or description of the human person is most important and relevant: **the person is the radical criterion of all morality**, including bioethics. *Is the embryo a human person? Is the human being in a persistent vegetative state (PVS) a true human person?*

Medicine then is not only a science but also an ethics: it applies "the knowledge obtained from science and ethics to the alleviation of suffering or the cure or prevention of human illness" (Edmund Pellegrino). Being a good physician entails being a moral physician. And being a moral physician requires respect for the human person. According to Pope Benedict XVI (January 31, 2008), the two fundamental criteria in the field of bioethics are "unconditional respect for the human being as a person from conception to natural death, and respect for the origin of the transmission of human life through the acts of the spouses." *Why embryonic stem cell research and in vitro fertilization (IVF) are immoral? Why natural family planning, assisted procreation and allowing to die may be ethical?*

Our being is described as an individual and a person. But all descriptions of the human person are incomplete: *Who can really know himself/herself fully and the other as well?* Indeed the human being is also a **mystery**. It is really difficult – impossible – to know a person fully. Philosopher Baltasar Gracian wrote: "If you have seen a lion, you have seen all lions. If you have seen a sheep, you have seen all sheep. But if you have seen a man, you have seen one man only, and even this one not well-known."<sup>7</sup>

The human person possesses unique dignity, which – as Kant says – has no price but value. *What is human dignity?* **Human dignity** is related to goodness, nobility, excellence, and perfection. It may be described as "an objective excellence that indicates objective meaning and value in comparison to all other created things."<sup>8</sup> The characteristics that speak of the excellence of human dignity are intelligence, freedom and love; liberty, equality, fraternity.

**Human dignity is essentially equal in all humans.** No matter how miserable a human being has become, he or she will always have the essential, intrinsic dignity of a human being. A text to ponder: "No man is deprived of dignity. All human existence – applauded or cursed, triumphant or beaten, happy or unhappy, generous or greedy – represents the entrance in history of a radical newness, the presence of an excellence of being superior to any other observable being."<sup>9</sup>

All human beings are equal in ontological dignity, including in particular those who cannot exercise their rationality. In fact, these human beings are to be accepted and recognized by others with special love – with a preferential love. In Christian perspective, this **preferential love for the poor** applies most especially to those human beings who are really weak and unable to defend themselves: the unborn and born children, women in many places, the mentally incapacitated, the elderly, the marginalized – “the little ones” of Jesus –, who are to be loved with preferential love (cf. Mt 25:31-46).

The human person possesses human dignity. Human dignity means the possession of human rights. **Human rights** are understood as *the rights of the human being by the mere fact that he or she is a human being*.

The **essential characteristics** of human rights are the following: (1) Human rights are universal: all human beings have them; (2) Human rights can neither be acquired nor lost: “They are innate rights that only disappear with the death of the person”; (3) Human rights do not admit degrees: those who possess them – all human beings – possess them in the same degree.<sup>10</sup>

Among human rights, the **right to life** is fundamental, for it is a condition to the exercise of the other rights. A consistent life-ethic defends the right to life from the moment of conception to natural death. Connected with the right to life are the **rights to bodily integrity** (the body is essential part of the person, body-soul, and not to be treated as a commodity, as in the case of organ trafficking), and **to adequate health care** (at least, basic health care for all.)

In bioethics, when speaking of human rights, we also talk of the **rights of patients**, which have to be respected in particular by health care professionals. Important patients’ rights are the following: right to adequate information, right to refuse treatment (hopefully useless or too burdensome treatment only), right to privacy, right to hospital records and right to voluntary participation in research.<sup>11</sup>

Human rights are necessarily related to **duties**. Rights and duties are co-relative. As Pope John XXIII says in *Pacem in Terris*: “To one man’s right there corresponds a duty in all other persons; the duty, namely, of acknowledging and respecting the right in question.”

### 3. BASIC ETHICAL PRINCIPLE: RESPECT FOR PERSONS

*"To be is to love"*  
(E. Mounier)

*What does it mean to respect persons?* The word "respect" is a translation of the Latin word *respectus*, which is connected with the verb *respicere* that means, "to look again," "to look attentively and intensely." Respect evokes reverence, esteem, and recognition.

*Why do we have to respect persons?* We have to **respect persons** because they are persons, that is, because they possess inner worth, incomparable value, unique and equal *human dignity* and *rights*; because, as Vatican II says, the human person stands above all things and has rights that are universal and inviolable. Truly, as Seneca said, *homo res sacra homini*, the human person is a sacred reality to the human person, hence deserving special reverence. St. Thomas pointed out, in line with the Psalmist's prayer (*Ps* 8:5): God has made him "little less than a god."<sup>12</sup> As it has been repeatedly said, men and women are to be respected, not by reason of what they have, not mainly by reason of what they do, but by reason of what they are, namely, human persons!

In ethical perspective, then, human persons must be treated as subjects and not as objects, as ends and not as means, as he or she (better, as thou), and not as it. Some ethicists express the principle of respect for persons through Kant's categorical imperative: "Act in such a way that you always take humanity, in yourself as well as in every person, as an end and never as a means."

In religious and Christian perspective, every human being is to be revered, respected because he or she is **a creature and a child of God**, a co-creator with God and under God, a free and responsible human being, that is, free to do good – to love.

We could formulate the first bioethical principle, the **principle of respect for persons**, thus: "*The human person ought to be respected always.*" It is important to note that the ethical principle of respect for persons is mediated by and connected with other ethical principles, namely, justice and solidarity, autonomy and stewardship, informed/proxy consent, truth telling and confidentiality, nonmaleficence and beneficence, double effect and cooperation.

The principle of **justice** could be formulated, in general, thus: "Give to each person his or her due, that is, his or her rights." In particular: "Equal cases are to be given equal treatment, without any discrimination." The principle of



justice is perfected in the principle of **solidarity**: "Love all persons, members of the human family, principally the most proximate and the neediest."

The bioethical principle of justice is further mediated by the principle of **autonomy**, or respect for self-governance. Autonomy, however, is not absolute. It is ethically limited by two other principles: the principles of stewardship and solidarity. **Stewardship** of life implies the use of ordinary or proportionate means of treatment, means that are beneficial and not too burdensome for the patient.

The principle of autonomy is carried out through the principle of **informed/proxy consent**: "Inform patients properly." Hence, three things are required by this principle: first, adequate information to be given by the physician; second, proper comprehension by the patient; third, real freedom of the patient (or surrogates) to decide on the kind of medical or surgical treatment to be pursued.

The principle of free consent is connected with the principle of **truthfulness**: "Tell the truth about their state of health/illness to your patients or respective representatives."

Exceptionally only, the physician may use what is called "the therapeutic privilege," when truly beneficence overrides autonomy. In substitute decision making, what matters is the best interest of the patient.

The principle of truthfulness is connected with the **principle of confidentiality**: "Keep professional secrecy." Confidentiality, however, is not absolute: the right to privacy is an important human right, but not an absolute right. Confidentiality to keep this privacy is, then, not absolute. It is limited by other rights of the patient – such as the right to life-, the rights of others, and the common good. An example: the obligation of doctors, for instance, to report infectious diseases.

The health of the patient is promoted by the observance of the principles of **non-maleficence and beneficence** already present in the Hippocratic Oath. *Non-maleficence* means 'do not harm': "*Primum non nocere*," that is, "If you cannot do something good to a patient, at least do not harm him or her." This is a clear indictment against euthanasia and assisted suicide. *Beneficence* goes beyond non-maleficence; it implies doing some good to the patient. Certainly, some harm is unavoidable to achieve a greater benefit (but, "no more harm than what is necessary"). Risks (and burdens) and benefits must

be balanced, but evil cannot be done to attain good: a good end does not justify a bad means (principle of **double effect**).

Connected with the principle of double effect, the **principle of cooperation** (in the evil action of another person) refers to the physical or moral help given by us to another person, who performs a bad action; for instance, the cooperation or assistance provided by others to one who performs an abortion, which is intrinsically evil. The principle implies that one should not cooperate with formal cooperation or with immediate material cooperation. However, mediate material cooperation may be ethical.<sup>13</sup> In this context, let us point out that the most basic principle of ethics is: "Do good and avoid – or fight – evil." *May a "lesser evil" be done in certain exceptional situations?*

The ethical principles are most helpful guidelines to evaluate our actions; they are, however, external guidelines only. We need also internal principle. We need virtues. *Why do we need internal moral principles or virtues?* Let us try to answer this final question.

#### 4. INTRINSIC MORAL PRINCIPLES: THE VIRTUES

*"Happiness consists in the practice of virtue"*  
(St. Thomas Aquinas)

As we said earlier, in basic bioethics, and also in professional ethics, the two approaches that seem to stand out are the **principle-based and the virtue-based bioethics**.

Principles, rules, guidelines, etc., tend to concern the action in question, its objective moral character. Virtue ethics, by contrast, governs the interior life of the agent(s) who perform (s) the action. The reason both are needed is that right actions done with evil intentions or motives are hollow. Guidelines and rules, unless interiorized, will be broken as expedient. On the other hand, without objective morality, any action, such as killing others or stealing could be justified on the basis of 'good intentions'.<sup>14</sup>

Pellegrino and Thomasma add: The best approach then is "the balance of the two approaches that is so important in today's society and so challenging."<sup>15</sup>

Without virtues, principles may be no more than weak external guidelines. On the other hand, without principles, "virtues" may become too subjective. Principles need virtues to be interiorized, and virtues need principles

not to become just pious “good intentions.” Nevertheless, ethically speaking virtues are more significant for our life: virtues make good not only our actions, but our own selves. They aid us to become more what we are as human beings, as professionals, and as believers.

**Virtue** continues to appear important in ethics – in life - because it is virtue, that is, a kind of excellence of the soul, a basic trait of character, and a positive ethical attitude - a good operative habit. Virtues are *intrinsic principles* of good deeds. They are embedded in the potencies of the person who possesses them. Virtues are “successes in self-realization” (C. van der Poel).<sup>16</sup>

Virtues give us knowledge by *connaturality*, a keen ability to judge well. They perfect us as individual persons, and as social beings in communion with others. Virtues make us truly free: free to do good, free to love. Indeed, an upright life – *veritas vitae* – is needed to achieve true freedom.<sup>17</sup>

According to their origin, virtues are distinguished into **acquired virtues** (by personal effort) and **infused virtues** (by God). According to different object, we speak of **intellectual virtues** (understanding, science, wisdom and prudence), **moral virtues** (the cardinal virtues and many others) and **theological virtues**. The theological virtues are the good supernatural habits that, infused by God, relate us to him, namely, the virtues of faith, hope and charity.

*Which are the most important virtues?* (Enchanted by the study of virtues, a medical student wrote in her final test: “Virtues are so many! They are waiting to be picked up!”). For Christians, and for most people, love is the greatest virtue, or benevolence (for Confucians), or kindness/fidelity (for Taoists).

Lao Tzu wrote:

I am kind to the kind,  
I am also kind to the unkind,  
For virtue is kind.  
I am faithful to the faithful,  
I am also faithful to the unfaithful,  
For virtue is faithful.

When we speak of virtues in ethics and bioethics, we mean above all **moral virtues** – the virtues that make our actions and us good. The moral virtues rectify the whole ethical life of the person who possesses them by putting order in his/her intellect (prudence), in his will (justice) and in the sense appetite (courage

and temperance). Since the time of Aristotle, the most important human virtues are the **cardinal virtues** of prudence, justice, fortitude and temperance.

A good life, an accomplished life, a happy life is a life lived in justice and love. Justice and love continue to be the most relevant virtues today. There is a continuing need of **justice**.

Justice, in turn, needs of the virtue of **love** to become even a just justice! Love means to give to another person not only what is his or hers, but also of what is "ours." The greatest virtue is love, which is expressed in **solidarity** with the poor, the sick and the disadvantaged in our families, communities and societies.

For Christians, love of God and neighbor, or **charity** is the "form" of all virtues: "over all these virtues (mercy, kindness, humility, meekness, patience, forgiveness) put on love, which binds the rest together and makes them perfect" (Col 3:14).

With justice and love, *what are, for instance, the main virtues for the healthcare professionals?* In a reason/faith perspective, these four virtues are essential to physicians and other healthcare professionals: compassion, truthfulness, humility and prayerfulness. Let us present the four briefly.

- **Compassion:** Compassionate, competent care belongs to the essence of the healing professions – and the religious profession. Compassion is placed between antipathy and apathy, and is perfected in empathy. I remember the words of Dr. Paul Tournier: "Two things go to the making of a doctor: great scientific competence and a great heart."
- **Truthfulness.** Truthful communication to patients – to all people who have a right to the truth - is an essential element of the principle of informed consent, and, in general, of justice. More radically, truthfulness is moral integrity, honesty – coherence between our thoughts, words and deeds.
- **Humility** helps us realize our vulnerability, our limitations, and need of consulting others. (St. Bernard was asked: "What are the four cardinal virtues?" He answered: "Humility, humility, humility, humility").
- **Prayerfulness** inclines us – sinners – to seek God's help to be fully truthful, compassionate and humble. (St. Teresa of Avila wrote: "There is always remedy for one who prays." St. Catherine of Siena said: "Prayer is the mother of all virtues"). Prayer helps us overcome the *"temptation of business," or the tyranny of work.*<sup>18</sup>

*Is it really hard to be virtuous?* The virtuous person is not born, but made! He or she is made by performing, over and over again, good acts, which create good habits, that is, virtues that form a good character (Grace and Prayer Help!).

In a well-known poem, Samuel Smiles tells us simply and beautifully that to be virtuous is not that difficult:

*Sow a thought and you will reap an act.*

*Sow an act and you will reap a habit.*

*Sow a habit and you will reap a character.*

*Sow a character and you will reap a destiny.*

## 5. CONCLUSION: HUMAN DIGNITY, PRINCIPLES AND VIRTUES

*"In the evening of life, we will be examined on love"*  
(St. John of the Cross)

Bioethics is the ethics of life, particularly of human life. Thus, **the human person is the most radical foundation of bioethics**. The human person is the center of ethical reflection, practice and research.

The **foundational ethical principle** is: **"Respect the human person always."** The other ethical principles are mediations of the principle of respect. The ethical principles, however, need the help of virtues to become effective sources of good actions.

*Why at times we do not follow the ethical principles we know, the bioethical principles that mediate our respect for every human being?* Because we are ignorant, weak, or blinded by sin or vice: "Virtue enhances vision; vice darkens and finally blinds" (G. Mailaender). In the same vein, *why do we not follow sometimes our conscience – which listens to and applies ethical principles?* St. Thomas answers: we do not follow the decisions of conscience because we lack virtue.<sup>19</sup> **We try to be virtuous persons.**

Good professional practice is strengthened by the **acquisition of virtues** (through the repetition of the corresponding acts), which are moral excellences or good habits that rectify our potencies and develop them to the fullest. A good act is a good act, but it does not make a person good. Virtues make people good! The practical knowledge of ethical principles is complemented by the acquisition of the corresponding virtues acquired by

the person, an acquisition that may begin today: it is never late to live well! (Seneca); but tomorrow may be too late! What matters in ethics, then, is not merely knowledge but mainly practice: ethics is the science of good practice. A Buddhist saying states: "To know and not to do is not yet to know."

"I know better than my patients," the physician said. Regarding medicine, yes, but regarding other aspects of life, no! After all, it is the life of the patient on the line. A physician has to respect the autonomy of the patient expressed in informed - or substitute - consent. Another physician said: "I love my patients, so I carry out their requests." Like all of us, health care professionals are obliged to follow their own well-formed conscience, and not the conscience of their patients, or of others.

Like other human beings, the physicians – or the nurses - have to respect the dignity and rights of their patients, and acquire the virtues that will help them practice the ethical principles of their profession and faith. In those two cases above, the main principles involved are the principles of justice, autonomy and love. The virtues that incline them to practice these principles are, among others, the virtues of justice, love and compassion. Let us not forget that virtues are connected and help one another to grow.

When all is said and done in ethics, in bioethics, also in Christian ethics, what really matters is the **virtue of principled love**. After all, *in the evening of life* – and every evening! -, *we will be examined on love!*

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## ENDNOTES

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<sup>1</sup> See St. Thomas Aquinas, *Summa Theologiae*, I-II, 94, 2; Marc Oraison, *Morality for Our Time* (Garden City, New York: Image Books, Doubleday & Company, 1969), pp. 22-25; J. A. Marina, *Ética para naufragos* (Barcelona: Editorial Anagrama, 1995), p. 39; Emmanuel Levinas, *Ethics and Infinity* (Quezon City: Claretian Publications, 1985); Peter Kreeft, *Back to Virtue* (San Francisco: Ignatius Press, 1992). Aristotle writes that the human person is an ethical subject - and not the irrational animal - because, he can distinguish between good and evil, just and unjust, etc (*Política*, I, 2, 1, 253a; quoted by Aurelio Fernandez, *La reformas de la teología moral*, Burgos: Ediciones Aldecoa, 19997, pp. 216-217.)

<sup>2</sup> Josef Fuchs, S.J., *Christian Morality: The Word Became Flesh* (Washington, D.C.: Georgetown University Press, 1987), p. 190. See Fausto B. Gomez, O. P., "Bioethics and Theological Bioethics," in his book *A Pilgrim's Notes. Ethics, Social Ethics, Bioethics* (Manila: UST Publishing House, 2005), pp.169-188.

<sup>3</sup> Iris Murdoch, *The Sovereignty of Good* (London: Routledge and Kegan Paul, 1970), p. 52.

<sup>4</sup> Vatican II, *Gaudium et Spes*, GS, 14. See *Catechism of the Catholic Church*, CCC, nos. 1703 and 362-363.

<sup>5</sup> See CCC, 1704; John XXIII, *Pacem in Terris*, 261; St. Thomas Aquinas, *Summa Theologiae*, I, 29, 3 ad 2; I, 29, 3. The Angelic Doctor states that the human person is what is most perfect in the whole nature.

<sup>6</sup> See Marciano Vidal, *Moral de Actitudes, I: Moral Fundamental Personalista* (Madrid: PS Editorial, 1974), pp.140-151; Agustín Pazos, "Fundamentos antropológicos de las directrices del Magisterio en temas de bioética," *Cuadernos de Bioética*, Vol. XII, No. 4 (2001), pp. 345-353. Vatican II underlines the constitutively social dimension of the human person, and the need to go beyond an individualistic ethics (see *Gaudium et spes*, nos. 25 and 30).

<sup>7</sup> Quoted by José Antonio Marina, *Ética para náufragos* (Barcelona: Anagrama, 1995), p. 18.

<sup>8</sup> Paul Conner, O. P., "Human Dignity, Universal Standard of Good and Evil," *The National Catholic Bioethics Quarterly*, Vol. 4, No. 2 (Summer 2004), p. 269.

<sup>9</sup> José Luis del Barco as quoted by Tomás Melendo in "Más sobre la dignidad humana," *Cuadernos de Bioética*, Vol. VIII, No. 4 (1997), p. 1484.

<sup>10</sup> Leonardo Rodríguez Duplá, "Sobre el fundamento de los derechos humanos," *Salmanticensis*, 43 (1996). As the International Theological Commission states, "In the family of nations, each and every citizen should treasure these fundamental rights and cultivate the values that sustain them" (International Theological Commission, *The Dignity and Rights of the Human person*, Ireland: The Furrow Trust, 1985, 1.2.; see also 3.2.2).

<sup>11</sup> See Thomas A. Shannon, *An Introduction to Bioethics*, 2<sup>nd</sup> ed. (New York/Mahwah: Paulist Press, 1989), pp.141-147.

<sup>12</sup> Seneca, *Epistulas morales*, 95, 33. Vatican II, GS, 26. *Summa Theologiae*, I, 29, 3.

<sup>13</sup> *Formal cooperation* includes internal consent and external cooperation in the evil action; it is wholly unethical. *Material cooperation* means co-participation in the evil action of another: there is internal repudiation of the evil action, but with some degree of external cooperation. *Immediate material cooperation* occurs when the external cooperation is intimately connected with the evil action, to such a point that such an action would not take place without it; it is also unethical. *Mediate material cooperation* implies also external cooperation, but cooperation not needed for the performance of the evil action; it may be justified via the principle of double effect. See Fausto B. Gomez, O. P., "Relevant Principles in Ethics and Bioethics," in his book *Promoting Justice, Love, Life* (Manila: UST Publishing House, 1998), pp. 50-65.

<sup>14</sup> Edmund D. Pellegrino and David C. Thomasma, *The Christian Virtues in Medical Practice* (Washington, D. C.: Georgetown University Press, 1996), pp. 14-15.

<sup>15</sup> *Ibid.*, p.15.

<sup>16</sup> See Cornelius J. van der Poel, C. S. Sp., *The Search for Human Values* (New York/Paramus/Toronto: Paulist Press, 1971), pp.146-160; Fausto B. Gomez, O. P. "Some Notes on the Relevance of Virtue and Virtues in Ethics and Bioethics," in his book *Promoting Justice, Love, Life, I. c.*, pp. 66-90.

<sup>17</sup> St. Thomas Aquinas, *Summa Theologiae*, II-II, 109, 3 ad 3.

<sup>18</sup> See Timothy Radcliffe, O. P., "Foreword," in Albert Nolan, *Jesus Today. A Spirituality of Radical Freedom* (Maryknoll, New York: Orbis Books, 2006), p. x.

<sup>19</sup> See Gilbert C. Mailaender, *The Theory and Practice of Virtue* (Notre Dame: Indiana: University of Notre Dame Press, 1984); p. 17; St. Thomas Aquinas, *Summa Theologiae*, I-II, 58, 5.