Ordinary – Extraordinary Means of Conserving Life

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Ordinary – Extraordinary

- Ethical & Religious Directives - 56
- A person has a moral obligation to use ordinary or proportionate means of preserving his or her life. Proportionate means are those that in the judgment of the patient offer a reasonable hope of benefit and do not entail an excessive burden or impose excessive expense on the family or the community. (cf. 40 = Iura et Bona)

Ordinary – Extraordinary

- Ethical & Religious Directives - 57
- A person may forgo extraordinary or disproportionate means of preserving life. Disproportionate means are those that in the patient's judgment do not offer a reasonable hope of benefit or entail an excessive burden, or impose excessive expense on the family or the community. (cf. 41 = Iura et Bona)

Ordinary – Extraordinary

- Daniel A. Cronin, STD
- Archbishop Emeritus Hartford
- 1954 (then) Archbishop Cushing assigns him this topic for Doctoral dissertation
- Gregorian University
- “The Moral Law in Regard to the Ordinary and Extraordinary Means of Conserving Life” (1956)

Ordinary – Extraordinary

- life is a fundamental (not absolute) value
- negative precepts bind semper et pro semper
- positive precepts bind semper sed non pro semper
- ad impossibilia nemo tenetur (no one is held to the impossible)
- these duties belong to the patient

Ordinary – Extraordinary

- arose from commentary on Aquinas’ treatment of suicide and mutilation
- “it is not lawful for man to take his own life that he may pass to a happier life, nor that he may escape any unhappiness whatsoever of the present life ... to bring death upon oneself in order to escape the other afflictions of this life, is to adopt a greater evil in order to avoid a lesser” ST II.11.64.5
Ordinary – Extraordinary

• 1546 Francisco de Vitoria, OP
• (if) "only with the greatest of effort and as though by means of a certain torture, can the sick man take food, right away he is reckoned a certain impossibility, and therefore he is excused ... especially where there is little hope of life"

Ordinary – Extraordinary

• de Vitoria
• an intrinsic balancing between ...
  • the burden of the means
  • the benefit provided
• patient decides

Ordinary – Extraordinary

• 1560 Dominic Soto – amputation
• 1604 Dominic Banez – ‘media ordinata’ & ‘media extraordinaria’
• 1623 Lessius, SJ – psychological factors can excuse

Ordinary – Extraordinary

• 1660 Cardinal de Lugo
• “The good of his life is not of such great moment, however, that its conservation must be effected with extraordinary diligence: it is one thing not to neglect and rashly throw it away, to which a man is bound: it is another however, to seek after it and retain it by exquisite means as it is escaping away from him, to which he is not held.”

Ordinary – Extraordinary

• Carmelite Fathers of Salamanca 17th century
• “… in order to conserve life, one is not bound to use all possible remedies, even extraordinary ones, really choice medicine, costly foods, a transfer to more healthful territory, so that he will live longer: he is not held to give over all his wealth in order to avoid death …

Ordinary – Extraordinary

• “… neither is a sick individual in desperate condition bound to employ very costly remedies, even though he should know that with these remedies his life would be extended for some hours, or days or even years.” Salmanticenses
Ordinary – Extraordinary

• 1748 Alphonsus Liguori
• no obligation to use costly or uncommon medicine
• no need to change place of residence to a more healthful location
• no one is held to employ extraordinary and very difficult means (amputation) in order to conserve his life

Ordinary – Extraordinary

• Elements of Ordinary Means (Cronin summary)
  ▪ Reasonable Hope of Benefit
  ▪ Common Means
  ▪ Proportionate According to Status
  ▪ Undemanding Means
  ▪ Reasonably Simple Means

Ordinary – Extraordinary

• Elements of Extraordinary Means (Cronin)
  ▪ a Certain Impossibility Factor
  ▪ Great Effort
  ▪ Enormous Pain
  ▪ Exquisite Means
  ▪ Extraordinary Expense
  ▪ Severe Dread (vehemens horror)

Ordinary – Extraordinary

• Cronin’s definition (1956)

• Ordinary means of conserving life are those means commonly used in given circumstances, which this individual in his present physical, psychological and economic condition can reasonably employ with definite hope of proportionate benefit.

Ordinary – Extraordinary

• Pius XII 11/24/57 address to physicians

• “...normally one is held to use only ordinary means – according to the circumstances of persons, places, times and culture – ... means that do not involve any grave burden for oneself or another. A stricter obligation would be too burdensome for most people and would render the attainment of the higher, more important good too difficult...”
Ordinary – Extraordinary

• (Pius XII cont.)
• “...Life, health, all temporal activities are in fact subordinated to spiritual ends. On the other hand, one is not forbidden to take more than the strictly necessary steps to preserve life and health, as long as one does not fail in some more serious duty.”

Ordinary – Extraordinary

• Iura et Bona 1980
• introduces the terms ‘proportionate’ and ‘disproportionate’
• a weighing of the burdens and benefits ... • type, risk, cost of treatment • result that can be expected • physical and moral resources of patient

Ordinary – Extraordinary

• (refusing extraordinary treatment) ... should be considered an acceptance of the human condition, a wish to avoid the application of a medical procedure disproportionate to the results that can be expected, a desire not to impose excessive expense on the family or the community. CDF Iura et Bona

Ordinary – Extraordinary

• Both the artificial extension of human life and the hastening of death, although they stem from different principles, conceal the same assumption: the conviction that life and death are realities entrusted to human beings to be disposed of at will. It must be made clear again that life is a gift to be responsibly led in God’s sight.
• JPII Rennweg Hospice 1998.

Ordinary – Extraordinary

• Ord/Extraord is NOT Double Effect
• currently some conflation of the two
• Rule of Double Effect (RDE) ...
  • One may undertake an action that has two effects – one good and one bad – if ...
  • the act is not intrinsically evil
  • only the good is intended (the bad is foreseen)
  • bad effect is not the cause of the good effect
  • ergo no re ‘uterine isolation’
  • good effects greater than bad effects

Ordinary – Extraordinary

• elderly person with multiple chronic diseases and recent hospitalizations gets a new (treatable) infection
• does not want to go to the hospital
• traditional analysis ... weigh all burdens vs. benefits associated with undergoing the treatment (including suffering associated with the underlying condition)
Ordinary – Extraordinary

• traditional analysis ...
• intention is no treatment (not no life)
• death is foreseen
• it’s enough to say “enough is enough”
• Cardinal de Lugo … if trapped in a fire with enough water to only delay the inevitable one does not need to use the water

• RDE analysis … one only considers the effects that flow directly from the action ...
• ‘good effect’ = stay home with family and (probably) die
• ‘bad effect’ = go to hospital, get iv medicines (and prolong life)
• RDE proportionality criteria fails – staying home with family not proportionate to prolonging life

Ordinary – Extraordinary

• Ordinary/Extraordinary analysis ...
• Objective Component = risks, difficulty, suffering, costs, possibility of success, time of life, quality of life ...
• Subjective Component = fear, anguish, physical or mental suffering, feelings of degradation, will to live, importance of time left ...

• Ordinary/Extraordinary proportionality permits consideration of the suffering associated with the patient’s condition, not merely the suffering caused by the treatment itself. (Sulmasy 2005)
• RDE proportionality only considers the suffering that directly flows from the treatment itself.

Ordinary – Extraordinary

• O/E – derives from principle of moral impossibility and commentary on STA on suicide … principle explicitly stated in 16th century … ‘causal chain’
• RDE – derives from discussions of STA on self-defense … principle explicitly stated in 19th century … ‘causal fork’