



The Holy See

**ADDRESS OF HIS HOLINESS BENEDICT XVI
TO PARTICIPANTS IN THE NATIONAL CONGRESS
OF THE ITALIAN SURGERY SOCIETY**

Clementine Hall

Monday, 20 October 2008

Distinguished Ladies and Gentlemen,

I am pleased to welcome you at this special Audience on the occasion of the National Congress of the Italian Surgery Society. I address my cordial greeting to each and every one of you, with a special word of thanks to Prof. Gennaro Nuzzo for his words expressing your common sentiments and describing the Congress' work on a theme of fundamental importance. Indeed, your National Congress is focused on this promising and demanding declaration: "*For surgery that respects the patient*". Today, in a time of great technological progress, there is rightly talk of the need to humanize medicine, developing those aspects of the doctor's approach that best correspond to the dignity of the patient under treatment. The specific mission that qualifies your medical and surgical profession consists in fulfilling three objectives: to cure the patient or at least endeavour to intervene effectively to prevent the development of the disease, to alleviate the painful symptoms that accompany it, especially in the advanced stages and to attend to all the sick person's human expectations.

In the past, it sufficed to alleviate the suffering of the sick person since it was impossible to prevent the disease from running its course and even less to cure it. In the past century, the developments of science and surgical technology have made it possible to intervene ever more successfully in the sick person's case. Thus today a cure, which in many cases had previously been only a marginal possibility, is usually an achievable prospect to the point that it attracts the almost exclusive attention of contemporary medicine. However, this situation has created a new risk: that of abandoning the patient as soon as the impossibility of obtaining appreciable results becomes apparent. On the other hand, it remains true that even when a cure can no longer be hoped for much can be done for the patient. His suffering can be alleviated, and above all, it is possible to

accompany him on his way, improving the quality of his life as much as possible. This is not something to be underestimated, because every individual patient, even one who is incurable, bears an inherent unconditional value, a dignity to be honoured, that constitutes the indispensable basis of every medical intervention. Respect for human dignity, in fact, demands unconditional respect for every individual human being, born or unborn, healthy or sick, whatever his condition.

In this perspective the relationship of mutual trust that is built up between the doctor and the patient is of prime importance. It is thanks to this relationship of trust that the doctor, listening to the patient, can reconstruct his clinical history and understand how he copes with his illness. Furthermore, it is in the context of this relationship based on reciprocal esteem and the sharing of realistic goals to be pursued that a therapeutic programme can be defined: a plan that can lead to daring life-saving interventions or to the decision to abide by the ordinary means that medicine offers. What the doctor communicates to the patient, directly or indirectly, verbally or non-verbally, comes to exercise a significant influence over him. It can motivate, sustain or mobilize him and even strengthen his physical and mental resources; or on the contrary, it can weaken him and frustrate his efforts and thus even reduce the effectiveness of the treatments he is undergoing. The aim must be a real therapeutic partnership with the patient, based on the specific clinical practice that permits the doctor to perceive the most appropriate means of communication suited to the individual patient. This strategy for communication will aim above all to sustain also with respect for the truth hope, an essential element in the therapeutic context. It is good not to forget that it is these human qualities, in addition to professional competence in the strict sense, which the patient appreciates in his doctor. The patient wishes to be seen in a kindly manner, not merely examined; he wants to be listened to, not merely subjected to sophisticated diagnoses; he wants to be certain that he is in the mind and heart of the doctor treating him.

The insistence with which today the patient's individual autonomy is emphasized must also be geared to promoting an approach to the sick person which, rightly, does not consider him an antagonist but rather an active and responsible collaborator in his treatment. Any attempt to intrude from the outside in this delicate doctor-patient relationship must be viewed with suspicion. On the one hand, it is undeniable that the patient's self-determination should be respected, but without forgetting that the individualistic exaltation of autonomy ends by leading to a non-realistic and certainly impoverished interpretation of human reality. On the other, the physician's professional responsibility should lead him to suggest a treatment that strives for the true good of the patient, in the awareness that in his professional capacity he is usually able to evaluate the situation better than the patient himself.

Illness, on the other hand, is manifested within a precise human history and casts a shadow on the future of the patient and his family milieu. In the context of today's advanced technology the patient risks being to some extent "confiscated". Indeed, he finds himself overwhelmed by rules and practices that are often completely foreign to his way of being. In the name of the requirements of science and technology and the organization of health-care assistance, his

habitual lifestyle is turned upside down. It is very important instead not to exclude from the therapeutic relationship the patient's normal environment and, in particular, his family. For this, it is essential to encourage in his relatives a sense of responsibility with regard to their family member: this is an important element in order to avoid the further alienation which the latter almost inevitably suffers if he is entrusted to highly technological medical treatment devoid of sufficient human feeling.

Therefore, dear surgeons, you are charged with the considerable responsibility for offering surgery that is truly respectful of the sick person. This in itself is a fascinating task but at the same time very demanding. Precisely because of his mission as Pastor the Pope is close to you and supports you with his prayers. With these sentiments, as I wish you every success in your work, I gladly impart the Apostolic Blessing to you and to your loved ones.

© Copyright 2008 - Libreria Editrice Vaticana

Copyright © Dicastero per la Comunicazione - Libreria Editrice Vaticana