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BISHOP SGRECCIA: DYING HAVE RIGHT TO KNOW Opposes "Conspiracy of Silence" in Treating Terminally Ill

By Mirko Testa

ROME, JAN. 16, 2008 ([Zenit.org](http://www.zenit.org)).- A doctor should prepare the incurably ill for death by avoiding any "conspiracy of silence" and proclaiming a "life that does not die," said the president of the Pontifical Academy for Life.

Bishop Eli Sgreccia affirmed this at a conference last month in Rome's IFO convention center on "Depression and Cancer." During the conference, it was explained that, according to some studies, around 40% of cancer patients suffer from depression, while only 2% receive adequate treatment.

Though some might think the way to avoid depression in cancer patients is by hiding the gravity of the illness, Bishop Sgreccia urged informing the incurably ill of the truth -- not just clinical truth, but existential as well.

The prelate acknowledged that this task has been made more difficult by the rejection of the truth about death and incurable illness in a "society marked by productivity and material well-being."

Bishop Sgreccia cautioned against doctors or psychologists who have not reconciled themselves with death. He said a doctor like this "does not know how to treat the dying because he puts into action self-defence mechanisms, which, in the majority of cases are fleeing, aggression or seeking success at any price, something that leads to therapeutic fierceness."

The prelate encouraged instead a model of "individualized openness," which is brought about by "a declaration of friendship," based on the patient's right to information and the doctor's commitment to accompany the sick.

Preparation

Bishop Sgreccia said he is against any "conspiracy of silence" that "hinders the patient from preparing himself for detachment and death."

He emphasized the doctor's duty "to avoid lying" and to always give "a pledge of hope and assistance."

At the same time, he added, there can be circumstances that, "out of respect for the good of the patient, can lead to quieting the seriousness of the illness." If suicidal tendencies can be presumed or "when the patient has invoked his right not to know," information on the gravity of the illness could be withheld, Bishop Sgreccia explained. The life-academy director said it is always necessary for the doctor to take into account the emotional situation and different psychological phases through which sick people pass. And he added, "it is necessary that the clinical truth be positively articulated with anthropological truths, with the global meaning of life."

This truth needs to be presented in a salvific sense, he said, with the proclamation "of the life that does not die and the revelation of Christ dead and risen, present and working in each man who suffers."

In this sense, the prelate underlined the salvific value of suffering and the importance of accompanying the sick in the terminal phase of life: "The dying contribute maturity and value even to those who are at their side. [...] They become teachers of life," he said.

Moreover, he added, "we take with us all the acts of love that we have been given. Our spiritual life does not disappear but flourishes; it is enriched in eternity."

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