

Frequently Asked Questions

The researchers will update this file periodically in response to questions regarding the study of practices at U.S. Catholic health systems active in Texas (2000-2003). The study may be found at www.wikileaks.org/wiki/Catholic_hospitals_betray_mission. The Frequently-Asked-Questions.pdf will be periodically updated and users are encouraged to check for updates on the www.wikileaks.org/wiki/Sterilization_and_abortion_practices_in_Texas_Catholic_hospitals site. Questions from readers may be submitted via the discussion group pages on the websites or sent to press@sunshinepress.org.

Q.1: The researchers are anonymous, why should the data be treated with credibility?

A.1: It should be treated with credibility because Wikileaks.org is a respected journalistic website and follows established protocols when it refrains from revealing its sources. Fewer than 0.1% of documents that pass initial editorial review fail subsequent analysis.

The patient records in the TCH.xls file come directly from the State of Texas public use data files. Anyone questioning the veracity of the data need only contact the Texas Information Collection Center to obtain the data. (This will admittedly cost money.) Beginning in 2002, all patient records include unique identifiers. This makes it even easier for individual patient records to be examined. As stated in the methodology section of the study, some fields in the records such as patient charges were omitted from the TCH.xls file since they are not relevant to the study. Every ICD-9-CM diagnostic and procedure code for each patient has been included. Records were selected for inclusion in the file if they had a diagnostic or procedure code that the researchers considered a violation or possible violation of the Catholic hospital directives. Please review the Data-Sample.pdf for a clearer understanding of the records.

Q.2: Why are there so many documents posted on the [Sterilization_and_abortion_practices_in_Texas_Catholic_hospitals](http://www.wikileaks.org/wiki/Sterilization_and_abortion_practices_in_Texas_Catholic_hospitals) site and what would be the best order in which to read them?

A.2: The first two zip files contain all the documents listed under **Contents**. Both zip files are identical and are available at two different sites in case one of the sites becomes temporarily unavailable.

It is suggested that readers first completely read the wikileaks article “Catholic hospitals betray mission.” This describes the study of the US Catholic hospital systems active in Texas completed by the medical research group. A pdf of this article (Catholic-hospitals.pdf) is the first item listed under **Contents**. Two additional files related to the article are TCH.xls and TCH.xls-Data-Sample.pdf. TCH.xls is an excel workbooks that contains the patient records in the study and various ways of viewing and analyzing them. TCH.xls-Data-Sample.pdf is a file that gives a simple visual explanation of the organization of the patient data. It is suggested that the user view the Data Sample prior to downloading and reviewing the TCH.xls file. The pdf files (TCH-xxx.pdf) are simply printouts of the various worksheets in the TCH.xls and redundant for the reader who is able to view the excel file.

The next group of files under **Contents** contains the files created by an independent group who reviewed the material and created documents which were sent to the press, various interested organizations, and members of the Catholic Church hierarchy regarding the study. These files which the user may wish to read next are:

- Distribution-Memo.pdf
- media:Review-Summary.pdf
- media:Review-Narrative2.pdf

Q.3: Can the researchers answer questions about remarks in the Review Narrative or Review Summary?

A.3: No. The researchers are responsible for the data in TCH.xls Excel file, the pdf files which contain copies of the TCH.xls worksheets, and for cooperating with the Wikileaks press for the text of "Catholic hospitals betray mission" article on www.wikileaks.org. The researchers cannot speak for the reviewers. The files prepared by the independent reviewers which have a link to them in the article are posted on www.wikileaks.org/wiki/Sterilization_and_abortion_practices_in_Texas_Catholic_hospitals. They are:

- Distribution-Memo.pdf
- media:Review-Summary.pdf
- media:Review-Narrative2.pdf

Q.4: Why do the researchers consider all V25.2 diagnostic codes to indicate a sterilization that violates the Catholic directives (ERD #53)?

A.4: The V25.2 diagnostic code is very precise. In the ICD-9-CM guidelines all diagnostic codes preceded by a "V" are provided to deal with occasions when circumstances other than a disease or injury (represented by codes 001-999) are recorded as a diagnosis or problem. V25 specifically represents a case of "contraceptive management." V25.2 further specifies that contraceptive management is to be achieved through sterilization by means of the interruption of the vas derens or fallopian tubes. The accompanying procedural codes will, in a given case, show what specific procedure was used to interrupt the vas deferens or the fallopian tubes.

The fact that a particular patient with v25.2 might also be noted in the diagnostic codes to have hypertension, liver disease, diabetes, many children, multiple c-sections, cancer, HIV, STDs, etc. does not justify a sterilization at a Catholic hospital. Interrupting the fallopian tubes will not treat any of these conditions (some of which are not even true pathologies) and, in fact, is being done to prevent a future pregnancy. Such a procedure is prohibited in all cases.

This is not a matter of opinion of the researchers or of debate within the Catholic Church. Admittedly, many Catholic hospitals and the Catholic Health Association have worked with ethicists for decades who have held contrary opinions, but the Catholic Church has insisted these

opinions may not be used at Catholic hospitals. The Vatican has been very clear about this and has publicly condemned such false opinions in 1976 and again in 1993. The 1993 document by the Congregation for the Doctrine of the Faith answers very specific questions regarding medical procedures resulting in sterilization. It states:

Q. 1. When the uterus becomes so seriously injured (e.g., during a delivery or a Caesarian section) so as to render medically indicated even its total removal (*hysterectomy*) in order to counter an immediate serious threat to the life or health of the mother, is it licit to perform such a procedure notwithstanding the permanent sterility which will result for the woman?

R. Affirmative.

Q. 2. When the uterus (e.g., as a result of previous Caesarian sections) is in a state such that while not constituting in itself a present risk to the life or health of the woman, nevertheless is foreseeably incapable of carrying a future pregnancy to term without danger to the mother, danger which in some cases could be serious, is it licit to remove the uterus (*hysterectomy*) in order to prevent a possible future danger deriving from conception?

R. Negative.

Q. 3. In the same situation as in no. 2, is it licit to substitute tubal ligation, also called "uterine isolation," for the hysterectomy, since the same end would be attained of averting the risks of a possible pregnancy by means of a procedure which is much simpler for the doctor and less serious for the woman, and since in addition, in some cases, the ensuing sterility might be reversible?

R. Negative.

Explanation

In the first case, the hysterectomy is licit because it has a directly therapeutic character, even though it may be foreseen that permanent sterility will result. In fact, it is the pathological condition of the uterus (e.g., a hemorrhage which cannot be stopped by other means), which makes its removal medically indicated. The removal of the organ has as its aim, therefore, the curtailing of a serious present danger to the woman independent of a possible future pregnancy. From the moral point of view, the cases of hysterectomy and "uterine isolation" in the circumstances described in nos. 2 and 3 are different. These fall into the moral category of direct sterilization which in the Congregation of the Doctrine of the Faith's document *Quaecumque Sterilizatio* (AAS LXVIII 1976, 738-740, no. 1) is defined as an action « whose sole, immediate effect is to render the generative faculty incapable of procreation ». And the same document continues: « It (direct sterilization) is absolutely forbidden ... according to the teaching of the Church, even when it is motivated by a subjectively right intention of curing or preventing a physical or psychological ill-effect which is foreseen or feared as a result of

pregnancy ». In point of fact, the uterus as described in no. 2 does not constitute in and of itself any present danger to the woman. Indeed the proposal to substitute "uterine isolation" for hysterectomy under the same conditions shows precisely that the uterus in and of itself does not pose a pathological problem for the woman. Therefore, the described procedures do not have a properly therapeutic character but are aimed in themselves at rendering sterile future sexual acts freely chosen. The end of avoiding risks to the mother, deriving from a possible pregnancy, is thus pursued by means of a direct sterilization, in itself always morally illicit, while other ways, which are morally licit, remain open to free choice. The contrary opinion which considers the interventions described in nos. 2 and 3 as indirect sterilizations, licit under certain conditions, cannot be regarded as valid and may not be followed in Catholic hospitals.

During an audience granted to the undersigned Prefect, the Sovereign Pontiff John Paul II approved these responses adopted in an ordinary session of the Congregation for the Doctrine of the Faith, and ordered them to be published. Rome, at the Congregation for the Doctrine of the Faith, the 31st of July 1993.

+ Joseph Card. Ratzinger

Prefect

+ Alberto Bovone

Titular Archbishop of Caesarea in Numidia

Secretary

The entire document is available online at:

www.vatican.va/roman_curia/congregations/cfaith/documents/rc_con_cfaith_doc_31071994_uterine-isolation_en.html
