Catholic Innovators in the Field of Medicine

DR. MARTIN BEDNAR
A Leader in the Fight Against Alzheimer’s Disease

DR. JACEK HAWIGER
A Pathfinder in the Field of Inflammation Research

DR. ANTONIO ANZUETO
Paving the Way in ARDS Research
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Dear CMA Members and Friends,

“Man was created for greatness — for God Himself.”
— Pope Benedict XVI

This issue of The Pulse of Catholic Medicine recognizes Catholic physicians who are leading innovation in their medical specialties. The physicians being profiled hail from diverse countries and have vastly different backgrounds. The common denominator in their personal stories is their ardent Catholic faith. This should come as no surprise. Pope Benedict XVI reminds us in the above quote that man was created for greatness and as Catholic clinicians we are all committed to doing great things for God.

Striving for greatness brings to mind the often-overlooked virtue of magnanimity. The Angelic Doctor, St. Thomas Aquinas, provides us with a detailed explanation of this “special virtue” in the Summa Theologiae. He describes magnanimity as a “stretching forth of the mind to great things.” Pursuing excellence should always involve an honest assessment of our God-given abilities and talents. St. Thomas Aquinas makes this point quite clear. “Magnanimity makes a man deem himself worthy of great things in consideration of the gifts he holds from God.” He acknowledges that accolades and honors may accompany great achievements, and that is why St. Thomas stresses that magnanimity and humility are interrelated and harmonious virtues.

Dr. Alexandre Havard, the Catholic author and founder of the Virtuous Leader Institute expounds on the complementarity of magnanimity and humility.

“Magnanimity and humility go hand in hand. In specifically human endeavors, man has the right and duty to trust himself (magnanimity), without losing sight of the fact that the human capacities on which he relies come from God (humility). The magnanimous impulse to embark on great endeavors should always be joined to the detachment that stems from humility, which allows one to perceive God in all things. Man’s exaltation must always be accompanied by abasement before God.”

Havard goes on to say that magnanimity is “the jet fuel... the propulsive virtue par excellence of human achievement.”

Our profession provides us ample opportunities to practice magnanimity — both heralded and unheralded. As president of the CMA I can readily attest to the fact that magnanimity abounds in the CMA — in the medical practices of our members, in the work of our guilds and the work being done at the state and national level.

Kudos to Drs. Bednar, Hawiger, and Anzueto and to all the members of the CMA for living out the wise counsel given to us by St. Peter: “As each has received a gift, employ it for one another, as good stewards of varied graces...in order that in everything God may be glorified in Jesus Christ” (1 Peter 4:10).

Sincerely in Christ,

Peter T. Morrow, M.D.
President
Remembering the legendary Dr. Clem Cunningham

By

NADIA SMITH

The Catholic Medical Association is greatly indebted to the late Dr. Clem Cunningham, its longest serving member, whose vision, dedication and perseverance has had a lasting effect on the organization.

Cunningham, a retired Rock Island, Illinois family physician, passed to his eternal rest Sept. 2, 2018. He was 96 years old.

“Dr. Clem Cunningham is known as a paragon within the CMA,” said President Dr. Peter Morrow. “He has been one of the great cornerstones we have relied on.”

His dedication to the CMA spanned 6½ decades from when he first joined in 1953 looking for other like-minded physicians. He wasted no time in getting behind the organization nationally and stepping up as the president of his local guild, the Rock Island County Catholic Physicians Guild. He also served as the chair of the membership committee for six years before becoming president in 1963, when the CMA, then known as the National Federation of Catholic Physicians Guilds (NFCPG), was the sixth largest medical organization in the United States with 7,200 members. After his year of presidency, he resumed his position as chair of the membership committee and became the advisor to several subsequent presidents. The organization peaked in 1967 with more than 120 guilds and physician membership surpassed 10,000. Cunningham played a significant role in that achievement.

Even when the floor fell out from underneath the organization the following year with the release of the controversial encyclical Humanae Vitae in 1968, and the resulting schism between most of the CMA that supported the Church’s teaching on contraception and those that did not, Cunningham neither jumped ship nor lost hope. In the years that followed, ensuing presidents on opposite sides of the contraception debate were elected, which led to further deterioration of the guilds and subsequently significant loss of membership.

He did not lose hope because, as he shared with The Pulse of Catholic Medicine in its 2015 inaugural issue, “I have always defended the magisterial teachings of the Church,” he said. “When Christ established the Church, He said that the world would change but His doctrine would not. This must have been an incredible support to the early Church, and it remains so.”

Cunningham, along with a handful of dedicated physicians, redoubled...
“IT IS TIME FOR US ALL TO STAND UP AND BE COUNTED,” exclaimed Dr. Martin Bednar, a new member of the Catholic Medical Association and frontline neurosurgeon in drug development for dementia, particularly Alzheimer’s disease. “It should be our goal to use any skills and talents the Lord has given us to the best of our ability and to the fullest extent possible.”

As Vice President at Takeda Pharmaceuticals in Cambridge, Massachusetts, Bednar’s two primary roles within drug development are to assist in defining the strategy and direction of dementia research both within and outside of his organization; and leading teams to take the most promising therapies into clinical trials to determine if they are both safe and effective for their given indication(s).

“My role is to ensure that there is a clear strategy for each clinical asset and that there is efficient and seamless execution on this strategy,” said Bednar, whose credentials prove his high qualifications.

He was the first candidate to graduate New York Medical College with a combined M.D., Ph.D. degree. He gained 18 years of experience in clinical drug development at Pfizer Inc., one of the world’s largest pharmaceutical companies, following a career in academic neurosurgery. He has also submitted nine patents, of which six have been granted to date, for a variety of therapeutics and devices, and for clinical trial design.

“For me, there is nothing more satisfying than being
able to get a drug approved for a disease that has no available treatments or where the current treatments have modest benefit," Bednar said of clinically testing medicines to treat people with dementia, typically Alzheimer’s disease.

In the United States alone, Alzheimer’s stands to increase from 5.7 million cases to 14 million in 30 years if no medical breakthroughs occur. Alzheimer’s is the nation’s most expensive disease and the sixth leading cause of death.

Globally, 50 million people suffer a diagnosis of Alzheimer’s disease. Additionally, unsustainable fertility rates in most developed countries have resulted in an aging population, and age is the greatest risk factor for Alzheimer’s disease. About 5.5 million Americans with Alzheimer’s disease are 65 and older.

“This is rightfully called an epidemic of catastrophic proportions that demands a worldwide concerted effort to cure or even just modify the course of disease,” Bednar said, noting the risk of developing Alzheimer’s disease doubles every five years in later life. “What this means is that should a disease-modifying therapy even delay the symptomatology of Alzheimer’s disease by five years, this would reduce the number of cases of Alzheimer’s disease by 50 percent!”

Bednar’s desire to find treatment for one of the world’s most prevalent and difficult-to-treat diseases reflects his “inner need to be constantly challenged.” He sees neurosurgery, including his specialization in cerebrovascular neurosurgery, as a “final frontier” and finds the most satisfaction in clearly explaining diagnoses and treatment options, as well as offering support to overwhelmed patients and their families.

Professionally, Bednar’s faith is integral to his view of the human person. This outlook was confirmed with the poignant words of his father while receiving serious medical treatment.

“I well remember my father being treated with a very challenging chemotherapeutic regimen saying to his physicians that ‘all human life is sacred.’ I will never forget that – not 25 years later, not ever,” he said. His father’s words were not a warning to doctors, but rather simply “a reminder that in a very busy world we cannot forget the patient as an individual and the importance of taking the time to build the relationship.”

Bednar emphasized his greatest responsibility is safeguarding the well-being of clinical trial participants and ensuring that, as the team leader, the medicines studied have the appropriate balance of benefit and risk.

Unlike other therapeutic areas, Bednar explained that neuroscience has always struggled with how to facilitate drug entry into the brain and spinal cord. Thus, he is most passionate about combining novel delivery platforms with the most promising therapeutic targets.

“The very essence of what contributes to brain health, the blood-brain barrier, also routinely thwarts our efforts to gain access with our potential new therapies,” he said. “Now, with the advent of novel methods for drug delivery, we are able to think about therapeutics in a very different way that can even facilitate one-time dosing to treat or cure a disease.”

One of those novel methods is non-replicating viruses to enable drug delivery. This method contains an inactivated pathogen incapable of replication. It directly targets the central nervous system with a platform that can provide wide brain and spinal cord drug exposure.

“The power of gene therapy and other biologic approaches combined with novel drug delivery systems has really opened broad and promising new avenues for drug development,” Bednar added.

Still wearing the Miraculous Medal his mother gave him before he entered college, Bednar eagerly shares his faith personally and through his cutting-edge profession. In joining the CMA, Bednar hopes to learn from other Catholic doctors as well as share his experience to inspire the next generation.
As multiple diseases mediated by inflammation have increased in modern times, Dr. Jacek Hawiger, the Distinguished Professor of Medicine and Louise B. McGavock Chair in Medicine at Vanderbilt University, stands out as a significant contributor to the field of inflammation research.

His research has produced new methods of treatment by custom-designed, cell-penetrating peptides that dismantle proinflammatory signaling to the cell’s nucleus, which is the control center of inflammation. These new potential drugs, known as Nuclear Transport Modifiers (NTMs), enter cells in the blood and major organs, where they immobilize the intracellular processes responsible for inflammation and metabolic dysregulation. Unlike current anti-inflammatory drugs that inactivate only a single mediator of inflammation, the NTMs extinguish production of 23 out of 26 different mediators of inflammation all at once.

Further, currently used anti-inflammatory steroids have adverse metabolic side effects such as hyperglycemia, hyperlipidemia, and osteoporosis. NTMs, on the other hand, offer a broad-spectrum anti-inflammatory remedy with added benefits of lowering blood glucose, triglycerides, and cholesterol. Hawiger’s team also designed and developed another anti-inflammatory treatment termed “intracellular protein therapy” that will serve as a potential alternative to gene therapy for life-threatening inflammation of the liver and other organs. Vanderbilt University owns patents for these anti-inflammatory therapies.

For Hawiger, a member of the CMA Nashville Guild, research has been a lifelong passion, and his faith has accompanied him every step of the way.

“Research is an intensely personal as well as a social endeavor,” he said. “It starts with an idea that is usually questioned not only by its original proponent but also by his peers. Testing an idea formulated as the hypothesis requires teammates and other resources. It also requires perseverance as we face the perennial question: persist or desist?”

Hawiger developed these habits of searching for answers at an early age. Growing up in Poland, he experienced the tragic loss of his father during the time of the Second World War.

“I was four years old when my father, a Catholic, was led away from our apartment in Germany-occupied Poland by three agents of the Nazi secret police, the German Gestapo,” he said. “Six months later, he perished as a political prisoner in the Auschwitz death camp.”

His 28-year-old mother was left with four young children in her care. As the oldest child in the family, Hawiger was compelled to begin searching for his father.

“Until my first visit to the Auschwitz death camp with my mother six years later, I was looking on the streets, stores, and churches for my father,” he said. “I was hoping that he somehow survived this atrocious war and that I would find him somewhere.”

Hawiger would not find the answers as a child, but his search for a connection led him to another realization that wove itself into his life’s profession.

“As a medical student in Krakow at the Copernicus School of Medicine, now the Medical College of Jagiellonian University, I was trying to find my father’s picture among the mugshots of interred inmates displayed in some barracks of the Auschwitz death camp,” he said. “I did not know that this was a very small sample of mugshots as most of them were taken away by the Soviet Army that liberated the Auschwitz death camp on January 27, 1945. They were returned to the Auschwitz Museum some 50 years later after the collapse of the Soviet Union.”

However, with the help of his wife’s relative Stanisława Iwaszko, who was also an Auschwitz historian, Hawiger found his father’s photo. He also discovered that his father...
was registered as one of over 400,000 inmates, who comprised roughly 10 percent of all prisoners, mostly Jews, brought to Auschwitz from all over Germany-occupied Europe. They were to be stripped of their personal belongings and immediately exterminated in the gas chambers, thus confirming that his father was indeed a victim of the Holocaust.

“While discovering the circumstances of my father’s death in Auschwitz during my visit in 1995, I learned that this was the site of the worst wartime medical atrocities committed by German physicians and their assistants,” Hawiger said.

His discovery convinced him that such horrific events that threaten human dignity are repeatable. He cited the “killing fields” in Cambodia where an estimated 2 million people were slaughtered in the 1970s by the communist Khmer Rouge led by tyrannical madman Pol Pot. He also recalled a more recent genocide that was taking place at the same time he had come face-to-face with his father’s last picture taken.

“Around the time of my 1995 visit to Auschwitz, ‘ethnic cleansing’ was taking place very close to the heart of Europe, in former Yugoslavia. Psychiatrist Radovan Karadžić, also trained at Columbia University, was another madman orchestrating atrocious acts in concentration camps while the neighboring European Union idly stood by,” he said. “Very sadly, the horrendous lessons of the Auschwitz death camp are being forgotten.”

The ethical dilemmas are ever-present in Hawiger’s mind as he works to conduct research and guide medical students in the noble profession of medicine, emphasizing the search for truth and intellectual honesty.

“A good practitioner of medicine uses not only his stethoscope displayed around the neck. He directs his mind and heart listening to his or her patient almost like a soulmate,” he said. “Regrettably, the present-day health care academic-industrial complex increasingly regards human health as a commodity while bureaucratically depersonalizing the practice of medicine.”

Consistent with his deeply held belief in the sanctity of life especially in those most vulnerable, Hawiger proposed a new type of treatment to improve Down syndrome patients’ developmental defects and hopefully to avert early Alzheimer’s disease in midlife. His research proposals for funding of this project were declined. A few years later, it was announced that Down syndrome was “eradicated” through mass abortion in Iceland.

“In such situations,” he explained, “I am re-reading Priorities of Saint Mother Teresa of Calcutta. The last one states: ‘Give the world the best you have, and it may never be enough. Give the world the best you’ve got anyway. You see, in the final analysis, it is between you and God. It was never between you and them anyway.’”
Dr. Antonio Anzueto
Leading Lung Expert Paving the Way in the Treatment of ARDS

By
RENEE FOSS

A LEADING GLOBAL LUNG EXPERT, DR. ANTONIO Anzueto has been an innovator in the study of Acute Respiratory Distress Syndrome, ARDS, since the late 1980s. A native of Guatemala, Anzueto is a pulmonologist and professor at the Health Science Center School of Medicine in San Antonio, Texas, and Chief of the Pulmonary Disease Section at the South Texas Veterans Health Care System. For Anzueto, his Catholic faith imbues his practice of medicine.

His faith provides a lens for making decisions regarding treatment of his patients, compelling him “to go above and beyond what needs to be done,” he said. “We need to look at the patient not as a disease, but as a person like you and me, and look at overall care of the disease.”

For him, that not only means how he interacts with his patients, but also in praying for each of his patients and offering them and their families the opportunity to talk with a priest or other minister and have access to the Sacraments.

In fact, what prompted Anzueto to begin researching ARDS in the first place was his desire to go above and beyond in helping patients with this difficult-to-treat disease, who as a result have an increased
risk of prematurely dying.

ARDS is a very severe condition in which adequate air cannot reach the lungs due to severe inflammation. It is a manifestation of severe acute lung injury. In ARDS patients, the stem cells of the lungs become damaged, causing the lungs to lose their ability to regenerate healthy tissue. They can only repair themselves by creating scar tissue, which cannot conduct oxygen from the air into the blood stream as healthy tissue can.

Sixty percent of ARDS patients develop it from primary injuries to the lungs, such as pneumonia, near drowning and smoke inhalation. Forty percent develop it secondary to other injuries, such as a fracture in the leg sustained from a motor vehicle accident, inflammation in the bowels, or swelling of the pancreas. Other secondary causes can be pregnancy as ARDS is a leading cause of maternal death resulting from pregnancy-associated complications; obesity as it predisposes people to ARDS; and the flu that can cause ARDS in young adults.

“In ARDS, the research that we have done over the last 20 years has resulted in a significant change in the diagnosis of patients, and therefore, early recognition and treatment,” Anzueto said. “We completely changed the way we use mechanical ventilation in these patients, and patient survival has significantly increased. We now know that these patients can get better and survive this severe condition.”

A sign of the disease is shortness of breath and difficulty breathing, where an individual is extremely short-winded and gasping for air even when sitting or lying down, he explained. Close to eighty percent of people who have this condition need oxygen. Patients must be treated quickly and are at risk for long-term consequences, even after current treatment, such as breathing problems, depression, issues with memory and mental clarity, fatigue, and muscle weakness.

Anzueto and his clinical research team have also sought to find innovative ways to treat ARDS. One such example was his use of statin drugs, usually prescribed for lowering cholesterol, but which he also found worked to decrease respiratory swelling due to ARDS in H1N1 patients. Anzueto has published more than 250 papers in peer-reviewed journals covering not only his team’s latest findings on ARDS, but also on chronic obstructive pulmonary disease (COPD), community acquired pneumonia, sepsis and a range of other lung related diseases.

Despite the advancements in understanding ARDS, it remains a difficult disease to treat. And that reality leads Anzueto to turn to his faith for support, specifically the Rosary, which he prays every morning on his way to work.

“It is incredible, powerful, and really helps me as a person to look at everything coming at me in the day in a different way,” he said.

He also finds hope in his students, whom he encourages to become innovators in their respective fields through working in the context of their faith and taking advantage of their ability to access volumes of new information through social media and web research.

“The next generation of Catholic physicians are better able to have information at their fingertips to offer best treatment to patients,” he said. “This wide exposure allows them to work with other Catholic physicians and come up with suggestions to help our patients, making our daily lives better.”

One can hope, then, that through the light of faith and the wide networking capability that the current technological milieu provides, future innovators will continue to pave new pathways in treatment of ARDS and other difficult-to-treat diseases, building on the work that Anzueto and his colleagues have already achieved.
By
NADIA SMITH

Restoring Health Care in a Technocratic Age was the theme of the 87th Annual Education Conference that drew nearly 600 attendees. Representing the fields of medicine, theology, law and journalism, a distinguished faculty from around the country gathered on Sept. 20-22, 2018 to explore ways to stay true to the faith and the vocation of medicine as Catholic health care professionals.

“The benefits of technology for our patients are innumerable and can be life-saving,” explained President-elect Dr. John Schirger, the conference chair. “Having said that, we need to ensure that the goal of serving our patients’ needs remains within the context of their true dignity and the common good, and framed by the principles of solidarity and subsidiarity. Technology needs to remain in the service of those primary goals. Many physicians are finding novel ways to deliver health care in attempts to personalize the care they give, and we wanted to provide a platform for them to discuss these strategies.”

The conference began with keynote speaker Rod Dreher, journalist and author of The Benedict Option. Dreher called for radical conversion and communal relationships to strengthen the laity’s resolve to persist in the raging culture war, where “white martyrdom” is already a reality.

Other keynote speakers included Chesterton scholar Dale Ahlquist, who offered advice for doctors gleaned from the works of G.K. Chesterton; and former presidential candidate Sen. Rick Santorum, who shared a moving account of his own experience of navigating the health care system as a dad with a special needs daughter. Santorum was also the 2018 recipient of the Evangelium Vitae Award given to an individual for their outstanding service to the Pro-Life Movement.

Awards were also presented to Regional Director Dr. David Hilger, who received the Distinguished Guardian of Faith Award for his esteemed service to the CMA; Dr. Susan Caldwell, who received the 2018 Linacre Award for her article, “Building a culture of life by embracing the feminine genius: A message to Catholic women in health care”; and Dr. Roy Heyne, president of the Catholic Physicians Guild of Dallas, who accepted the Outstanding Guild Award on behalf of his guild.
The conference featured experts both in general presentations and in break-out sessions that aimed to explore the details of alternative options of health care, as well as other relevant and pressing medical issues.

“There were many fine talks and the final presentation by Rick Santorum was rousing to say the least,” said Dr. Peter Rosario from Evansville, Indiana, who is a regional director and president of the Southwest Indiana Catholic Medical Guild. “But the best talk in my opinion belonged to Dr. Christopher Hook. He expressed in a very real and emotional way what ails society is idolatry.”

To that end, when he found himself awake one morning at 3:30 a.m. during the conference, Rosario headed right to the adoration chapel, which was open throughout the conference, because that is where “the true answer and the source of strength to maintain orthodoxy in our lives, practices, and studies” can be found, he said. For him, the conferences are not just an educational opportunity, but also a spiritual renewal he looks forward to every year.

In addition to adoration, attendees were offered daily morning Mass and confession. The conference ended with the evening White Mass at the Cathedral Shrine of the Virgin of Guadalupe with Most Rev. Edward J. Burns, the Bishop of the Diocese of Dallas, as the main celebrant.

“This conference is unique,” said first time attendee Dr. Carmen Arango, the president of the El Paso Catholic Physicians Guild. “It is where science meets the Holy Spirit. The camaraderie, the networking, the Rosary, Adoration, Mass, confessions and the presentations were the perfect combination. I would recommend this conference because it is a meeting between physicians that have the same standards, goals and beliefs, and where our questions will be answered truthfully in the Faith.”

She loved the experience so much, she said she is already making plans to attend next year’s conference in Nashville, Tennessee, Sept. 26-28, 2019, which will address the serious issue of physician burnout.

Both Rosario and Arango’s sentiments were echoed by other attendees regarding the conference and the End of Life and Natural Family Planning forums that took place prior to it.
Restructuring of the Student Section Board to Facilitate Growth

By

KATE KONDRAKUK

“Ah! Denver, una rivoluzione!”
— St. John Paul II

This quote of St. Pope John Paul II, spoken two months after the Denver World Youth Day in 1993, illustrates the significance of that event on the New Evangelization. The flame was ignited, and now 25 years later we are seeing the fruits of this Saint’s prayers with and for the young people of the United States. Organizations such as the Fellowship of Catholic University Students (FOCUS) and authentically Catholic universities are turning out energized and motivated young people en masse that are committed to bringing the light of Truth into our relativistic culture. Praise God, many of these young adults are choosing to enter the health care professions. This phenomenon is already affecting the CMA. We saw a near doubling of the number of medical student and resident attendees at the annual Boot Camp in 2018. This is only a scratch on the surface of the growth that is to come.

Our CMA-SS 2018 Board recognized this changing climate and has made major changes to the structure of the CMA-SS to facilitate this growth. We added a new position to our Board this year — the Regional Director Representative (RDR). Mikey Clark, a MS4 student at Indiana University School of Medicine, has done great work as our first ever RDR, assembling the first Regional Directors Committee (RDC) of 25 medical student leaders throughout the country. This team is composed of representatives from all regions of the CMA and includes one military medical student, which is important as we develop resources for this unique cohort of our membership. It also includes a pre-medical student who has already successfully created a CMA Club at the University of St. Thomas in the Twin Cities. This pre-medicine representative is invaluable as we look to grow our pre-med involvement over the next few years.

Another change this year is that, through the Regional Directors Committee, we have started the Virtual Chapter for the CMA-SS. Currently housed on Facebook, this online community is a place for all CMA-SS members to connect via discussion pages, prayer request boards, and even streamed or recorded talks shared from local chapters across the country. We are excited to continue growing the community via this online platform.

This year saw many changes for the CMA-SS. We have begun to experience great growth of our membership and are excited to continue this growth as we expand our organizational reach. Our 2018 Board is proud to pass on to the incoming 2019 CMA-SS Board a restructured organizational system that will allow us to grow rapidly as we begin working with national organizations, such as FOCUS, in a more intentional way to support those young professionals transitioning from college to further health care education. Please continue to pray for this outreach to the forthcoming medical professionals through the intercession of Saints John Paul II and Mother Teresa of Calcutta. On behalf of the CMA-SS 2018 Board, thank you for your support of the CMA Student Section.

Kate E. Kondratuk is the 2018 CMA Student Section Board President.
What I Learned in Medical School

By JUSTIN CHU

SINCE I WAS 10 YEARS OLD I DREAMED of one day becoming a physician. Looking back, that little 10-year-old boy had no idea what was in store for him. I never would have thought the road to medicine would be filled with so many bumps and mental bruises. Nor would I have ever imagined traveling to foreign countries implementing my medical skills, meeting outstanding colleagues and mentors, all the while interacting with others on the most personal and emotional levels. Trying to learn and better understand medicine has not been an easy task, and I have relied on the support and encouragement of my family and friends every step of the way.

Studying medicine has motivated and empowered me mentally, physically, and emotionally. It has pushed me to limits I could never have imagined and challenged me to hold myself to the highest standards. There were many nights of studying and challenging exams when I grew frustrated. I now see the value in those struggles because from those difficult tests, and what felt like hopeless studying, came something much more fruitful and infinitely lasting: the inner determination and resilience to come back even stronger and smarter the next time around.

Throughout medical school, I have learned that the journey is just as important, if not more, than the end goal. Through my patient interactions, I have learned a myriad of life lessons. I have learned to appreciate the importance of strong leadership qualities and a well-functioning health care team to optimize patient care. I have learned that my skill sets of communication, diagnostic thinking, and long-term commitment to patients coincide well with a team-based medical approach. Not a day goes by without me learning something new about the art and vocation of medicine.

I gained an even greater respect for medicine when I dealt with death in patients whom I cared for and worked hard to keep alive. At times, I feared disease and its immense power to cause rapid deterioration, but by sharing in the healing art of Christ, I have been filled with joy. Medicine has strengthened my faith and shown me how to see God in the sick patients I desperately aspire to heal. Most of all, I have been humbled to be called to this vocation and ministry that has taught me always to respect the sanctity of life, to appreciate every patient encounter and to play a significant role not only in a person’s medical care, but also in his or her life.

I know I still have much to learn, but I am proud of this vocation and thankful that the dream of my 10-year-old self has come true.

Justin M. Chu is a fourth-year student at Wright State University Boonshoft School of Medicine in Dayton, Ohio and is a member of the school’s CMA Student Section.

SAVE THE DATE • 2019 EVENTS

Members of the Catholic Medical Association will be giving voice to the unborn child and taking a stand for women at three marches happening around the country protesting abortion. Plan to join and march in your white coat!

▶ January 18
CMA is gearing up for a show of force at the 46th annual March for Life event in Washington, D.C. on Friday, January 18, 2019. The March begins with a rally at the National Mall. For more information regarding CMA’s participation, please contact Director of Communications Susanne LaFrankie at lafrankie@cathmed.org.

▶ January 21
Members will be at the annual Walk for Life Northwest in Spokane, Washington on January 21, 2019. Participants will attend 10 a.m. Mass at the Cathedral of Our Lady of Lourdes in downtown Spokane. Immediately following the Mass, members will meet at Riverfront Park, where the walk begins with a rally. For more information contact CMA member Charlotte Oliva, R.N., Chair of the Walk at charlotte.a.oliva@gmail.com.

▶ January 26
For members on the West Coast, the 14th annual March for Life West Coast will be held in San Francisco, California on January 26, 2019. The event begins with a rally in downtown San Francisco at the Civic Center Plaza. For more information regarding CMA participation, contact CMA member Dr. Paul Braaton at pbraaton@aol.com.
Meet the new Resident Board

My name is Cecilia Jojola and I am a chief family medicine resident at UC Davis in Sacramento, California. I first became involved in the CMA through the Medical Student and Resident Boot Camp. I aspire to be faculty in academic family medicine. My interests and areas of research include ethics, fertility awareness-based methods, conscientious objection, and patient navigation of the health care system. In my free time, I enjoy salsa dancing and volleyball.

My name is Dennis Wells. I am a cardiothoracic surgery resident at the University of Cincinnati Medical Center in Ohio. I am currently in my fifth clinical year.

I joined the CMA as a medical student while I was at the University of Arkansas for Medical Sciences. There, a few of my classmates and I started a CMA student section. The CMA has been a tremendous resource for me, and I am extremely grateful for what the organization stands for and has accomplished.

My wife, Joanie, and I have eight wonderful children: Madison, Shelby, Mark, Dillon, Luke, Taylor, Thomas, and Monica. We are members of St. Gertrude Parish, a Dominican Priory in Cincinnati, and five of our children are currently in school there.

We are also proud and excited that Cincinnati has recently formed a new physician guild and that a student section was formed at the University of Cincinnati College of Medicine in the last couple of years.

I served as secretary for the Resident Board last year and look forward to serving again this year.

My name is Jennifer Perone. I have just returned to clinical work as a PGY-3 in general surgery after spending three years in the lab doing basic science research in melanoma and working on my Ph.D. in surgical education. This is my third year serving on the CMA-RS board, and my 9th year in the CMA. I first became involved in the CMA in medical school when my parents, who are also CMA members, sponsored my two roommates and I to join. Before going to medical school I served as a Catholic missionary with the Missioners of Christ in Honduras. I still love youth ministry and during the past two years of research, I have also served as the high school youth minister in my parish. I am the proud godmother to six beautiful godchildren spread throughout the country.
My name is Romero Santiago. I was named after recently canonized St. Oscar Romero, martyred Archbishop of San Salvador. I am a current PGY2 resident in family and community medicine at the University of California Davis Health System in Sacramento. I am a Sri Lankan American who was born in Gainesville, Florida, and raised near Houston, Texas.

My official CMA involvement began as a first-year medical student at the University of Texas (UT) Southwestern Medical Center, where I attended several Bible studies and later, as co-president, organized several campus lunch lectures on spirituality and ethics. My first introduction to the organized Catholic student community was through my involvement with the University of Pennsylvania Newman Center as an undergraduate, where I had the opportunity to coordinate intellectual discussions as scholar chair, and as treasurer, to budget for retreats and other community outreach events.

Since early childhood I have been an active church choir member and cantor as well as cellist and pianist, most currently with the Sacred Heart Catholic Church Vox Nova Men’s Choir as a tenor singer. My undergraduate degree was in Economics with a minor in Music at the University of Pennsylvania prior to completing the 4-year MD/MPH program at UT Southwestern and the UT School of Public Health.

My name is Temilola Abdul but I go by Lola Abdul. I am currently doing a research year at the Mayo Clinic in Rochester, Minnesota prior to starting my physical medicine and rehabilitation PGY2 year at Mary Free Bed Rehabilitation Hospital in Grand Rapids, Michigan next year. I grew up in the Twin Cities, but I was born in Nigeria and immigrated to Minnesota when I was nine. I was first involved with the CMA at the University of Wisconsin School of Medicine and Public Health in Madison, where we had Lenten fellowships and devotionals. I minored in theatre while at UW and absolutely love the performance arts! I also attended the Medical Student and Resident Boot Camp this year. My CMA experiences have greatly enriched my faith during my medical training.
Our Response to the Current Crisis in the Church

By PETER MORROW, M.D.

There are many who now believe that we are living through the worst crisis in the history of the Catholic Church. The Catholic faithful are feeling angry and betrayed. As a result, the Catholic Medical Association has joined forces with other lay Catholic organizations in calling for both answers and action in dealing with all that is being reported. We urge the following points to be addressed in igniting the “cleansing fire” that is so desperately needed in the Catholic Church today.

A clarion call goes out to all Catholics to pray and fast as a means of uprooting this evil in our Church.

We must first focus our prayers for the healing of the victims who have suffered, likely often in silence. We must also pray for all good, holy priests and bishops to have the courage and strength to continue in their faithful service. Let us also not forget to pray for repentance and healing of the priests who violated their sacred vows. We are asking for Holy Hours of Reparation and other public penitential practices. And we must remember that it is our Lord who is most grievously offended by the sin that has entered His holy Church.

Reiteration that the truths of the Catholic faith be taught in their integrity and entirety from the pulpit on a regular basis.

There must be a recommitment to focusing on the beautiful teachings of the Church on human sexuality. The universal lessons gleaned from Humanae Vitae and St. John Paul II’s Theology of the Body need to be promulgated. Universal teaching properly educates the faithful, especially in matters of sexual morality.

A call for action in investigating the accusations at every level.

It is time for action. The CMA is calling for an independent, thorough and transparent forensic investigation. The CMA stands ready to work with appropriately commissioned lay committees and offer their professional expertise in dealing with the reports of abuse and devastation that lie before us. We intend to bring healing to victims and to the Church in any way we can.

An appeal to the faithful to remain steadfast in faith.

As we daily affirm our unwavering faith in Jesus Christ and our beloved Church, we can serve as a source of strength to all those around us. At this difficult time may we keep St. Peter’s acclamation of faith close to our hearts: “Lord to whom shall we go? You have the words of eternal life; and we have believed and have come to know that you are the Holy One of God.”

Dr. Morrow is the president of the Catholic Medical Association.
CMA Seeks to Reach Hispanic Health Care Professionals and Meet Needs of Hispanic Catholics

By FELIX A. RODRIGUEZ, M.D.

As the Catholic Medical Association continues to grow and expand its horizons, we have discerned a calling to become an important voice for the lay community within the United States. We have been forging alliances and networking with various organizations, particularly in the media, to promote our ongoing message “to uphold the principles of the Catholic faith in the science and practice of medicine.”

After the United States Conference of Catholic Bishops (USCCB) Convocation in 2017, it was evident to the Media and Communications Committee that the CMA was being called to address the needs and interests of the nation’s fastest growing populace: Hispanics. According to data from the 2010 Census, Hispanics comprise 16 percent of the total U.S. population, and by the year 2050 they will comprise 30 percent. About two-thirds of that demographic group is currently U.S. born. A large majority of all U.S. Hispanics, 68 percent, are Catholic and, of Millennial Catholics, 54 percent are Hispanic.

We are committed to meeting the needs of this thriving and diverse community as one of the goals in our New Evangelization effort. With that in mind, in April 2018 a Spanish Outreach Communications Subcommittee was established, under the patronage of Our Lady of Guadalupe. Its primary objective is to create and deliver educational information in Spanish on various health-related topics in view of the bioethical principles of the Catholic Church. In addition to subjects related to the Culture of Life, a mainstay at the CMA, we aim to cover issues of concern to Latinos in areas of primary care medicine and the care of newly arrived immigrants.

Another important intent is to reach out to physicians and other health care professionals of Hispanic/Latino heritage. This effort will help the Catholic Medical Association grow as an organization with more diversity, mirroring the evolution of the Church in the United States.

Among the projects of this subcommittee, original content in Spanish will be published soon in the online Catholic magazine Aleteia. CMA also plans to produce a radio show in Spanish to be transmitted initially via the Archdiocese of Miami Catholic station Radio Paz 830 AM. We anticipate such a program could be subsequently syndicated to other Catholic radio stations nationwide.

In addition, as part of our efforts, the Catholic Medical Association was represented at the recent V Encuentro of Hispanic/Latino Ministry. This national USCCB-sponsored convention took place concurrently with the CMA’s Dallas Educational Conference. Our exhibitor booth, staffed by members of the subcommittee, was visited by leaders from a wide array of Hispanic lay pastoral ministry initiatives, as well as clergy, religious and several bishops. Our hope is that with this exposure, more Hispanic health care professionals will know about the CMA and join its ranks.

We ask for your prayers and your participation in this endeavor.

¡Viva Cristo Rey!
Nuestra Señora de Guadalupe, ruega por nosotros.

To join the Spanish Outreach Communications Subcommittee please contact Dr. Félix A. Rodríguez at email frod2004@bellsouth.net. If you have any other questions you may also get in touch with Elizabeth Gill, Director of Membership at the national office via email gill@cathmed.org.
Wisconsin State Guilds Join Other Organizations in Presenting Humanae Vitae Conference

BY RICHARD J. FEHRING, PH.D., FAAN

The Wisconsin Guilds of the Catholic Medical Association, the Marquette University Institute for Natural Family Planning, and the Marquette Chapter of University Faculty for Life presented a conference on the 50th anniversary of Humanae Vitae.

The Marquette NFP Conference aimed at analyzing the progress made over the last 50 years in developing evidenced-based methods of Natural Family Planning (NFP) and integrating the provision of NFP within women’s health care.

The conference was held on July 20-21 at Marquette University and began with two key foundational presentations. The first by John Grabowski, Ph.D. Professor of Moral Theology at The Catholic University of America, with his wife Claire Grabowski, was on the moral differences between NFP and contraception. The second presentation by Kevin Miller, Ph.D., associate professor at Franciscan University, provided clear criteria and examples on how to discern the serious reasons for postponing the transmission of human life.

On July 21 the conference was moderated by Dr. Robin Goldsmith, state director of the Catholic Medical Association, and Dr. Cindy Jones Nosacek, president of the Milwaukee Guild. Richard J. Fehring, Ph.D., FAAN, Professor Emeritus of Marquette University, provided a historical review of the Catholic scientists who answered the call of Humanae Vitae to develop effective methods of natural family planning; and Dr. Thomas Bouchard, a family medicine physician, presented a paper on the evidence-based effectiveness of NFP methods in helping couples avoid and achieve pregnancy.

Dr. Kathleen Raviele, former president of the CMA, provided a paper on integrating NFP into women’s health care; and Dr. Paul Yong, Assistant Professor at the British Columbia School of Medicine, gave updates and case examples on treating endometriosis based on the latest research. Dr. Marguerite Duane, Executive Director of Fertility Appreciation Collaborative to Teach the Science (FACTS), provided information on medical schools and NFP education. CMA members Drs. Jim Linn and Julie Mickelson served as panel responders to the medical presentations.

The afternoon consisted of presentations by various health professionals on how they integrate NFP into their medical practices, including Dr. Melissa Weidert from the new NFP-only St. Gianna Clinic in Green Bay. Jacqueline Gorman, PA and Kate Elenchin B.S.N., CRNA also gave a presentation on the Marquette Method of NFP distance education services.

The conference ended with the celebration of the Holy Sacrifice of the Mass and the annual Wisconsin CMA Guild Picnic.
Indiana

The Southwest Indiana Catholic Medical Guild has initiated a new event called “Mass and Meal,” according to President Dr. Peter Rosario. It consists of a Saturday evening vigil Mass followed by a meal at a local restaurant. It is open to members of the CMA and those interested in becoming members.

“Its primary function is to promote faith and fellowship,” he said. “The event has been held twice at two different churches within the diocese. I am hoping to have at least one more of these gatherings before the end of the year.”

In addition to the “Mass and Meal” event, the Guild held their annual White Mass for the Feast of St. Luke on Oct. 18 at St. Benedict Cathedral. Most Rev. Joseph M. Siegel, the Bishop of the Diocese of Evansville, celebrated the Mass, which was followed by a reception where guild members met with other health care professionals in attendance to promote the CMA.

Another form of outreach that guild members have undertaken is contributing articles regularly to the weekly diocesan newspaper, The Messenger, for publication. It has allowed the Guild to reach a larger audience to promote the CMA and local guild events, Rosario said.

Florida

Dr. Lance Maki, president of the Orlando Guild, participated in the third season of EWTN’s series The Long Ride Home with Bear Woznick. The reality TV show follows the journey of Catholic Harley bike riders. Dr. Maki originally appeared on the series as the on-scene doctor but has since participated as a rider. The latest season was filmed in Hawaii. Along with promoting his guild and its work through his participation in the show, Dr. Maki is diligently preparing the annual White Mass to be held on Feb. 2, 2019 at Ascension Catholic Church in Melbourne, Florida. A dinner presentation will follow featuring Fr. Sean Kilcawley, the program director and theological advisor for Integrity Restored, a nonprofit dedicated to “restoring the integrity of individuals, spouses, and families that have been affected by pornography or pornography addiction.” Fr. Kilcawley will address human trafficking and child pornography. It is part of the Guild’s ongoing initiative to bring to light the devastating reality of human trafficking and its connection to pornography. For more information on the event, contact Dr. Maki at lancemaki@gmail.com.

Texas

Executive Director Mario Dickerson stands with Dr. Roy J. Heyne, president of the Catholic Physicians Guild of Dallas, and Conference Moderator Dr. David Stansfield. Dr. Heyne accepts the Outstanding Guild Award on his guild’s behalf during the Sept. 22 banquet that closed out the 87th Annual Education Conference in Dallas, Texas. The Guild was honored for their “exemplary efforts in prayer, education, and public awareness.”

Dr. Lance Maki, president of the Orlando Guild, with Bob “Ace” Bagley, national president of the Knights on Bikes, in Hawaii while filming season three of the EWTN series The Long Ride Home.
efforts in renewing the organization from 300 members at its lowest point into what today is known as the Catholic Medical Association, 1,500 strong. He continued to have a prominent influence on its leadership, even after his retirement in 1990 right up to the end of his life.

“It was actually his vision that saw the need for State Directors in the CMA,” Morrow said. “He understood the changing cultural climate and how important it would be to have a strong voice at the state level.”

As a result, the CMA moved toward that model two years ago. While the goal is to have one in every state, already the CMA has 27 state directors charged with creating an association between the guilds in their states. This model will strengthen the organization and provide the CMA with a leading voice at the state level, where many conscience protection battles are taking place.

Cunningham also accomplished a personal goal — to re-establish a guild in his area.

“At the 2013 educational conference in Santa Barbara, I introduced myself to Clem in the hotel lobby. He promptly smiled, and without a word, took my hand and led me to the meeting room to introduce me to Dr. Michael Porubcin and Father Jerry Logan, also from Rock Island,” recalled orthopedic surgeon Dr. Timothy Millea. “Months later, Michael and I understood that Clem knew exactly what he was doing. Clem never gave up on the goal of establishing a guild in our area. Although he never said so in that first encounter, he knew that through his mediation and God's grace, it would happen.”

Porubcin, his oncologist, concurred. He was attending his first conference at the invitation of Cunningham and remembered the profound effect it had on him: “I had finally found a group of highly intellectual people who professed their Catholic faith with compassion and confidence. I left the meeting with a strong desire to do something more,” he recalled. “The rest is history! With blessings from above, the guidance of Dr. Cunningham, prayers from our first guild chaplain Fr. Logan, and the bottomless energy of our current guild president Dr. Millea, the St. Thomas Aquinas Guild of the Quad Cities was established in 2014.”

Porubcin serves as the founding vice president and Cunningham was named president emeritus for his invaluable support, as Millea noted, “his example and encouragement are the reasons our St. Thomas Aquinas Guild exists and thrives.”

A year later both Cunningham and the Guild were separately honored by the CMA at the 84th annual education conference in Philadelphia. Cunningham received the “Distinguished Guardian of the Faith” award as a show of tremendous gratitude and recognition for his “unwavering faith and conviction.” The St. Thomas Aquinas Guild received the Outstanding Guild Award for being a leader among guilds.

“Simply put, Clem Cunningham is the history of the CMA,” Millea said. “I am so grateful that Clem lived long enough to see the rejuvenation of something he committed so much of his life and boundless energy. He was a heroic man who ran a wonderful race and finished well. As I told his family, a finer man I've never known.”

Cunningham’s contribution to the CMA is immeasurable, and so was his remarkable service to his profession, his community and the Church. His various professional memberships and affiliations earned him an Illinois State Medical Society Award for Service and a Rock Island County Medical Society Lifetime Achievement Award. Among his numerous awards, Cunningham also received what he deemed as one of the “highest honors” of his life: The Order of St. Gregory the Great Award for his personal service to the Church from St. John Paul II.

Cunningham married the love of his life, Florence McDonald in 1947, and the couple had four children, with the oldest, Patrick, following in his father’s footsteps and eventually taking over his father’s practice. They were married fifty years until her death.

In life, Cunningham had a clear understanding of the order of things as he told The Pulse in 2015, “It’s important to establish the right pecking order, to have priorities,” he said. “God must be number one, your spouse must be second, your children are third, work is fourth, and social or athletic activities and hobbies are last. People, not just physicians, sometimes put golf ahead of their work, or children ahead of their spouse; this could be a problem. If one puts anything above the Lord, then they are talking about real problems.”

Cunningham lived this philosophy and in doing so inspired countless others.

His funeral Mass was at St. Pius X Church on Sept. 7, where the pastor, Msgr. Mark Merdian, was the main celebrant and described him as an exceptionally “gentle, kind, intelligent, faith-filled and other-centered doctor.”

“Dr. Cunningham will be greatly missed,” Porubcin said. “But based on what I know about him, I believe Heaven is rejoicing.”

Dr. Clem Cunningham presenting a booklet about the organization to now St. Paul VI during a papal audience. He also met two other saints: John Paul II and Mother Teresa of Calcutta.
CMA members are inspired to grow in faith, maintain ethical integrity, and provide excellent health care in accordance with the teachings of the Church.

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