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The Pill as Health Care?

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Physicians will sometimes prescribe a hormonal regimen (in the form of a hormonal contraceptive like the Pill) to treat certain gynecological problems like heavy menstrual bleeding, dysmenorrhea (painful periods), PMS (pre-menstrual syndrome), endometriosis, or other conditions like severe acne. In these cases, the Pill is used not as a contraceptive, but as a therapy for a medical condition.

This can be morally permissible under the principle of double effect, which allows for the treatment of a serious medical problem (the good effect), while tolerating its unintended consequences, when other less harmful treatments are not available. In this case, the unintended consequences would be the impeding of one's fertility and the potential health risks and side effects of the Pill (the evil effect).

Married couples may sometimes struggle with the question of whether a pathology is serious enough to warrant the therapeutic use of the Pill. The wife of one couple I worked with reflected on the matter and concluded, "Yes, the bleeding is intense, and I'm basically wiped out for at least two or three days each month, but it's not so debilitating that my husband and I can't manage, and we'd really prefer, morally and medically speaking, not

to get mixed up with a powerful pharmaceutical like the Pill."

Other treatments beside the Pill may at times be available to remedy these medical conditions without having to impede fertility. Some young women, though, may be content to opt for a treatment that also offers more latitude for sexual activity. Approaching the medical use of the Pill in this way can raise concerns about ambiguous intentions. A friend of mine who dated several young women who were on the Pill for a medical condition described his own experiences and struggles this way:

> "Those I know who have done this also tended to be the ones who were sexually active.... I believe it does have an effect on one's psyche and soul. In fact, in the past I've dated two women who were doing this and it made it really, really hard at times to be chaste. When I brought up alternative ways to treat something that doesn't involve the Pill, they got very defensive. So I think it definitely blurs a line even in the minds of the most faithful Catholics who rationalize that this is what the doctor ordered."

Making Sense of Bioethics

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Lines can blur not only in the minds of those who may be dating, but also in the minds of medical students, who may be taught to prescribe the Pill almost reflexively for various gynecological issues rather than addressing the root cause of the problem. As Lili Cote de Bejarano, M.D., has noted: "For most of these conditions, the Pill is only treating the woman's symptoms, while her underlying medical problem —the cause of the symptoms — remains unaddressed and undiagnosed."

Lines become further blurred when medical professionals start to insist that the Pill, taken purely to avoid pregnancy, is "health care." It is not, in fact, health care, but a lifestyle decision. This lifestyle decision is frequently made in the midst of a cultural backdrop that encourages "neutered" sex in an endless array of forms, and sanctions the misguided view that "health" means we have the right to practice consensual indiscriminate sex without consequences.

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system — by disrupting the delicate balance of hormonal cycles regulating a woman's reproductive well-being and fecundity.

When taken for lifestyle purposes, the Pill is quite the opposite of health care — being, in fact, detrimental to women's health — in light of its frequent side effects of weight gain, headaches, and depression, as well as its heightened and well-documented risk of thrombotic stroke, myocardial infarction (heart attack), and breast cancer. The International Agency for Research on Cancer, an arm of the World Health Organization, classifies hormonal contraception as a Group 1 carcinogen.

When a married couple has a proportionately serious reason not to become pregnant — for example, when pregnancy itself would seriously threaten the woman's life or health — they can opt for periodic abstinence during part of her cycle by assessing various indicators of fertility. This is sometimes referred to under the general heading of "Fertility Awareness Methods," and offers a morally acceptable, safe and effective approach to spacing children.

To sum up, then, the use of the Pill for medical (non-contraceptive) purposes requires a disciplined approach to the matter. Alternative medical therapies should be seriously considered, the great good of fertility should be respected, and unspoken sexual agendas should not be allowed to trump the duty to exercise moral responsibility and sound medical judgment.

Rev. Tadeusz Pacholczyk, Ph.D. earned his doctorate in neuroscience from Yale and did post-doctoral work at Harvard. He is a priest of the diocese of Fall River, MA, and serves as the Director of Education at The National Catholic Bioethics Center in Philadelphia. Father Tad writes a monthly column on timely life issues. From stem cell research to organ donation, abortion to euthanasia, he offers a clear and compelling analysis of modern bioethical questions, addressing issues we may confront at one time or another in our daily living. His column, entitled "Making Sense of Bioethics" is nationally syndicated in the U.S. to numerous diocesan newspapers, and has been reprinted by newspapers in England, Canada, Poland and Australia.

