

Letter from the Cardinal Secretary of State to Archbishop Vincenzo Paglia, President of the Pontifical Academy for Life, on the Occasion of the Palliative Care Conference Organized by the Academy - Rome, February 28, 2018

Your Excellency, On behalf of the Holy Father, Pope Francis, and for myself as well, I extend a cordial greeting to you, to the organizers and to the participants in your Conference on Palliative Care. This is a topic that concerns the final moments of our earthly life and that put each person face to face with a limitation on freedom that appears insuperable, and that sometimes provokes rebellion and anguish. That is why in today's society we try in many ways to avoid this limitation, to remove it, and we fail to make our own the inspired plea of the Psalmist: "Teach us to count our days aright, that we may gain wisdom of heart." (Ps. 90:12). We thus deprive ourselves of the richness that is hidden in our limitations and of an opportunity to develop a more prudent way of living, on both a personal and a social level.

Palliative care, on the other hand, does not accept a renunciation of the wisdom that is born of our limitations. This is a further reason for its importance. In fact, it represents a rediscovery of the deepest vocation of the medical professions, which consists first of all in "*caring for*." Their task is always to "care for," even when it is not possible to heal. Certainly, the medical professions are characterized by a tireless commitment to gaining new knowledge and to overcoming an ever-greater number of illnesses. But palliative care gives witness, within the framework of clinical practice, to the fact that limitations are to be not only challenged and removed, but also recognized and accepted. This means never abandoning the sick, but rather being close to them and accompanying them in the burdensome trials that mark the end of earthly life. It is just when all the strength required for "doing" seems exhausted, that the most important aspect of human relations emerges, which is simply "being"—being present, being close, being welcoming. This also means sharing the powerlessness of someone who comes to the last moments of life on earth. It is then that a limitation can change its meaning: it is no longer a sign of separation and loneliness, but rather an opportunity for encounter and communion. Death itself becomes not so much a barrier against which life presses but to which it must ultimately surrender; it becomes rather the fulfillment of an existence received without price and lovingly shared.

In fact, the deep meaning of care includes that dimension of loving interdependence that reveals itself with particular clarity in moments of sickness and suffering, especially at the end of life, but that actually marks all human relationships and indeed constitutes their most specific element. The words of the Apostle Paul both admonish and comfort us: "Owe nothing to anyone, except to love one another; for the one who loves another has fulfilled the law." (Rom 13: 8) It thus seems reasonable for us to construct a bridge between that care that has been received from the beginning of life, and that has allowed life to unfold, and that care to be given in a responsible manner to others from generation to generation and extending to embrace the whole world. In this way, a spark can be lit that melts a love-filled sharing of human life, till the very end, with the Gospel proclamation that sees all persons as children of the same Father and recognizes in everyone His untouchable image. This precious bond protects a dignity, both human and theological, that does not cease, not even with the loss of health, social standing or mastery over one's own body. Here is where

palliative care shows its value not only in medical practice—value that ensures that, even when medicine’s efficiency produces sometimes spectacular healing, it does not forget that basic attitude of care that is at the root of every doctor-patient relationship—but also more generally for the whole of human coexistence.

Your program in these days highlights the *multiplicity of dimensions* that come into play in the practice of palliative care. It is a task that mobilizes many scientific, organizational, relational and communicative skills, including spiritual accompaniment and prayer. In addition to the various professionals involved, the importance of the *family* in palliative care must be emphasized. It has a unique role as the place where solidarity between the generations is seen as a constituent element of the communication of life, and where mutual help is rendered even in times of suffering or illness. Precisely for this reason, in the final stages of life, the family network, however fragile and disjointed it may be in today's world, is still recognized as a fundamental good. Surely we can learn much on this point from cultures where family cohesion, even in times of difficulty, is held in high esteem. A very current topic, for palliative care, is that of pain management. Pope Pius XII clearly legitimized, by distinguishing it from euthanasia, the administration of analgesics to alleviate unbearable pain not otherwise treatable, even if, with death imminent, they cause life to be shortened (*cf. Acta Apostolicae Sedis* XLIX [1957], 129-147). Today, after many years of research, the shortening of life is no longer a frequent side effect, but the same question is repeated with new drugs, which act on the level of consciousness and make possible different forms of sedation. The ethical criterion does not change, but the use of sedation procedures always requires careful discernment and great prudence. In fact, sedation protocols are very demanding on the patient, the family, and on care givers. With sedation, especially when long-term and deep, the relational and communicative dimension that we saw as crucial in accompanying palliative care is absent. Sedation is therefore always at least partially unsatisfactory, and it must be considered as an extreme remedy, to be adopted only after having carefully examined and clarified all relevant factors.

The complexity and sensitivity of the questions connected with palliative care require continued reflection and, to make it more available, it must receive increased attention. This is a task in which believers will find many companions on their journey, all of great good will. It is significant, from this point of view, that representatives of different religions and cultures are participating in your Conference in an effort to deepen their understanding of the questions and to share your commitment. Finally, in the training of health care professionals, public officials and representatives of civil society must cooperate for the common good.

Even as he asks you to pray for his ministry, the Holy Father gladly imparts to you, your Excellency, and to all the participants in the Conference his Apostolic Blessing. To this I add my own personal best wishes and my sentiments of sincere respect.

Cardinal Pietro Parolin Secretary of State