

# ***Considering Benefits and Burdens of Medical Treatment***

Traditionally, a distinction has been made in Catholic health care ethics between *ordinary* and *extraordinary* medical treatments. Today this distinction is understood in terms of considering the *benefits and burdens* of a medical treatment.

**A person has a moral obligation to use those medical treatments that, in his or her judgment,**

- **offer a reasonable hope of benefit, and**
- **do not entail an excessive burden.**

**A person may morally forgo those medical treatments that, in his or her judgment,**

- **do not offer a reasonable hope of benefit, or**
- **entail an excessive burden.**

These are examples (although not an exhaustive list) of *benefits* a medical treatment may have:

- The treatment restores a patient to a healthy condition.
- The treatment improves a patient's condition or functioning in some way.
- The treatment relieves pain or other symptoms that cause suffering.
- The treatment prolongs a person's life.

- The treatment enables the patient to do things that have meaning to him or her or which give satisfaction in life.
- The treatment enables the patient to fulfill specific life goals.

These are examples (although not an exhaustive list) of *burdens* a medical treatment may have:

- The treatment involves or causes severe physical pain or discomfort.
- The treatment has significant debilitating or disabling effects.
- The treatment involves significant risk.
- The treatment would be difficult to obtain.
- The treatment would involve excessive expense for the family or the community.

It should be noted that, "when assessing burdens and benefits, the Catholic tradition considers one's total well-being as a person and not just the benefits of treatment to a particular organ." Thus, "for example, a medical intervention may replace your kidney function (e.g., dialysis) but, given your overall medical condition, may not really be a benefit to you." (1)

Using the principle of benefits and burdens, there is no medical treatment that may automatically be forgone, and

there is no medical treatment that must automatically be used. For example, antibiotics or oxygen may be life-sustaining for some patients or be comfort care for them, but not for other patients. ***The benefits and burdens of a medical treatment must always be assessed on a case by case basis, for each patient in view of his/her particular health condition, in consultation with the patient's health care providers.***

## Sources

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## Notes

1. Catholic Health Association of the United States. *End - of - Life Guides: Advance Directives Expressing Your Health Care Wishes*. St. Louis: Catholic Health Association of the United States, 2015.

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