

Encounter and confrontation between Science and Religion: a particular debate in the first half of the 20th century

Barbara Pezzoni¹, Jutta Maria Birkhoff¹, Chiara Rossetti², Ilaria Gorini¹

¹Department of Biotechnology and Life Sciences, University of Insubria, Varese, Italy; ²Department of Medicine and Surgery, University of Insubria, Varese, Italy

Abstract. In this brief letter the authors wanted to discuss about the possibility of giving the Holy Communion through gastrostomy without losing its sacredness. This debate was opened by the physician Francesco La Cava in the first half of the 20th century.

Key words: Francesco La Cava, gastrostomy, Eucharist

The incessant scientific progress of last centuries has raised cultural and ethical issues forcing science and religion to reflect on human being. Since the dawn of time, medicine has compared with philosophical and theological thought, and religion has related to physiopathology of the human body and to diseases. In the second half of the 19th century there was a serious conflict between scientific and religious thought, because medicine imposed its doctrines, delivering effective remedies, little shared by men of faith. Finally, at the beginning of the 20th century, scientists and theologians attempted a reconciliation about the new medical achievements, both aware of having an important role in the public health and morals, albeit with different opinions. In the first half of the last century, Francesco Cava (1877-1958) conducted a meaningful confront between medicine and religion. He was born in 1877 in Careri (in Southern Italy) and completed his first studies at the Episcopal Seminary of Gerace. Graduated in medicine in 1902, he practiced his profession combining medical art with religious training. His home became a habitual meeting place for lovers of science, faith, but also art and literature. La Cava was a man in constant search for truth, along a path connecting the world of science with the spiritual one (1). This thinking led him to talk about the possibility

of giving the Holy Communion through a gastrostomy without losing its sacredness. In 1944 he published in "Periodica" his considerations about this interesting argue a brief but detailed study *Sulla Comunione Eucaristica attraverso la fistola gastrica. Considerazioni fisiologico-esegetiche di un medico storico* (2). As specified by the author, the topic was suggested to him by R.P. Francesco Hurth S.J., professor of Theology at the Pontifical Gregorian University. The possibility of introducing the consecrated Host directly into the stomach of patients subjected to demolitive intervention of the esophagus was expected in the second half of the 19th century, when gastrostomy began to give first satisfactory results. In his publication, La Cava traced the history of gastrostomy, citing the proposal of Egeberg (1837), the first intervention on humans by Blondlot (1849) and that of Verneuil (1878) with the adoption of the Lister method. He then went on to report a list of surgeons who had perfected this surgical technique. His disquisition continued by reporting the different positions, of that period, about the permanence or the loss of Communion sacredness depending on the methods of its somministration: someone sobstained the manteninig of the sacredness of Host introduced directly into the stomach; someone else considered *manducation* (act of eating) indispensable to justify the

sacredness. La Cava focused on the different positions from both a scientific and an etymological point of view, referring to Holy Scriptures, but also to the language of the “Vulgate” and to the Greek text. La Cava argued that the verb *manduco* could not only referred to the the etymological meaning of “cibum conficere dentibus”: in this way, all individuals unable to orally feed, like edentulous elders, should have been excluded from receiving Communion. On the contrary, *manducation* must be considered as an act necessary to feed oneself, as understood in the Vulgate. Moreover, “There is no doubt that Dominus Noster instituting the Eucharist evidently referred to the most common way of taking food, that is, the mouth; however, there is no evidence to admit that he wanted to exclude, from the Eucharistic bread, those who [...] had been forced to eat it directly by introducing it into the stomach” (3).

Therefore, La Cava shared the possibility of granting the Eucharist even to individual undergone a demolitive surgical operation of the esophagus, by introducing a “pill of unleavened bread” or a “gelatinous capsule containing the Host” into the stomach by means of a probe. He concluded by explaining that his “medical-exegetical considerations” were “motivated exclusively by a feeling of charity towards such sick people deprived of the true bread of life” and thus

expressed his thought as a medical scholar of the Holy Scriptures “subjected to the discipline of the Ecclesiastical Authority” (3).

In the first half of the 20th century, the research of La Cava represented an original example of the encounter between science and religion, in an attempt to protect the weakest segment of the population and those sick people, who, suffering from a major pathology, sought comfort in faith.

References

1. Pezzoni B. Francesco La Cava (1877-1958). Il medico, lo storico dell'arte e l'esegeta. *Biografie Mediche* 2019; 11-12:30–2.
2. La Cava F. De receptione S. Eucharistiae per fistulam gastricam. *Periodica* 1944; 3 –4:161 –9.
3. La Cava F. Un medico alla ricerca della verità. Dal Bottone d'Oriente al volto di Michelangelo e alle parabole del Vangelo. Milano: Edizioni Minerva medica; 1977.

Correspondence:
Barbara Pezzoni
Department of Biotechnology and Life Sciences
University of Insubria, Varese, Italy
E-mail: barbara.pezzoni@uninsubria.it