

The Torah's View on Treating Critically Ill and Hospice Patients

A lecture presentation by Rabbi Aron Wolf,
Director of Chicago Mitzvah Campaign
February 16, 2025



CHICAGO MITZVAH CAMPAIGN

2757 W. Pratt Blvd, Chicago IL 60645

866.MY.RABBI (866-697-2224)

www.ChicagoMitzvahCampaign.com

THE TORAH'S VIEW ON THE ESSENTIAL ROLE OF DOCTORS

1. G-d is the ultimate source of healing.
2. Doctors play a crucial role in providing medical care in accordance with the patient's wishes and religious beliefs.

SOURCE SAMPLES

ורפא ירפא

“And he will surely heal” (Exodus 21:19)

מכאן שניתנה רשות לרופא לרפאות

“From here we learn that **permission** is granted for a doctor to heal” (Berachot 60:1)

“The physician is not merely permitted to heal an illness; he is **obligated** to do so.”
(Ramban, Torat HaAdam)

MEDICAL ETHICS

Medical ethics is the disciplined study of morality in medicine and concerns the obligations of physicians and health care providers to patients.

FOUR MAJOR PRINCIPLES OF MODERN MEDICAL ETHICS

PRINCIPLE	DEFINITION
AUTONOMY	Respect for the patient's right to determine their own choices for their own body/health.
BENEFICIENCE	The duty to "do good."
NON-MALEFICIENCE	The duty to "not do bad."
JUSTICE	To treat all people equally and equitably.

QUESTIONS

- 1) Who decides what is “good” or “bad”, and on what basis?
- 2) What about a case when multiple principles conflict with one another? For example, what if a patient wants something that others may consider to be “doing bad”?

MAJOR FOUNDATIONS OF JEWISH MEDICAL ETHICS

In medical care, as in all fields of human activity, we are bound by G-d to follow the laws and ethics of the Torah.

As such, individuals are not viewed as “owners” but rather as duty-bound guardians/custodians of the bodies that G-d gave them to preserve and protect.

Consequently, the concept of “autonomy” should generally be viewed as a “responsibility” rather than as a “right.”

Every moment
of life is
precious and
has inherent
value.

“Quality of life”
is assessed by
Torah values

**MODERN
PRINCIPLE**

AS ILLUMINATED BY TORAH VALUES

AUTONOMY

As custodian over the body and life that G-d gives him, the patient is duty-bound to follow Torah law. (In certain exceptional cases, Torah law may leave decisions up to the patient.)

BENEFICENCE

The definition of “doing good” or of “not doing bad” is not determined by individual preference, professional consensus or popular opinion. Rather, it is defined by the laws and ethics of the Torah.

**NON-
MALEFICENCE**

JUSTICE

All human life is inherently valuable, regardless of a person’s age or “quality of life” factors such as mobility, ability to socialize, enjoy eating food, and more.

THREE NECESSITIES FOR SURVIVAL

OXYGEN

Nasal cannula

High flow oxygen

Bi-pap

Intubation

HYDRATION

IV fluid (saline or
dextrose, etc.)

NUTRITION

NG Tube

G-Tube (PEG)

J-Tube

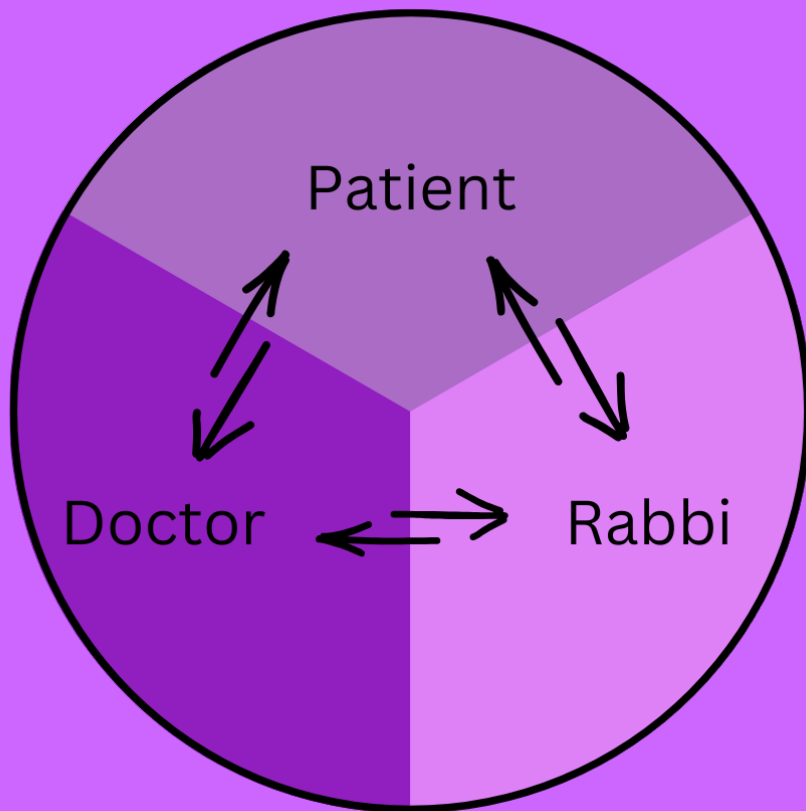
TPN (IV catheter)



**How to decide?
Communication
is key**

PATIENT-DOCTOR-RABBI

A Three-Way Decision-Making Process



1. The patient describes symptoms to the doctor.
2. The doctor provides a medical diagnosis and treatment options.
3. The Rabbi consults with both patient and doctor and then guides the patient how to proceed based on the principles of Jewish law and the individual circumstances of the patient.

DILEMMAS IN MEDICAL ETHICS: EXAMPLE #1

A patient, who is in pain, has metastasized cancer, for which medicine has no cure.
Should the patient receive the following?

CATEGORY	TREATMENT	MODERN MEDICAL ETHICS	JEWISH MEDICAL ETHICS
PROVIDING FOR THE PATIENT'S "NATURAL NEEDS"	OXYGEN (All methods, as applicable)	"Quality of Life" and age are significant factors in the decision.	Always provide - unless it may cause harm to the patient.
	NUTRITION/HYDRATION (All methods, as applicable)		
	PAIN MEDICATION	Yes	Yes, with careful moderation.
PROVIDING "ORDINARY INTERVENTIONS"	IV ANTIBIOTICS	"Quality of Life" and age are significant factors in the decision.	Generally promote. Exceptions may apply, especially when more harm than good may be done.
	BLOOD TRANSFUSIONS		
	THORACENTESIS		
PROVIDING "EXTRAORDINARY INTERVENTIONS"	DIALYSIS	"Quality of Life" and age are significant factors in the decision.	
	INTUBATION/TRACHEOTOMY		



REMINDER

In every situation, Jewish medical ethics require that an expert rabbi always be consulted, since the unique combination of individual factors in each case may lead to a different outcome in Jewish law.

DILEMMAS IN MEDICAL ETHICS: EXAMPLE #2

Extraordinary interventions were already initiated. May they subsequently be stopped/removed/turned off?

DISCONTINUE INTERVENTION	MODERN MEDICAL ETHICS	JEWISH MEDICAL ETHICS
Discontinue dialysis?	Yes	No, it is forbidden to discontinue; some exceptions may apply.
Discontinue intubation or downgrade the oxygen method?	Yes	No – it is forbidden to discontinue or downgrade.
Discontinue IV medication (e.g. pressors)?	Yes	In some cases the Rabbi may suggest not to refill medication.
Discontinue feeding tube?	Yes	No, it is forbidden to discontinue – unless it may otherwise cause harm to the patient.
Deactivate pacemaker or defibrillator (ICV)?	Yes	The Rabbi should consult with the patient's current PCP or specialist who originally prescribed.
Discontinue insulin or other medications	Yes	



REMINDER

In every situation, Jewish medical ethics require that an expert rabbi always be consulted, since the unique combination of individual factors in each case may lead to a different outcome in Jewish law.

WHAT IS PALLIATIVE CARE?

Helps patients with serious illnesses manage their symptoms and improve their quality of life, while also providing curative treatments.

Focuses on easing pain and discomfort, reducing stress, and helping people have the highest quality of life possible. Can help patients and families cope with emotional stressors.

Palliative care facilitates a smoother transition to hospice care when the time arrives.

WHAT IS HOSPICE?

Provides comfort and support to people who are near the end of life, with a life expectancy of 6 months or less.

Focuses on managing pain and symptoms rather than attempting to cure disease or prolong life. Goal is to assist patients to get through the dying process comfortably.

Hospice offers physical, emotional, social, and spiritual support for patients and their families.

CONTRASTING THE HOSPICE APPROACH WITH THE APPROACH OF JEWISH MEDICAL ETHICS

HOSPICE

- May encourage to discontinue some or all of the patient's previously prescribed medications, treatments and lab work.
- Discourages Emergency Room visits.

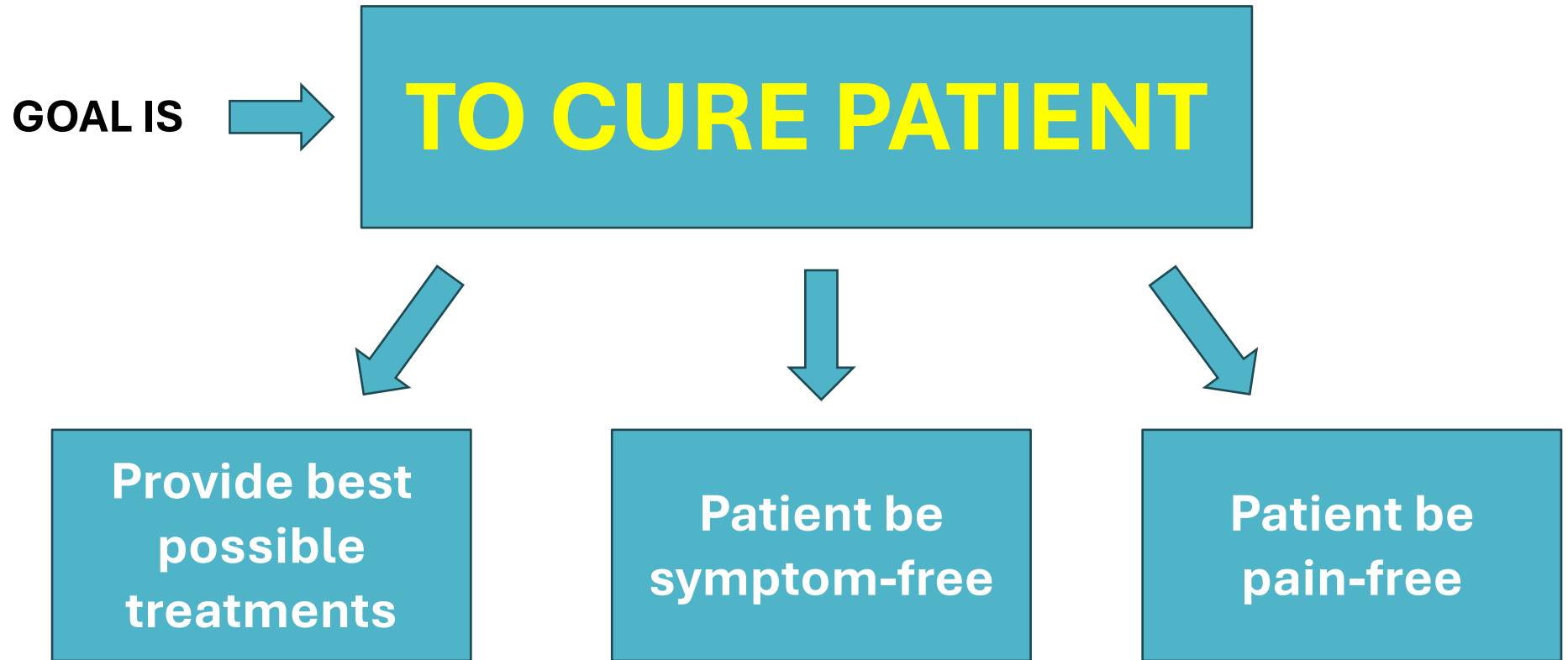
JEWISH MEDICAL ETHICS FOR PALLIATIVE CARE OR HOSPICE PATIENTS

- The general rule is to always provide the best available treatment (unless it may harm the patient)
- Before making significant decisions, patients must consult with a Rabbi experienced in the field of Jewish medical ethics. For hospice patients, common examples of such decisions include when they are being encouraged to:
 - Discontinue any medication or treatment
 - Begin any new medication or change their medication dosage
 - Make any changes in nutrition or hydration

Summary of the Torah's View of the Doctor's Responsibility:

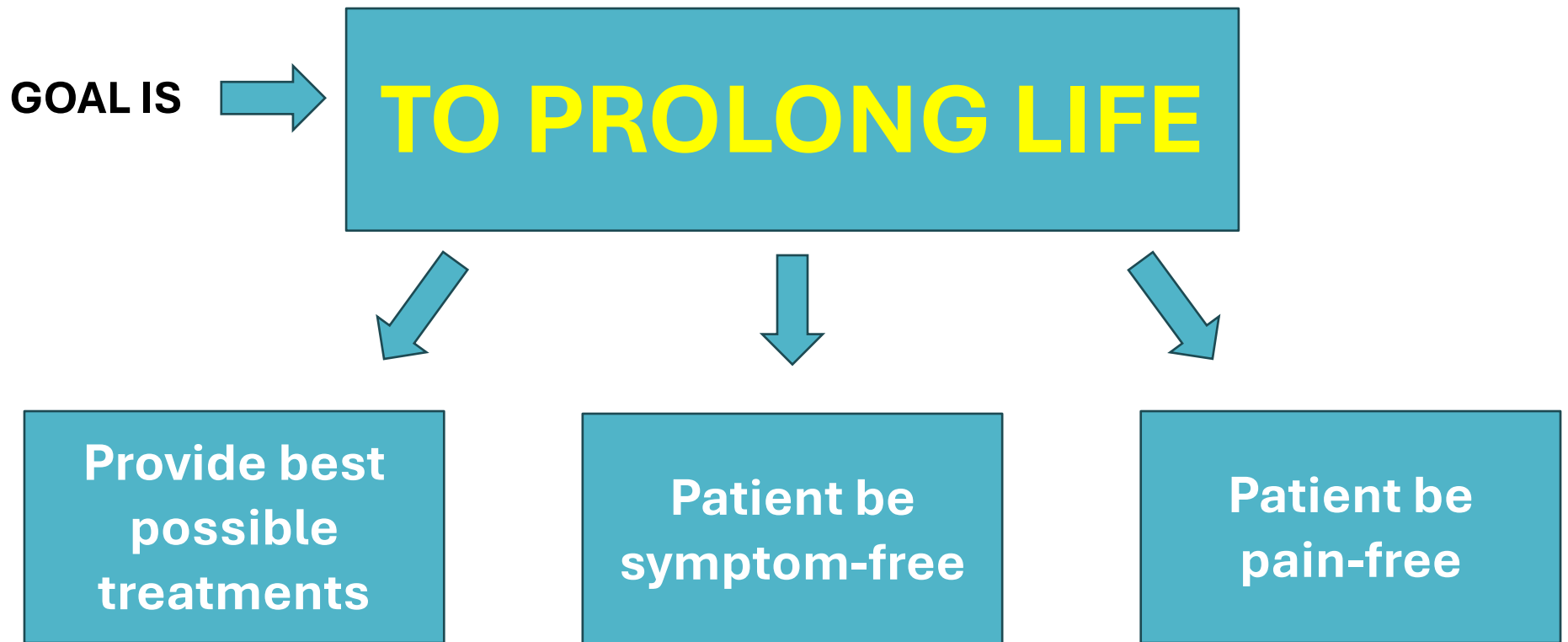
- 1) When treating sick patients**
- 2) When treating incurable diseases**
- 3) When no treatments are available**

1) WHEN TREATING SICK PATIENTS



Patient should be "full code" (no DNR)

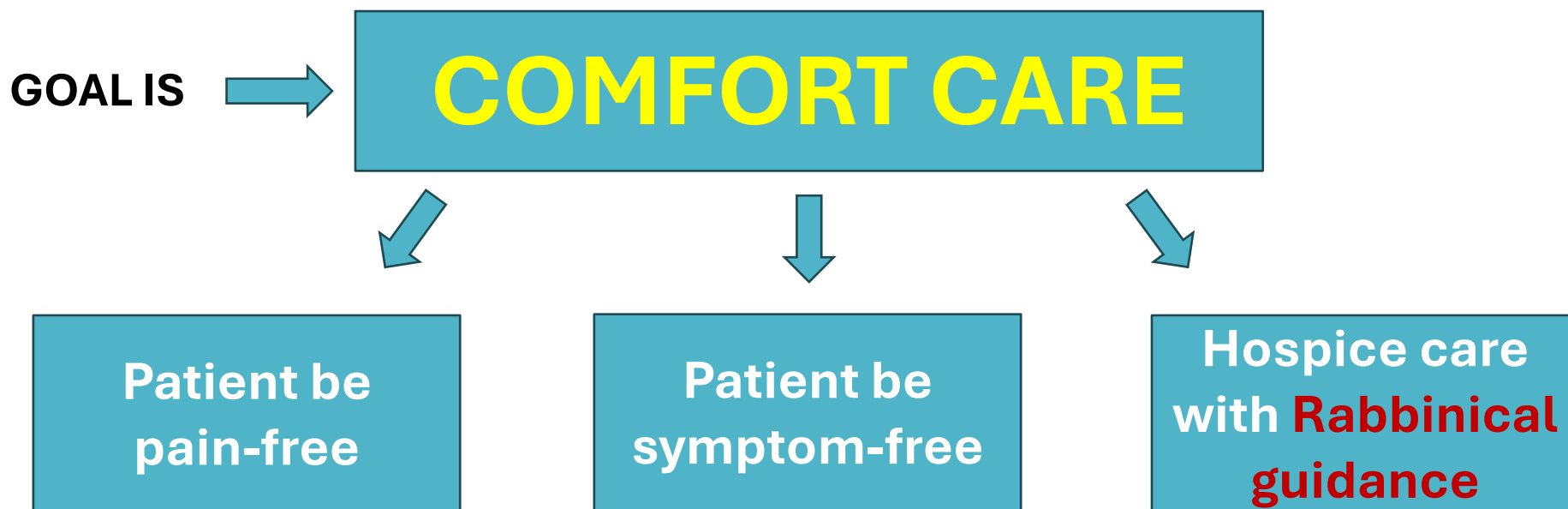
2) WHEN TREATING INCURABLE DISEASES



DNR may be appropriate – must consult Rabbi

3) WHEN TREATMENTS NOT AVAILABLE OR TOO RISKY

(As determined by doctor and rabbi)



OXYGEN	HYDRATION and NUTRITION
Yes	Yes, if no harm is done (consult with doctor and rabbi).

A close-up photograph of a silver stethoscope with a black binaural, resting on a light blue surface. The stethoscope is positioned diagonally, with the chest piece in the foreground and the earpieces extending towards the upper left. The background is a soft, out-of-focus light blue.

POA; ADVANCE DIRECTIVES

Use a halachic
advance directive

Name a healthcare
proxy decision
maker (POA)

Name the specific
Rabbi whom the
POA should consult

Thank you for joining.

For follow up questions, please email:

RabbiWolf@ChicagoMitzvahCampaign.org