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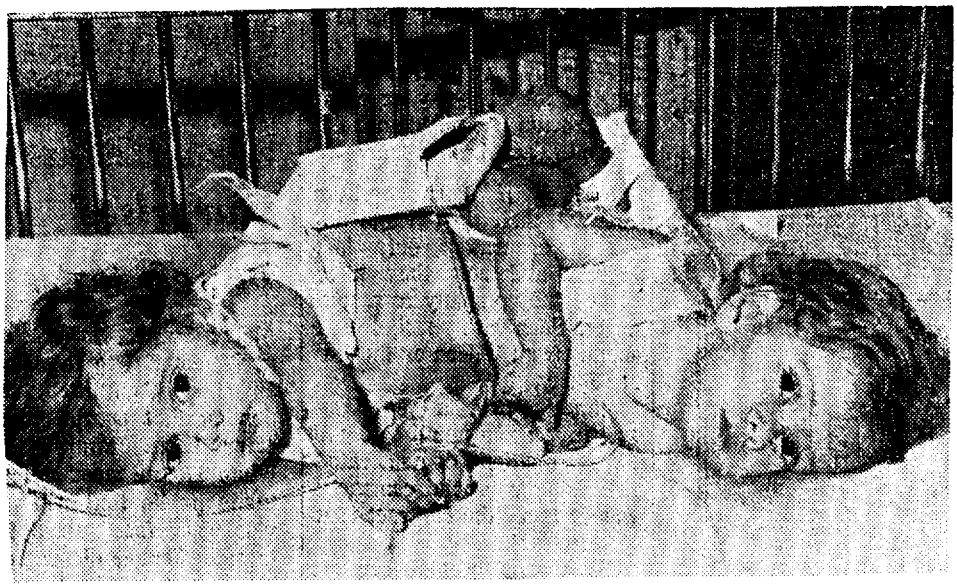
Doctor trusts in power of God

Surgeon who separated Siamese twins prays for guidance before each operation

Dr. C. Everett Koop

led the surgical team that successfully separated Siamese twins Clara and Alta Rodriguez last week in an 8-hour operation.



By Arthur J. Snider *Daily News Science Editor*

The first set of Siamese twins seen in 1956 by Dr. C. Everett Koop frightened him so much he dreamed the night before the operation of making the wrong incision and winding up with two babies, each with the leg of the other.

But no such terror gripped him last Wednesday when in an eight-hour operation he separated Clara and Alta Rodriguez of the Dominican Republic, the third such-joined twins in history to be successfully parted.

He attributes his self-possession to 18 more years of experience plus what he calls "my anchor — a complete belief in the sovereignty of God.

"Having that, knowing that someone else is running the show," he says, "gives me a tremendous amount of comfort."

BEFORE LAST WEEK'S surgery, as before every one of the thousands of operations he has performed, the 57-year-old surgeon prays for guidance.

A few days earlier, he had been in Wheaton to attend the annual board meeting of the Medical Assistance Program (MAP), a missionary organization of which he is vice chairman.

The proceedings were interrupted as Dr. Koop asked for the prayers of the board members and staff in the Siamese operation.

Dr. Koop, one of the world's foremost pediatric surgeons, is also one of the foremost exponents of spiritualism in medicine.

"If I had to go through life thinking that all the day-by-day decisions I make about patients were up to chance and my own infallibility, I would become very discouraged," he states.

As surgeon in-chief of the University of Pennsylvania Children's Hospital, a court of last resort for youngsters with cancer, birth defects and injuries, he is faced daily with life and death decisions.

HE BELIEVES THE LEAST bearable loss for any family is a child who dies of an incurable illness. Death from an accident or gross deformity are anguishing but to watch a child die slowly is torture.

This has led him to devote much time and thought to dealing with parents who suffer.

He has made it a rule to be at the bedside when the end is near so that the parents won't feel the child has been abandoned. This sometimes means returning to the hospital night after night.

"I have learned that the worst moment for parents is when they understand that the child's condition is grave," he says. "It is certainly worse than death itself for by that time they will have become reconciled to its inevitability."

When the outcome appears inevitable, Dr. Koop takes it upon himself to inform the parents rather than leave it to a resident or an assistant.

The information is given in a private room, his office, a quiet lounge, but never in a corridor or lobby or any place where a family cannot let their emotions be demonstrated without embarrassment. Usually, he will hold the hands of both parents as they sit facing him.

HE TRIES TO LEAVE A ray of hope, remembering an incident early in his career when he operated on a large cancer that was impossible to remove entirely.

He told the parent the situation appeared to be out of control and that if the child were his, he would not subject him to the pain of further treatment but take him home and make his death as comfortable as possible.

The patient is an adult now and at the last examination showed no evidence of disease.

"There are enough spontaneous remissions (self-cures) to leave the door open just a crack," he says, "but at the same time one must be careful not to arouse false expectations because the parents' despair will be even greater."

WHEN THE QUESTIONS ARE asked "Why did God do this to my child?" or "What have we done to be punished like this?" or if there is indication of a guilt feeling, Dr. Koop expresses his own beliefs in the "sovereignty of God that has sustained me through my years of practice."

When he reminds parents that the child's fate, even death, is in the hands of God, they are relieved of personal responsibility and guilt.

Dr. Koop has know death in his own family. A few years ago, his 20-year-old son fell when hit by an avalanche while rock-climbing, landed on a ledge 700 feet high and bled to death.

"The result of this act of God, which the world calls an accident, was indescribeable grief for my wife and me, our daughter and other two sons," he explains. "There are still days when I see or hear something that takes me back to that boy's childhood and once again I am overwhelmed with grief.

"But through it all, each member of our family had faith that God knew what He was doing when He took our son. We were, at the time of David's death, all committed Christians. What this seeming tragedy did in the lives of each of us was to lock us in the direction in which God had pointed us."

A COLLEAGUE WHO ATTENDED the memorial service recalls that "Dr. and Mrs. Koop were comforting all of us who had come to comfort them."

This deep calm permeates every aspect of the surgeon's life, personal, social and professional.

His long-time friend, Ray Knighton, president of MAP, says, "One mostly hears of doctors who are not ethical but seldom about a man like this who has reached the peak of his profession, is a biblical scholar who teaches classes, elder in his church, an orator who is in demand as a lay preacher and a gifted writer who could make a living with his pen.

"By age 45 he had achieved every award possible and now he wants to devote the rest of his life to giving himself to people. Few know he is supporting individuals all over the world. He must be giving three-fourth of his income to charity."

DR. KOOP JOINED MAP ABOUT the time it was founded "by accident" about 20 years ago by Knighton in Chicago.

An Eastern pharmaceutical company was seeking to give away excess drugs to a charity and someone suggested calling Knighton who was an executive in the Christian Medical Assn. "and knows every missionary in the world."

Dozens of cartons reached Knighton's Loop office. He moved desks and chairs into the hallway to make room and began contacting medical friends.

The gift led Knighton to wondering whether other pharmaceutical companies had drugs to give away and the medical assistance program was born. In 20 years, more than $100 million in medicines and supplies have been shipped to mission hospitals and clinics in 82 developing countries.

Doctors frequently volunteer their vacation time to go along. Dr. Koop has made so many trips he has come to be called "the modern Schweitzer."

But he quickly files a disclaimer. "The only resemblance is that I also have a beard," he says.