

of the cure), one devil's advocate or 'promoter of the faith' (who was the principal of the diocesan seminary and who argued against it), and one medical expert, a doctor from Tarbes. It is hardly surprising that such a singular body, pursuing its canonical investigation in various French or Italian dioceses, should occasionally appear to be a law unto itself.

It is not uncommon for a bishop to make absolutely no response to the report of the International Committee, not even an acknowledgement. This happened with the Archbishop of Liverpool in the case of John Traynor. And there have been other cases too. Since the war the Lourdes medical authorities have heard nothing of four cases in which the dioceses of Nantes, Lille (twice) and Milan have either failed to reply to all queries or refused to give any reasons for taking no action.

And when the Church does speak it is sometimes less illuminating than when it remains silent. Its own demands for a miracle are that it be 'medically inexplicable', that is to say a cure of a definite illness that had been objectively demonstrated, with a poor prognosis with or without treatment; a cure of a serious and incurable illness; and a cure that happened without convalescence and was perfect and lasting. But in fixing such guidelines the various diocesan commissions have sometimes contradicted one another. So, until 1948, the medical dossier usually said that the cure was inexplicable 'in the light of current medical knowledge'. Then the Bishop of Nantes refused a ruling on the grounds that that phrase was 'unfortunate and clumsy', and that it made all judgement of the cure invalid and pointless. So that formula was dropped and replaced by 'a cure that was outside the laws of nature'. This continued until 1960 when the International Committee pointed out the difficulty of defining 'the laws of nature'. So a third formula, 'medically inexplicable', was adopted and is used today. But although this was the one used in the case of Vittorio Micheli, the Archbishop of Trento in that case in 1976 volunteered the opinion, unprompted by the medical bodies of Lourdes, that the cure could not be explained 'in the present state of science'.

That the canonical authority should ignore the medical reports is bad enough, but there is another form of negative decision which

the International Committee must find even more frustrating. In the Bulletin of the International Medical Association of Lourdes for May 1971, Doctor Olivieri, then medical director, referring to the case of Vittorio Micheli which had just been registered by the International Committee, lamented the 'unfortunate series of five cures recognized as medically inexplicable by the International Committee but postponed or rejected by the ecclesiastic authority'. He was referring to the cures of one French man, one French woman, one Belgian woman and two Italian women dating back to 1952, all of which had been approved by the medical authorities in 1962 and 1964. And in each case the bishop's reason for taking no further action was a medical one. For although the canonical commission is primarily concerned with theological matters it has to understand the medical report, and this means that it usually appoints its own medical adviser. So here the whole medical question can be reopened, but this time it can be effectively decided by a single doctor. That is what happened in these five cases.

The Archbishop of Antwerp ruled that he was 'not in a position to pronounce in favour of the miracle' relating to the cure of Simone Rams, of cancer of the thyroid, because of the different interpretation of the case history by his medical expert. The Bishop of Dijon reached the same conclusion in the cure of Berthe Bouley of multiple sclerosis. The Bishop of Blois made the same ruling in the cure of Edmond Gaultier, of the after-effects of meningo-encephalitis of unknown origin, because of 'an insoluble lack of medical proof'. The Archbishop of Salerno produced the same reason for refusing to proclaim the miraculous nature of the cure of Anna Santaniello, from mitral stenosis (heart disease). And the Archbishop of Sassari did not even nominate a canonical commission to consider the cure of Marchesa Mura, of axillary adenopathy (glandular disease) due to the rooted objections of her own specialist who lived in the diocese, and who questioned both the cure and the diagnosis made in Lourdes, and even his own patient's 'mental balance'.

At the end of the exhausting process of investigation which supports each proclaimed Lourdes cure one can still be left with

a doubt about whether it was worth it. It is, after all, a very strange business. The hostile critics of Lourdes say that the doctors are all believers, and that when it comes down to it they have merely to rubber-stamp an unusual event and say that something 'inexplicable' has happened, and that that is not really *so* much to say; and that all the records and debates and tests merely serve to eliminate some of the objective doubts about the accuracy of an essentially subjective assertion.

Certainly the whole purpose of the Bureau and the Committee is to say that medicine has nothing to say, and knows nothing of what happened. For many doctors, that in itself would serve to condemn the good sense of the proceedings. How can so many learned men sit there and solemnly compete to reassure one another about their combined ignorance? Is it a demonstration of the absurd, or a valuable exercise in professional humility?

And what, in the final evaluation, does the process of proof add to the miracle? Originally the Lourdes Medical Bureau set out to disprove accusations of fraud, gullibility and superstition. Then it battled with the suggestion that all the cures were of hysterical illness. Both those battles are long since won. So what is the present purpose of establishing a certainty about a miracle, a sign from God? Naturally, the work of the Bureau will continue. But it is impossible, after all, to prove that the most routine cure is *not* miraculous. The Bureau uses all the resources of modern science to raise doubts about the certain operation of modern science. But one wonders how many of the cures in any modern hospital could withstand equivalent investigation to the point of complete certainty about diagnosis and effective treatment. If one were to take the records of other terminally ill patients and write on the last page 'Cured at Lourdes', how many of those records would not show up precisely the same possibilities for error as the critics of Lourdes claim can be found in the records of the miraculated?

And suppose one has no doubts? Suppose one sees the hand of God everywhere, as any believing Christian must? If you are such a person then you are one of those whom the shrine is for. Do you yearn for nice distinctions to be made between 'fact' and 'mystery'? Do you strive to reduce mystery to a minimum, and so reduce the

incidence of its healing? What is the purpose of certainty about mystery? All that is written about the cures of Lourdes cannot take away the choice which exists from the very beginning of the argument. The critics of Lourdes say that, 'Because something is said to have happened which does not fit with natural explanations then clearly it did not happen.' The protagonists say, 'Because something happened which does not fit with natural explanations there must be a supernatural explanation.' In logic both are bad arguments which depend on opposing acts of faith.

And for those without either faith, does it matter? They are left in the end with nothing to be certain of except the undisputed reality of the cure.

The epileptic boy, aged six, carried into the baths by the mother of Dr Armand-Laroche, forty years ago. All his life, once a fortnight, this child had had a major fit. Before she bathed him Mme Armand-Laroche told him to pray to the Virgin for his cure. 'No,' he replied, 'I will pray for the cure of all sickness.' He has never had a fit since. The experience of René Scher as he sat among the sick pilgrims for the Blessed Sacrament procession and realized he could see, and looked round at the vast crowd and was afraid. The feelings of Marie Bigot (Miracle No 59), who was cured in successive years (1953 and 1954), first of paralysis and then of total deafness, both times during the Blessed Sacrament procession. She remained however totally blind (all as the result of a stroke) until, on the train home in 1954, lying awake in the night, listening to the sounds that had returned to her, she thought that she imagined the lights of a terrible storm, and was told that she had just *seen* the lights of a passing station. Her eyesight too was perfectly restored.

Serge Perrin (Miracle No 64), sitting in his chair at the Anointing of the Sick, crippled, almost blind, suffering increasingly violent fits, deteriorating steadily for two years, in a dying condition, and saying suddenly to his wife in his super-precise accountant's diction: 'I do not know what has happened to me, but I have the impression that I will not need my sticks much longer, and that I could walk.' He was correct to the last decimal point. He could walk, and that afternoon his sight was so good that with one eye he could read the signs across the esplanade.

Or Evasio Ganora (Miracle No 54), a farm labourer from Casale, who was found to be a certain case of Hodgkin's incurable disease. He responded to no treatment, he grew weaker and weaker, he was thought to have only a short time to live until, on being immersed in the water of Lourdes, he felt a great warmth run through his body, he got up, walked back to the hospital and at once began to work as a stretcher bearer. Years later he was crushed beneath a tractor and was invited, as he lay there, to pray to the Holy Virgin to save his life. He declined, on the grounds that he had had his turn.

And the husband of Alice Couteault, himself a non-believer, waiting on the platform at Poitiers for his wasted, twisted, incoherent and incapable wife to be carried off the train, dying, as she had been for three years, slowly and before his eyes. And waiting while the pilgrim train drew in, and waiting while it stood there, and wondering why no one got off it from one end of the platform to the other – until a door opened in the distance and one small figure climbed down and began to run towards him down the long empty platform; Madame Couteault, instantly and perfectly cured of multiple sclerosis during the Blessed Sacrament procession. By the time Miracle No 58 reached Monsieur Couteault, he was unconscious on the platform, and it was he who had to be carried home.

'In that instant,' said Gabrielle Clauzel (Miracle No 46), referring to the moment at mass on 15 August 1943, her birthday, when her paralysis, pain, racing heartbeat and inability to eat, all just left her, 'In that instant, I was well.'

Appendixes



Appendix I Some statistics of the pilgrimage

1. The proportion of pilgrims by nationality in 1978

The total number of visitors to the town in 1978 was 4,259,000. Since the average number of visitors to other towns of the same size is 1 million, the 'excess' drawn by the pilgrimage is estimated to have been 3,259,000; of which:

37%	came from France
20%	„ Italy
13%	„ Belgium
7%	„ Germany
6%	„ Spain
5.5%	„ United Kingdom
4%	„ Ireland
7.5%	„ Others

The leading national groups included under the heading 'others' are, in descending order: Holland, Switzerland, Austria, U.S.A., Portugal, Yugoslavia, Canada, Luxembourg, Hungary, Poland, Malta, Czechoslovakia, Monaco, Greece, the Ukraine, India, the Philippines, Vietnam, Egypt, Indonesia, Japan, Korea, Lebanon, Ceylon, China, Guadeloupe, Brazil, Mexico, Venezuela, Martinique, Argentina, Costa Rica, Colombia, Chile, Australia, Tahiti, New Zealand, Mauritius, Niger, South Africa, Réunion, Gabon and the Ivory Coast. Pilgrims from sixty other countries also came, alone or in groups of less than thirty. The proportion of foreign pilgrims has been growing steadily since the first foreign groups arrived in 1873.

Source: Press Bureau, Lourdes.

2. The proportion of pilgrims by sex in 1977

The average percentage of all pilgrims is 67% female and 33% male.

Holland sends the lowest proportion of male pilgrims, 27%; Germany, Belgium and Spain send the highest at 38%.

Source: Press Bureau, Lourdes.