Rabbi Moshe Feinstein's Influence on Medical Halacha

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Introduction

I was privileged to know Rabbi Moshe Féinstein, of blessed memory, personally for many years. He received my Torah-learning partner Rabbi Dr. Melvin Zelefsky and me every few weeks for a halachic discussion or *farher*. He was extremely gracious to me when I called him on the phone and interrupted his *shiur* (Talmud discourse) to ask him about an autopsy consent. He personally offered me halachic (Jewish law) guidance in many areas on many occasions. My task here is to describe Rabbi Feinstein's influence on medical halacha as objectively and dispassionately as possible. I will concentrate on thirteen areas in medicine where he had a major influence, including the study and practice of medicine on the Sabbath, Tay-Sachs screening and abortion, contraception, sterilization, artificial insemination, circumcision, dentistry, psychiatry, smoking and halacha, visiting the sick, and *kohanim* (priests) studying medicine.

One of my earliest contacts with Rabbi Feinstein was during my first week in medical school. Our initial activity was the dissection of a human cadaver. I was chosen by my fellow students

Director, Department of Medicine, Queens Hospital Center, Affiliation of the Long Island Jewish Medical Center; Assistant Dean and Professor of Medicine, Albert Einstein College of Medicine of Yeshiva University, New York. to consult with Rabbi Feinstein on this matter. His ruling was that since most cadavers are non-Jewish, it is permissible to dissect a cadaver for the sake of studying anatomy as part of our medical training. Furthermore, since the prohibition of *issur hana'ah* (deriving benefit from the dead) does not apply to non-Jewish bodies, it is permissible to perform autopsies on them. The text of Rabbi Feinstein's responsum indicates that he did not arrive at this conclusion lightly and without considerable struggle to reconcile his ruling with the prohibition, enunciated by the author of *Shulchan Aruch*, of deriving benefit from a Gentile cadaver.

The Physician and the Sabbath

One of the areas where Rabbi Feinstein made major contributions to medical halacha and where he had enormous influence on medical students and physicians alike is in the practice of medicine on the Sabbath and on Jewish holidays.

During our third and fourth years in medical school, we served clerkships and subinternships on the wards of various hospitals, and that is when our problems related to the Sabbath and the Jewish holidays came to the fore. In a series of extremely helpful responsa, Rabbi Feinstein detailed for us the laws of healing on the Sabbath and their application to our questions about carrying, writing, using elevators, telephones, beepers and electric or battery-operated instruments on the Sabbath, turning lights on and off, incising boils and suturing lacerations, scrubbing at surgery, giving injections, infusions, and drawing blood on the Sabbath, attending lectures and conferences or delivering a lecture on the Sabbath, traveling by car to the hospital or having to live near the hospital, treating non-Jews on the Sabbath and collecting fees for house calls on the Sabbath, training in hospitals without Sabbath obligations, and many more.

I vividly remember my first Sabbath in the hospital as an intern. I was on the seventh floor on a medical ward and heard my name paged over the loudspeaker. Out of ignorance, I did not pick

up the closest phone to answer my page but ran down eight flights of stairs, through the basement tunnel to the building across the street where the telephone operators were located. To my exasperation I learned that I was needed on the sixth floor of the first building that I came from. I ran up the stairs and took care of the problem for which I was called. This kind of activity continued throughout that Sabbath. On Saturday night, I was totally exhausted and called Rabbi Feinstein, who emphatically told me that I had done the wrong thing. I should have picked up the nearest telephone and answered my page because it might have been an emergency. "But ninety-nine calls out of a hundred are not emergencies," I protested. Even if only one out of a hundred calls is a real emergency, replied Rabbi Feinstein, you must answer all one hundred because you do not know which call will be the emergency. Furthermore, continued Reb Moshe, if running up the stairs to see your patient takes more time than the elevator or leaves you panting and may thus interfere with your ability to properly evaluate the patient's problem, you have not observed the Sabbath at all but transgressed the commandment of healing on the Sabbath.

Rabbi Feinstein classified many, if not most, hospitalized patients as dangerously ill (pikuach nefesh). According to him, even if a patient brought his illness upon himself through negligence, the Sabbath must be desecrated on his behalf.² The codes of Jewish law, including the Shulchan Aruch³ and Mishneh Torah,⁴ rule that a physician must perform all acts required for the care of his patients and not limit himself exclusively to those things which would remove the danger to life. For a dangerously ill patient, it is permitted to carry through a public thoroughfare the instruments and materials necessary for the patient's care. Such items include the stethescope, keys to narcotics or medication cabinets, radiographs, and the like. Wherever possible, and where no delay in time or loss of efficiency would result, the carrying of these

^{1.} Responsa Iggerot Moshe, Yoreh Deah, Part 1 no. 229.

^{2.} Ibid. no. 127.

^{3.} Shulchan Aruch, Orach Chayim 328:4.

^{4.} Maimonides, M. Mishneh Torah, Shabbat 2:1.

materials should be effected in an unusual manner. Handkerchiefs, house keys, and other nonmedical items may not be carried through the street on the Sabbath even in an unusual manner.

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Writing on the Sabbath is permitted only when absolutely essential to save life, and where no alternative exists. Since writing or typing on the Sabbath is a biblical prohibition, whatever writing can be postponed until after the Sabbath without endangering the proper care of a critically ill patient must be so delayed. A physician is urged, wherever possible, to hire a non-lewish attendant to do whatever writing is essential and to perform otherwise prohibited acts on the Sabbath such as driving the car. For a house officer, a nurse, clerk, secretary, or any other non-Jewish person available in the hospital might be asked to write routine histories, physical examinations, routine medication and treatment orders, laboratory requisition slips, progress notes, and the like. It is preferable to use the electric name plate printer on the Sabbath to identify the patient's name and other vital items on a laboratory slip rather than to write out the slip by hand.5

Where the above alternatives are not possible, and where it is essential to the preservation of life that the physician write, he is permitted to do so. Wherever possible, and where no delay in time or loss of efficiency would result, writing should be done in an unusual manner (shinuy). Writing with the left hand, in a righthanded person, is considered an unusual manner. What is considered essential to the preservation of life? For example, recording the initial relevant history and physical findings of a critically ill patient (e.g., following a heart attack) admitted to the hospital on a Friday night may be permitted. However, only information that is of significant or perhaps essential value to another physician who may be called upon to assist or take over the care of the patient may be recorded. This ruling of Rabbi Feinstein excludes the writing of social, personal, family, and past medical and surgical histories except where directly relevant to the patient's

present illness. Also excluded is the recording of physical findings that do not bear directly on the patient's immediate problem.

Other examples of writing permitted on the Sabbath are recording the progress of a woman in labor, vital signs of a postoperative patient, and drug allergies or sensitivities. If the physician's signature is required to obtain needed drugs (e.g., narcotics) or services (e.g., oxygen) for a seriously or dangerously ill patient, he may sign his name. Although this signature is only a legal requirement unrelated to actual patient care, it is classified as a necessary act, if the nurse refuses to provide the essential drugs or services to the patient without it, and thus the signature is permitted. One is not permitted to sign a death or birth certificate on the Sabbath, even with a shinuy, since there is no issue of preserving life.

Regarding the use of elevators on the Sabbath, Rabbi Feinstein rules that if delay or loss of efficiency might result from a physician's using the stairs, he is obligated to use the elevator to visit his dangerously ill patient. If it is an automatic elevator, the physician may operate it himself. If there is an elevator operator, his religion is irrelevant since he has the same permissibility as the physician himself to help in the care of the patient by bringing the physician there. If no other seriously ill patient is waiting for his services, the physician should walk down the stairs rather than use the elevator.

In regard to the telephone and beepers on the Sabbath, Rabbi Feinstein rules that a house officer may answer all phone calls or paging or beeper messages on the Sabbath since most if not all hospitalized patients are considered in the category of dangerously ill. Most, if not all, messages a house officer receives in the hospital relate to his patients. The house officer may make such calls as are required to care for his seriously ill patient. He should not, however, make calls for non-emergency needs. For example, he should not call the laboratory to obtain results of an elective blood test. If the laboratory is nearby, and if no undue delay or loss of efficiency in caring for the patient is involved, then even important blood test results should be obtained in person, not by phone.

A physician in private practice should secure a telephone

^{5.} Iggerot Moshe, Even Haezer, Part 4 no. 73:4.

answering service or an automatic phone recording and answering machine or hire a non-Jewish attendant to receive and make phone calls. A beeper may be hooked onto one's belt and carried on the Sabbath under the license that it is now part of the normal garb of a physician. If the doctor is "beeped" either in the synagogue or at home for an emergency, he should take a taxi to the hospital or the patient's home rather than drive his own car. However, if an undue delay is expected in securing a taxi, the physician may drive his own car. Rabbi Feinstein rules that a physician is allowed to return from the hospital after an emergency call, preferably with a non-Jewish driver. The key consideration in permitting the physician's return is to remove any reluctance to go again in the future for another emergency.

Turning on electrically or battery-operated instruments such as flashlights, ophthalmoscopes, endoscopes, electrocardiogram machines, respirators, pacemaker-defibrillators and the like is not only allowed but mandated where necessary for the proper care of a critically ill patient. For such a patient, the physician is obligated to perform his diagnostic and therapeutic services in the most efficient manner possible, and with adequate illumination and instrumentation. If a non-Jew is available to activate such instruments, he should be asked to do so. The instruments may not be turned off on the Sabbath except by involving non-Jewish personnel, unless it is likely that the instrument will be needed again for the same or another critically ill patient. If the actual working of the instrument requires an on-off cycling by the physician, it is permitted. However, disconnecting the instrument solely to preserve the life of the battery or bulb is not condoned.

Puncturing a boil or abscess and expressing its contents (mapis mursa) is permitted on the Sabbath, provided this is done specifically as a temporary measure to alleviate suffering. Routine biopsies for diagnostic purposes are not allowed. Because of the danger of infection or possible infection, traumatic injuries of the

skin, i.e., lacerations that are of sufficient magnitude to require stitches, may be repaired by suturing on the Sabbath. Since the natural history of untreated infected wounds is such that septicemia and potentially fatal outcome may result, lacerations are considered in the category of pikuach nefesh (danger to life). Although the prophylactic use of antibiotics might eradicate any infection that might develop, these considerations do not remove the laceration from the category of pikuach nefesh, and thus it may be sutured on the Sabbath.

Rabbi Feinstein never hesitated in giving us his time, his guidance, and his expert rulings. No question was rejected by him as too simple or self-evident. He carefully listened as we presented to him question after question, week after week, month after month, year after year. He made life bearable for us when we served in the hospital on the Sabbath caring for patients. His answers were practical, pragmatic, helpful, and clearly geared to our needs as Torah-observant Jewish physicians. He told us that the drawing of blood for tests should be viewed as involving biblical prohibitions on the Sabbath. Therefore, it should be limited to critically ill patients. The necessity of administering blood, blood products, antibiotics, chemotherapy, glucose, or other solution usually means that the patient is classified as critically ill by halachic standards. Therefore, all activities necessary for the most efficient method of accomplishing this act must be undertaken for the benefit of the patient.

Thus, tearing tape, opening the box containing the infusion set, tearing gauze paper containers, applying antiseptic to the area of injection before and after the injection or infusion, and the like, are all permitted on the Sabbath. If possible, and if no loss of time or efficiency is involved, the Sabbath violations should be minimized. If it is possible to tear tape and make other preparations before the Sabbath, this should be done. If feasible, the antiseptic swab or medication should be applied in a hemostat-held gauze pad so as to approximate the situation referred to in Jewish law as a "sponge with a handle."

Rabbi Feinstein ruled that it is the responsibility and duty of a physician to treat his patients with consummate skill and

^{6.} Ibid. Orach Chayim, Part 4 no. 81.

^{7.} Ibid. no. 80.

^{8.} Ibid. Part 1 no. 131.

competence. Any failure to achieve this competence disqualifies the individual from continuing in his role as a physician. Therefore, within the framework of halachic permissibility, the medical student or house officer must sacrifice some of the "spirit" of the Sabbath in order to obtain the maximum training in his chosen profession. With the clear understanding that there will be no violation of Sabbath law such as taking notes, operating laboratory equipment, etc., the student should attend those lectures and conferences that will add significantly to his mastery of the art and science of medicine. The same principle applies to the physician in practice who may attend certain vitally important conferences on the Sabbath to maintain or improve his level of competence in medical practice, provided no Sabbath laws are violated. The availability of tapes now partially obviates the need to attend general conferences. However, where personal contact with the lecturer is critically important it may be permitted on the Sabbath.

Similarly, if a physician or dentist is invited to deliver an important paper or lecture on the Sabbath, he is permitted to do so provided that he does not desecrate the Sabbath in any way. Hence, he must be within walking distance and may not ride the elevator to the lecture room. He may not use the microphone or other amplifying device, nor use audiovisual material such as slide or movie projectors, and may not write on a blackboard. The appearance of the physician's or dentist's name on the printed program does not violate any Jewish law.

One of the most controversial rulings of Rabbi Feinstein in regard to the Sabbath is his strong position in regard to the obligation of a Jewish physician to treat a non-Jewish patient. Reb Moshe said that the Sabbath laws, both rabbinic and biblical, are set aside when a Jewish physician is actively involved in the care of a patient, Jew or non-Jew. Where the doctor is present, he cannot refuse to treat a patient because he is not Jewish. Nowadays, physicians can find colleagues to cover for them on the Sabbath. This rule applies, of course, only in a medical situation that Jewish

law (i.e., halacha) classifies as pikuach nefesh (danger to life). Rabbi Feinstein's position is based on the ruling of Rabbi Moshe Schreiber, the Chatam Sofer. 10 The impact of not treating a non-Jew, on the safety of all Jews, was a key consideration in Rabbi Feinstein's ruling. His opinion was that under present day societal ethics even the author of Mishnah Berurah would concur. Rabbi Feinstein also rules that if a physician knows beforehand that he will have to be in the hospital on the Sabbath, he should arrange to sleep in or near the hospital on Friday night. 11 Many more responsa deal with the physician's conduct on Sabbath and pikuach nefesh and Shabbat. 12

The Patient and the Sabbath

Rabbi Feinstein was concerned about the patient at least as much as the physician and issued a variety of rulings regarding the patient and the Sabbath. He allows a hearing-impaired person to wear a hearing aid on the Sabbath. He also allows a disabled person who cannot walk without a cane, crutches, walker, wheelchair or the like to go out on the Sabbath using these mechanical aids. They are considered in Jewish law to be as his own legs. If, however, they are only used to steady the gait of someone who can walk unaided, their use on the Sabbath is prohibited. 14

Rabbi Feinstein also allows the measurment of body temperature with a thermometer on the Sabbath even for a patient who is not dangerously ill, since this act does not involve any prohibition at all.¹⁵ The degree of fever for which the Sabbath may be desecrated on behalf of a patient varies. Rabbi Feinstein rules

^{9.} Ibid. Part 4 no. 79.

Responsa Chatam Sofer, Yoreh Deah no. 131; abstract printed in the margin of Shulchan Aruch, Orach Chayim 329.

^{11.} Iggerot Moshe, Orach Chayim, Part 1 no. 131.

^{12.} Ibid. Choshen Mishpat, Part 2 no. 79 and Orach Chayim, Part 4 no. 79.

^{13.} Ibid. Orach Chavim, Part 4 no. 85.

Rabbi M. Feinstein, Personal communication, based on Shulchan Aruch, Orach Chayim 301:15-17.

^{15.} Iggerot Moshe, Orach Chayim, Part 1 no. 128.

that certainly for 102°F one sets aside the Sabbath. Even if someone feels ill at 101°F and asks for Sabbath-prohibited help, one should do so because it is no worse than any external injury for which one desecrates the Sabbath if the patient so requests. In the case of a child who cannot describe a sensation of fever, continues Rabbi Feinstein, if one observes that the child is extremely uncomfortable or gives other signs of illness, even if the temperature is only 100°F or above, one desecrates the Sabbath. If the fever is due to an illness of the lungs or any other internal organ, one desecrates the Sabath even if there is only low grade fever. But if a person has low grade fever due to an ordinary cold, one should not desecrate the Sabbath on his behalf.¹6

For the comfort of a critically ill patient, one is allowed to turn lights on and off either to perform diagnostic or therapeutic procedures or purely for the patient's comfort. A sleep-disturbing lamp may be turned off to give the critically ill patient much-needed rest. If no direct benefit to the patient would result, turning a light off on the Sabbath is prohibited. Rabbi Feinstein also allows the husband or mother of a woman in labor to accompany her in a taxi or car to the hospital on the Sabbath to avoid the potential for danger to her life because of her fear of traveling alone.¹⁷

Food consumed on the Sabbath for medical purposes is permissible. ¹⁸ Mixing foods with medicines to disguise them from recognition is permissible if the medication needs to be taken on the Sabbath. ¹⁹ If a patient who is allowed to take medication on the Sabbath for a serious illness also suffers from another minor ailment for which one is not allowed to take medication on the Sabbath, the patient is not permitted to take the latter medication. In the preparation of the medication for the minor ailment, one has to be concerned about biblical prohibitions such as pounding medicines, cooking, and carrying on the Sabbath. However, if the minor ailment does not require another medication but can be

treated by increasing the dose of the medication for the serious illness, the use of such an increased dose is permitted.²⁰

The Patient and Jewish Holidays.

For a patient who must eat on Yom Kippur, Rabbi Feinstein rules that the patient need not recite the Kiddush or sanctification of the Festival over a cup of wine or other beverage since he fulfills the obligation with the Kiddush in the prayer service of Yom Kippur.21 If a patient is not dangerously ill on Yom Kippur but needs to swallow pills without water to prevent another serious illness from occurring, he is permitted to do so.22 Rabbi Feinstein quotes Rabbi Yisrael Salanter who, during a cholera outbreak, instructed all the healthy townspeople to eat on Yom Kippur because hunger makes one more susceptible to cholera. If physicians state that a woman who had two post-partum psychoses might have another nervous breakdown if she fasts, that woman must eat on Yom Kippur.23 In two separate responsa, Rabbi Feinstein also rules that a patient who is not allowed to fast on Yom Kippur should not have an intravenous feeding line inserted to avoid oral feeding, since the insertion of the needle into the vein solely for that purpose constitues the infliction of a wound (chavalah), which is prohibited on Yom Kippur as it is on the Sabbath.²⁴ Finally, in regard to Yom Kippur, Rabbi Feinstein allows the use of vitamin suppositories for a patient who becomes so weak from fasting that he nearly faints.25 Another lengthy responsum deals with the oral consumption of vitamins by healthy people on the Sabbath. Obviously, on Yom Kippur these are prohibited.²⁶

In regard to Passover, if a patient following surgery has to take pills that might contain *chametz*, he is permitted to do so. In fact,

^{16.} Ibid. no. 129.

^{17.} Ibid. no. 132.

^{18.} Ibid. no. 130.

^{19.} Ibid. Part 2 no. 86.

^{20.} Ibid. Part 3 no. 53.

^{21.} Ibid. Choshen Mishpat, Part 1 no. 39.

^{22.} Ibid. Orach Chavim, Part 3 no. 91.

^{23.} Ibid. Even Haezer. Part 1 no. 65.

^{24.} Ibid. Orach Chayim, Part 3 no. 90 and Part 4 no. 101:3.

^{25.} Ibid. Orach Chayim, Part 4 no. 121.

^{26.} Ibid. Part 3 no. 54.

Rabbi Feinstein rules that the patient is obligated to take the pills even if they definitely contain *chametz* and even if the patient is not now dangeroulsy ill, since the pills became "nullified" as a food before Passover and constitute necessary medicine.²⁷ (This presupposes that the *chametz* in the pills is not edible as a food.)

Kohanim (Priests) and Medicine.

The problem of whether or not a kohen (priest) is permitted in modern times to study and practice medicine has been debated in the rabbinic responsa literature for over a century.28 The majority of rabbis answer in the negative. Rabbi Feinstein states that there is no obligation for a kohen to study medicine.29 He strongly rejects the permissive rulings of some rabbis which are based on the kohen's strong desire to study medicine, on the fact that most corpses nowadays are non-Jews which, according to some authorities, do not defile by overshadowing (tumat ohel), and because a kohenphysician would later save lives. Rabbi Feinstein states that one is not obligated to study medicine to become a physician any more than one is obligated to conduct a lot of business to become rich in order to give charity. R. Feinstein disapproves of such a permissive viewpoint, stating that "it is foolish and vain and should not be articulated by any intelligent person." R. Feinstein also strongly denounces kohanim (priests) who rely on this opinion and attend medical school:

It is clear to me that if the *kohanim* who study medicine and ritually defile themselves through contact with corpses would really wish to know the true law in this regard, they would know whom to ask ... rather, they are not at all concerned about this prohibition and delude themselves ... by claiming to have found [a lenient ruling in] some pamphlet upon which they rely.

It is absolutely clear that it is prohibited for a kohen to ritually defile himself through contact with a corpse, and this fact is well known throughout the world. Therefore, it is absolutely clear that even if the most learned rabbis in the world would be lenient [and say otherwise], one should not listen to them . . .

It is prohibited for *kohanim* to study medicine in medical schools in countries where it is necessary to have contact with corpses. One should not point to some of our ancient Sages who were both *kohanim* and physicians and were able to learn medical science by oral teachings without any physical contact with corpses. In our times, this is impossible and therefore it is prohibited.

Rabbi Feinstein permits a kohen to work in a hospital if he can leave the hospital when a death occurs and if most patients are non-Jews. 30 Rabbi Feinstein allows kohanim who are not physicians to visit patients in the hospital to fulfill the commandment of visiting the sick (Bikur Cholim) because of "great need" such as emotional pain and anguish. 31 He thus permits such visits to a parent or child or spouse or to one's wife's relatives because we assume that most patients are non-Jews and any corpses or parts thereof in the hospital at any given time are those of non-Jews and do not impart ritual defilement by being in the same room or building with a Jew.

Rabbi Feinstein discusses whether or not a kohen is permitted to travel on an airplane in which a Jewish corpse in the baggage compartment is being transported to Israel for burial. Since the plane is made primarily of metals such as aluminum and magnesium, and not of one of the six metals which the Torah specifies as transmitting defilement — gold, silver, copper, iron, tin, and lead — it may be that the body in the hold of the plane does not defile the entire plane. Rabbi Feinstein concludes that the matter requires further study.³² In another responsum, Rabbi Feinstein

^{27.} Ibid. Part 3 no. 92.

^{28.} Rosner, F. "Priests (Kohanim) Studying and Practicing Medicine" Journal of Halacha and Contemporary Society, no. 8, (Fall) 1984 pp. 48-61.

^{29.} Iggerot Moshe, Yoreh Deah, Part 2 no. 155.

^{30.} Ibid Part 1 no. 248.

^{31.} Ibid. Part 2 no. 166.

^{32.} Ibid no. 164. See Cohen, A. "Tumeat Kohen, Theory and Practice", Journal of Halacha and Contemporary Society, no. 15, Spring, pp. 25.

rules that if an autopsy is performed on a *kohen*, his immediate family may arrange and implement his burial without concern about ritual defilement.³⁴ Finally, in regard to a *kohen*, Rabbi Feinstein wrote a very long responsum about a *kohen* who needs to receive an organ or flesh from a cadaver.³⁵

The topics of organ transplantation and the use of organs of medical research are discussed by Rabbi Feinstein in numerous responsa.³⁶

Dentistry

Several of Rabbi Feinstein's responsa deal with dentistry. One lengthy responsum deals with temporary fillings and dental prostheses and ritual immersion (tevilah).37 In brief, all permanent bridgework, or cemented or wired (i.e., permanent) braces do not constitute an interposing barrier (chatzitzah) and therefore do not hinder the regular process of tevilah. However, removable dentures, removable braces, removable bridges, and the like must be removed before tevilah. All fillings, whether temporary or permanent, that were fashioned by a skilled dentist are not a chatzitzah. Tevilah may be performed without their removal unless they have been improperly placed and must be removed and corrected by the dentist, in which case tevilah must be postponed until such correction is made. For example, a filling that is interfering with chewing and must be corrected by the dentist, or a bridge that is painful because further correction must be made on the device. should be fixed before tevilah.

The application of a surgical dressing on the gums during extensive gum work may require delay in the time of *tevilah*. However, says Rabbi Feinstein, if stitches in the mouth are deeply embedded in the gums and are not readily visible, they are not

considered an interposition.³⁸ Plastic coverings on the teeth, however, which are only temporary in nature, must be removed before *tevilah*.³⁹ In another responsum on dentistry, Rabbi Feinstein rules that if a person has pain, it is permissible to fix the teeth even on *Chol HaMoed* (Intermediate Days of Festivals).⁴⁰ Obviously, if there is no pain and if no harm will come from waiting, the patient should postpone the visit to the dentist until after the holiday. A patient with false dentures need not secure a separate set for the Passover holiday.

Smoking and Jewish Law

For many years, I have had numerous intensive discussions with prominent rabbis about smoking and halacha. It has been my personal opinion as a non-rabbi that in the light of overwhelming medical evidence showing the causal relationship of cigarette smoking to cancer of the lung, heart disease, chronic bronchitis, bladder and head and neck cancer and other ailments. Jewish law should aboslutely prohibit this practice.41 Yet, very few rabbis prohibit smoking, although most condemn the practice as foolhardy and dangerous. In his first very brief responsum on this subject in 1964, the year of the first Surgeon General's report on smoking, Rabbi Feinstein asserts that although it is proper not to begin smoking because of the possibility of becoming ill therefrom, one cannot say that it is prohibited because of the danger, since many people smoke, and the Talmud states that "The Lord preserveth the simple." Furthermore, continues Rabbi Feinstein, many rabbinic scholars from previous generations as well as our own era smoke. In addition, even for those who are strict and do not smoke because of their concern about possible danger to health or life, there is no prohibition in lighting the match for those who smoke.42 Rabbi

^{34.} Ibid. no. 165.

^{35.} Ibid. Part 1 no. 230.

^{36.} Ibid. Part 1 no. 229a, 230 231, 232; Part 2 no. 150, 174; Part 3 no. 140, 141; and Choshen Mishpat, Part 2 no. 72.

^{37.} Ibid. Yoreh Deah, Part 1 no. 97.

^{38.} Ibid. Part 2 no. 87.

^{39.} Ibid. no. 88.

^{40.} Ibid. Orach Chayim, Part 3 no. 78.

Rosner, F. Modern Medicine and Jewish Ethics, Ktav and Yeshiva Univ Press, Hoboken, NJ and New York, NY 1986, pgs 363-375.

Feinstein reconfirmed his opinions in a later responsum dated 1981, addressed to me and published in the last volume of his responsa.⁴³ The explanation of his view is that "The Lord preserveth the simple" is a concept which is applied to low incidence natural dangers. The phrase dashu bo rabim (the multitude are accustomed to it) means that society recognizes and accepts the risk, similar to flying in an airplane or walking across a busy boulevard. Although many people may develop lung cancer from smoking, it represents a very small fraction of the many millions of people who smoke. Overeating or failure to exercise properly may involve a far greater risk to health than smoking, yet no rabbi prohibits overeating or sedentariness.

I still do not fully understand this reasoning and continue to press my personal views about the dangers of smoking and my conviction that it should be halachically prohibited. Nevertheless, I accept Rabbi Feinstein's ruling unhesitatingly. He was my posek (rabbinic decisor). He was the posek for the Association of Orthodox Jewish Scientists. He was the posek hador, the rabbinic decisor for the entire Jewish world during the generation in which he lived. His written responsa and other writings are sacred and accepted as authoritative by all Jews.

On the other hand, in view of the deleterious effects of exhaled smoke on others in close proximity to the smokers, Rabbi Feinstein prohibits such passive smoking. He rules that even if the exhaled smoke is only annoying to others, smokers are obligated to smoke in private or far removed from other people. Those whose smoking causes discomfort, headache, or harm to the health of non-smokers are considered as mazikin, people who inflict damage on others. Therefore, concludes Rabbi Feinstein, smokers are prohibited from smoking in the bet hamidrash (house of Torah study) or bet hakeneset (synagogue) if there is even one person who objects.44

Rabbi Feinstein also prohibits the smoking of marijuana

because it is harmful to the body. 45 Even those people who suffer no physical damage may suffer mental harm in that marijuana confuses the mind and distorts one's abilities of reasoning and comprehension. Such a person is thereby not only preventing himself from studying Torah but also from performing other precepts. Marijuana use, continues Rav Feinstein, can also bring on extreme or uncontrollable lusts and desires. Furthermore, since the parents of marijuana users are usually opposed to its use, the users violate the biblical commandment of honoring one's father and mother. Other prohibitions may also be involved in marijuana use, and therefore, he concludes, one must use all one's energies to uproot and eliminate this pernicious habit.

Pyschiatry

Rabbi Feinstein wrote several responsa dealing with psychiatric issues. In one case he rules that a psychotic patient who was healed but still hospitalized for observation need not be removed from the hospital against medical advice in order to hear the blowing of the *shofar* on Rosh Hashanah.⁴⁶ He permits a woman who has had two post partum psychoses to use contraception since another pregnancy would be a serious threat to her mental health.⁴⁷ In another case, Rabbi Feinstein allows the institutionalization of an incurable psychotic girl although she will be fed non-kosher food there.⁴⁸ He also permits the sterilization of this girl to prevent her from engaging in promiscuous sexual behavior. Rabbi Feinstein expresses disapproval of hypnosis in general but permits it for medical purposes.⁴⁹ Finally, he discusses the use of irreligious or agnostic psychiatrists to treat mental illness in Jews.⁵⁰ He expresses concern that psychologists and psychiatrists whose entire therapy

^{42.} Iggerot Moshe, Yoreh Deah, Part 2 no. 49.

^{43.} Ibid. Choshen Mishpat, Part 2 no. 76.

^{44.} Ibid. Yoreh Deah, Part 3 no. 35.

^{45.} Ibid.

^{46.} Ibid. Orach Chavim, Part 1 no. 172.

^{47.} Ibid, Even Haezer, Part 1 no. 65.

^{48.} Ibid. Orach Chayim, Part 2 no. 88.

^{49.} Ibid. Part 3 no. 44.

^{50.} Ibid. Part 2 no. 57.

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consists of verbal analyses and analytical deductions may speak words of agnosticism or impose their value system on their patients. But if they are expert physicians and promise that they will not speak words that are contrary to the tenets of our faith or the commandments of the Torah, one might be able to rely upon them because experts do not lie. One should certainly try to locate a psychiatrist who is an observant Jew. If none is available, concludes Rabbi Feinstein, one should arrange with the therapist that he not speak on matters relating to the Jewish faith or the religious lifestyle. In a related responsum, Rabbi Feinstein was asked about a patient who had a choice between two physicians, one who was Torah-observant but not a specialist and another who was an atheist but a specialist.⁵¹ He answered that one should go to the most expert physician, even if he is an atheist since the overwhelming majority of physicians, whether Gentiles or irreligious Jews, perform their healing tasks appropriately and have nothing to do with religious heresy.

Bikkur Cholim (Visiting the Sick)

In a responsum about visiting the sick by telephone, Rabbi Feinstein points out that the precept of visiting the sick is more than just paying a social call but includes helping the patient in some tangible way and praying on his behalf.⁵² One cannot provide this help over the telephone. Nevertheless, if someone is unable to visit the patient at the bedside, that person partially discharges his obligation of visiting the sick by telephone because he at least performs one of the three parts of the precept, i.e., comforting the patient. Prayers may be recited on behalf of a seriously ill patient even on the Sabbath and Jewish holiaays, says Rabbi Feinstein in another responsum.⁵³ A personal visit to the patient's bedside might also stimulate the visitor to pray more intensely for the patient.

Perhaps, he continues, prayers are more readily answered in the patient's room because the *Shechinah* (Divine Presence) is said to rest at the head of the patient's bed. Finally, in yet another responsum, Rabbi Feinstein says that a person cannot delegate his obligation of visiting the sick to another person; even a prominent individual should visit a simple person.⁵⁴

Circumcision

When I was in post-doctoral training as a fellow in hematology in 1962, I took care of many hemophiliac patients. At that time, I asked Rabbi Feinstein whether it is permissible to circumcise a hemophiliac boy by infusing blood products to reduce the risk of bleeding. He said "no" and gave me a single word explanation: "lechesheyerapeh", when he is healed, then one can perform the circumcision. I told Rabbi Feinstein that hemophilia is a genetic disorder for which there is no cure. His answer again was "lechesheyerapeh," when he is healed.

His first responsum concerning a boy whose brothers died following circumcision is dated 1947.55 His logic is that even with the advent of blood products to replace the missing clotting factor, the risk of bleeding following circumcision is still substantially greater in a hemophiliac child than in a normal infant. This logic is based on the ruling enunciated by Maimonides in his Mishneh Torah.56

One may circumcise only a child that is totally free of disease, because danger to life overrides every other consideration. It is possible to circumcise later than the proper time when the perinatal period is over and the danger of prolonged bleeding of the otherwise healthy child is no longer viewed as potentially lifethreatening, but it is impossible to restore a single [departed] soul of Israel forever.

Feinstein, Rabbi M. in Halachah Urefuah (Edit, M. Hershler), Vol. 1, 1980, pg. 130.

^{52.} Iggerot Moshe, Yoreh Deah, Part 1 no. 223.

^{53.} Ibid. Orach Chayim, Part 1 no. 105.

^{54.} Ibid. Yoreh Deah, Part 1 no. 222.

^{55.} Ibid. Part 1 154.

^{56.} Mishneh Torah, Milah 1:18.

In 1969, I published an article on hemophilia in the Talmud and talmudic writings.⁵⁷ Again I asked Rabbi Feinstein whether a hemophiliac boy can be circumcised and his answer was the same: "lechesheyerapeh." In more recent years, with the availability of blood clotting hemophilic factor concentrates, the risk of circumcision has decreased significantly, so that Rabbi Feinstein permitted it. An underweight baby can be circumcised as soon as it reaches adequate weight. For a baby who had an exchange transfusion, an additional seven day waiting period is required before circumcision can be allowed.⁵⁸

In another responsum, Rabbi Feinstein rules against the use of the Mogen (Bronstein) circumcision clamp because if the clamp is left on for more than a minute or so, complete hemostasis results, so that no drop of blood flows freely, thereby invalidating the circumcision. The also expresses concern that the use of clamps in general might lead to circumcision's becoming a surgical rather than a ritual procedure, performed by non-Orthodox physicians, clergymen or laymen rather than by an Orthodox Jew. He also says that the baby suffers more when a clamp is used. He therefore recommends a simple shield or butterfly as a guard for ritual circumcision. Numerous other responsa deal with technical aspects of circumcision.

Tay-Sachs Disease and Abortion

One of the controversial areas where Rabbi Feinstein's opinion was sought is Tay-Sachs screening, amniocentesis, and abortion of Tay-Sachs-affected fetuses. In 1973, the Association of Orthodox Jewish Scientists sent a delegation, of which I was a member, to ask Rabbi Feinstein about the advisability for a boy or girl to be screened for Tay-Sachs disease, and if it is proper, at what age the

test should be performed. We further asked him whether screening should be performed as part of a publicized screening program or only as a private test. His answer was:

It is advisable for one preparing to be married to have himself tested. It is also proper to publicize the fact, via newspapers and other media, that such a test is available. It is clear and certain that absolute secrecy must be maintained to prevent anyone from learning the result of such a test performed on another. The physician must not reveal these to anyone... These tests must be performed in private and, consequently, it is not proper to schedule these test in large groups as, for example, in Yeshivas, schools, or other similar situations.⁶²

Rabbi Feinstein also points out that most young people are quite sensitive to nervous tension or psychological stress and, therefore, young men (below age twenty) or woman (below age eighteen) not yet contemplating marriage should not be screened for Tay-Sachs disease. Finally, Rabbi Feinstein strongly condemns abortion for Tay-Sachs disease and even questions the permissibility of amniocentesis which proves the presence of a Tay-Sachs fetus, since amniocentesis is not without risk, albeit small.⁶³

Rabbi Feinstein was also asked about the use of contraceptives by a woman who gave birth to two Tay-Sachs babies, both of whom died in infancy. In that case, he disallowed the use of the contraceptive diaphragm but permitted the use of spermicidal foams and jellies.⁶⁴ Rabbi Feinstein also allows the use of spermicidal foams and jellies by a woman who should not become pregnant because of danger to life.⁶⁵ However, he does not allow sterilization of a woman with mental anguish who had previously given birth to two physically defective children,⁶⁶ nor for a woman who gave birth

^{57.} Rosner, F. "Hemophilia in the Talmud and Rabbinic Writings." Annals of Internal Medicine, Vol. 70, pp. 833-837, 1969.

^{58.} Iggerot Moshe, Yoreh Deah, Part 2 no. 121.

^{59.} Ibid. Part 2 no. 119.

^{60.} Ibid. Part 3 no. 99.

^{61.} Ibid. Part 1 no. 155, 156, 157, 158; Part 2 no. 118, 120, 123; Part 3 no. 97, 98, 100, 101, 102, 105.

^{62.} Ibid. Even Haezer, Part 4 no. 10.

^{63.} Ibid. Choshen Mishpat, Part 2 no. 71.

^{64.} Ibid. Even Haezer, Part 1 no. 62.

^{65.} Ibid. Part 3 no. 21.

^{66.} Ibid. no. 12.

to two blind children.⁶⁷ Instead he suggests that she practice contraception.

The objections to amniocentesis and abortion in Jewish law are predicated on considerations surrounding the fetus. Extreme emotional stress in the mother leading to suicidal intent might constitute one of the situations in which abortion would be sanctioned. If a woman who suffered a nervous breakdown following the birth (or death) of a child with Tay-Sachs disease becomes pregnant again, and is so distraught with the knowledge that she may be carrying another child with the fatal disease that she threatens suicide, Jewish law might allow amniocentesis. If this procedure reveals an unaffected fetus, the pregnancy continues to term. If the result of the amniocentesis indicates a homozygous fetus with the Tay-Sachs disease, rabbinic consultation regarding the decision of whether or not to perform an abortion should be obtained. No general rule of permissiveness or prohibition can be enunciated in regard to abortion in Jewish law. Each case must be individualized and evaluated on the basis of its merits, taking into consideration all the prevailing medical, psychological, social, and religious circumstances. Two lenghty responsa on abortion were published in the last volume of Rabbi Feinstein's responsa.68

Contraception

There are at least twenty-five responsa in the *Iggerot Moshe* which deal with contraception. Most methods of contraception are discussed. For example, Rabbi Feinstein allows the use of a diaphragm in a case where pregnancy would be dangerous.⁶⁹ If there is great danger, he even allows the use of a condom by the male if other methods of contraception cannot be used.⁷⁰ Rabbi Feinstein was very concerned that his lenient rulings in these cases should not be widely applied. He writes that he thoroughly investigated not only the medical danger of pregnancy but also the

character of the married couple as to their level of Jewishness, Jewish practice, and G-d fearing nature. He gave lenient rulings for finite periods of time and asked couples to return to him periodically to reassess the situation. In the case of a man who wanted to marry a woman with serious kidney disease, Rabbi Feinstein allowed the use of a diaphragm until the renal disease improved. He also said that if bedrest throughout pregnancy removes the danger, then the diaphragm is not allowed. He asked that his ruling not be widely publicized. Since Rabbi Feinstein himself decided to publish his views in his responsa, it is not contrary to nor disrespectful of his wishes to discuss them here.

Rabbi Feinstein's first responsum on the oral contraceptive pill, written in 1962, allowed the temporary use of the pill by a woman who already had two children, a boy and a girl, who would have a difficult time raising more children until the first two were somewhat older. The pill does not violate the prohibition of emitting semen for naught.⁷² Rabbi Feinstein voices concern about vaginal bleeding and spotting from the pill. He also allows the pill to be used by a woman who is weak and would find pregnancy difficult even if she has not yet had two children. After three years, when she has regained her strength, she should stop using the pill.⁷³

In another responsum he writes that temporary sterility in a male for about six months following contraceptive injection does not violate the prohibition against castration.⁷⁴ The intrauterine device (IUD) should not be used to prevent pregnancy in a woman with varicose veins who cannot take the pill, because the IUD causes bleeding and may be an abortifacient. Rather, Rabbi Feinstein suggests the use of the diaphragm where pregnancy would constitute a danger to the mother.⁷⁵ He also allows the use of spermicidal jellies but claims they are unreliable and, therefore, the diaphragm is preferable. There is no permissibility however for the

^{67.} Ibid. no. 13.

^{68.} Ibid. Choshen Misphat, Part 2 no. 69 and 70.

^{69.} Ibid. Even Haezer, Part 1 no. 63.

^{70.} Ibid.

^{71.} Ibid. Even Haezer, Part 1 no. 64.

^{72.} Ibid. Even Haezer, Part 2 no. 17.

^{73.} Ibid. Part 3 no. 24.

^{74.} Ibid. no. 15.

^{75.} Ibid. no. 21.

man to use the condom, and the case must be reassessed in two years because the danger of pregnancy may no longer be present.⁷⁶ The pill is discussed in several additional responsa.⁷⁷

In the case of a man who was angry when he learned that his wife who had already given him five children was using a diaphragm because of mental illness, Rabbi Feinstein ruled that the husband should not be upset and should continue living with her. He suggested, however, that the wife's illness be reevaluated after a few years to determine whether the danger of pregnancy has receded. He also asked that his ruling not be widely publicized lest people apply leniencies in other cases where such may not be allowed. The rhythm method is also discussed by Rabbi Feinstein. He allows this method of contraception only after the couple has already had two children and only if it would be difficult for them to have and raise more children.

Rabbi Feinstein allows a woman to use contraception following a cesarian section delivery until the danger from another pregnancy passes, even for up to a year or more depending on the medical circumstances.⁵¹ In another responsum, he reiterates the permissibility of the use of either the diaphragm or the pill by the woman, but not a condom by the husband, where pregnancy might be dangerous.⁵² A couple that was guilty of child abuse was temporarily allowed for two years to use the diaphragm as a method of contraception because of the mother's mental illness.⁵³ Similarly, Rabbi Feinstein allows the use of the diaphragm because of depression in the mother.⁵⁴ He again advises against the pill and against the IUD because they cause vaginal bleeding and spotting.

If a woman insists on using a diaphragm to prevent pregnancy even though she does not suffer from any medical or psychiatric illness, the husband is allowed to remain with his wife and cohabit with her.⁸⁵ Rabbi Feinstein disallows a sick man from marrying a woman who would use a diaphragm to prevent pregnancy.⁸⁶ Only maternal illness can allow the use of contraceptives. Finally, Rabbi Feinstein discusses the use of contraception to enable a woman to care for a sick child,⁸⁷ and the obligation of a man with Marfan's Syndrome to marry a fertile woman who can become pregnant and give birth.⁸⁸

In summary, Rabbi Feinstein rules that in Jewish law contraceptive methods and devices cannot be used except for specific medical indications such as rheumatic heart disease, severe renal disease, and similar situations, where pregnancy may constitute a serious threat to the health of the mother. Jewish law requires that the marital act be as normal as possible. When medical indications, which include psychological factors, necessitate the use of a contraceptive technique, Jewish law grades methods of contraceptive techniques from least to most objectionable in the following order: oral contraceptives, chemical spermicidals, diaphragms and cervical caps to be used by the wife, condoms, and coitus interruptus. The most objectionable method, and one that is least often permitted under Jewish law, is the use by the male of the condom, or withdrawal (i.e., coitus interruptus).

Sterilization.

Surgical or physical impairment of the reproductive organs of any living creature violates Jewish law, except in cases of urgent medical necessity. In the case of males, upon whom the biblical commandment to be fruitful and multiply rests, only a risk to life (e.g., cancer), can justify such procedures. Hence, unless medically

^{76.} Ibid.

^{77.} Ibid. Part 4 no. 72 and 74.

^{78.} Ibid. Part 3 no. 22.

^{79.} Ibid.

^{80.} Ibid. Part 1 no. 102 and Part 4 no. 32:3.

^{81.} Ibid. Part 4 no. 62:2.

^{82.} Ibid. no. 67.

^{83.} Ibid. no. 68.

^{84.} Ibid. no. 69.

^{85.} Ibid. no. 70.

^{86.} Ibid. no. 71.

^{87.} ibid. no. 73:1.

^{88.} Ibid. no. 73:2

demanded, the ligation of the vas deferens during prostatectomy should be avoided. The prohibition against impairing the male reproductive organs and functions is unrelated to man's fertility. It applies even to a man known to have become sterile or impotent, whether by reason of age or of anatomic or physiologic aberration that occurred after birth. If he was born sterile, the above prohibition may not apply. Vasectomy as a "population control" technique is not condoned in halacha. It is forbidden to assist at such surgery in any way on man or animal.

Rabbi Feinstein permits surgery on a child with an undescended testicle even if the testicle may have to be totally removed.⁸⁹ He disallows hysterectomy in a case where the woman has mental illness, renal disease, and varicose veins. He suggests that she use a diaphragm since another pregnancy might be dangerous for her life.⁹⁰ As mentioned above, he also disallows sterilization of a woman who gave birth to defective children,⁹¹ or in another case, to two blind children.⁹² Even reversible Fallopian tube tying or cutting is not permissible because this constitutes a forbidden act of castration.⁹³ Rabbi Feinstein is strongly opposed to vasectomies even in men who are already infertile.⁹⁴ He also objects to the cutting of the vas deferens during prostate surgery unless it is absolutely essential medically.⁹⁵

Rabbi Feinstein disallows the sterilization of a woman following several cesarian sections, 96 or in cases where pregnancy would be dangerous, unless no other method of contraception can be used. 97 Fear of pregnancy by a woman is not sufficient reason to

allow sterilization; only if her life is in danger is this procedure permitted.98

Artificial Insemination and Fertility Testing

Artificial insemination using the semen of donor other than the husband (A.I.D.) is considered by most rabbis to be strictly prohibited for a variety of reasons, including the possibility of incest, confused genealogy, and problems related to inheritance. However, without a sexual act involved, many rabbis hold that the woman is not guilty of adultery and is not prohibited from living with her husband.⁹⁹ The child born from A.I.D. does not carry any stigma of illegitimacy, according to most. In an extremely controversial ruling in 1959, Rabbi Feinstein permitted the use of semen from a Gentile for insemination into a Jewish woman because all the technical problems of A.I.D. do not exist in such a case.¹⁰⁰ Although he was strongly criticized for this ruling, he reiterated its correctness in a much later responsum dated 1981.¹⁰¹

The use of the husband's sperm for artificial insemination is certainly permissible. ¹⁰² If the husband happens to be a physician it is preferable that he perform the insemination. ¹⁰³ If a woman has a short menstrual cycle, Rabbi Feinstein allows her to be inseminated with her husband's sperm even during her *niddah* period. ¹⁰⁴ Similarly, he allows such a woman to shorten her *niddah* period and begin counting her seven "clean days" immediately upon complete cessation of her menses, even before six days to allow her cohabitation with her husband to coincide with early ovulation, to permit a pregnancy to result. ¹⁰⁵ Sperm analysis and sperm

^{89.} Ibid. Part 1 no. 12.

^{90.} Ibid. no. 13.

^{91.} Ibid. Part 3 no. 12 and Part 4 no. 35.

^{92.} Ibid. Part 3 no. 13.

^{93.} Ibid. Part 4 no. 32.

^{94.} Ibid. no. 30 and 31.

^{95.} Ibid. no. 28-29.

^{96.} Ibid. no. 33.

^{97.} Ibid.

^{98.} Ibid.

^{99.} Ibid. Part 1 no. 10

^{100.} Ibid. no. 71.

^{101.} Ibid. Part 4 no. 32:5. See Cohen, A. "Artificial Insemination" Journal of Halacha and Contemporary Society, 13, Spring, 1986, pp. 43.

^{102.} Ibid. Part 2 no. 18.

^{103.} Ibid. Yoreh Deah, Part 3 no. 54.

^{104.} Ibid. Even Haezer, Part 2 no. 18.

^{105.} Ibid. Yoreh Deah, Part 2 no. 84.

procurement for fertility testing are permissible, according to Rabbi Feinstein, and do not violate the prohibition of emitting semen for naught since the semen may be used to fulfill the commandment of procreation. ¹⁰⁶ Preferably, the sperm should be obtained by a method other than masturbation. Rabbi Feinstein also wrote a lengthy responsum on testicular biopsy as part of fertility testing. ¹⁰⁷

Miscellaneous Responsa

Many other medical and medically-related topics are discussed in the hundreds of responsa in the seven volumes of Iggerot Moshe. A small sampling is all that time and space will allow: A blind man is allowed to be accompanied by his guide dog into the synagogue. 108 It is preferable that he sit with his dog near the door so as not to disturb those congregants who fear animals. A patient with a paralyzed left arm still dons phylacteries on that arm. 109 A patient with an indwelling catheter may recite his prayers if he covers the catheter and collection bag. 110 Rabbi Feinstein prohibits a man from taking medication to dye his hair.¹¹¹ He allows a person to donate blood for financial compensation. 112 He allows people to be professional ballplayers for a livelihood even though there is a chance they may be injured. 113 He prohibits the elective consumption of vitamins on the Sabbath by healthy people. 114 Labor should not be induced purely for the sake of convenience. 115 Rabbi Feinstein is not critical of people who suffer hunger by going on a strict diet to lose weight to look handsome or pretty. 116 He also

discusses cosmetic surgery for girls concerned about finding a mate.¹¹⁷ There is even a very unusual responsum, dated Purim 1981, on the death penalty, in response to an inquiry by the Governor of the State of New York.¹¹⁸

Conclusion

How does one assess the influence of this humble man, Reb Moshe, as he was known by everyone? A recent book on the life and ideals of HaGaon Rabbi Moshe Feinstein¹¹⁹ states that for half a century in America these two-words — Reb Moshe — were synonymous with Torah greatness, encyclopedic knowledge, compassion, generosity, piety, faith and countless other precious and sacred concepts. He left us many legacies. He was a giant in halacha. He was a giant in the fear of G-d. He was a giant in prayer. He was a giant in modesty. He was a giant in humility. He was a giant in kindness. He was a giant of inspiration to his countless students and disciples among whom I was privileged to be one.

He was also the rabbinic decisor (posek) for the medical students and physicians of the Association of Orthodox Jewish Scientists. He answered literally hundreds of our questions, some in writing, many more orally. He gave us the ability to practice medicine as Torah-observant Jews. He was practical and pragmatic, understanding and sensitive, knowledgeable and down to earth. He was never timid. His answers to us were clear, concise, precise, and to the point. His answers adhered scrupulously to the laws of the Torah but also were in keeping with high standards of medical practice. All those years he was our guide and our inspiration, and his memory lives on in our hearts and in our minds.

^{106.} Ibid. Even Haezer, Part 1 no. 70; Part 2 no. 16; Part 3 no. 14 and Part 4 no. 27.

^{107.} Ibid. Part 2 no. 3.

^{108.} Ibid. Orach Chavim, Part 1 no. 45.

^{109.} Ibid. no. 8.

^{110.} Ibid. no. 27.

^{111.} Ibid. no. 82.

^{112.} Ibid. Choshen Mishpat, Part 1 no. 103.

^{113.} Ibid. no. 104.

^{114.} Ibid. Orach Chavim, Part 3 no. 54.

^{115.} Ibid. Yoreh Deah, Part 3 no. 74 and Orach Chayim, Part 4 no. 105:6.

^{116.} Ibid. Coshen Mishpat, Part 2 no. 65.

^{117.} Ibid. no. 66.

^{118.} Ibid. no. 68.

^{119.} Finkelman, S. Reb Moshe. The Life and Ideals of HaGaon Rabbi Moshe Feinstein. New York, Mesorah Publications, 1986, 270 pgs.