

RECOGNITION OF MIRACLES: ITS PROCESS IN ROME AND LOURDES

Part II: The Process in the CCS - A Comparative Note

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Miracles are a sign of God's presence in the world and his mighty deeds, and veneration of the Church's Saints is part and parcel of her history. For the official beatification and canonization of these holy people, the Church considers miracles performed by God through their intercession a prerequisite. Similarly, many miracles occur at Lourdes, an ecclesiastically-recognized place of pilgrimage, through the intercession of Our Lady. With Part I (*Iust.* Vol. 7, n. 1) of this article having treated the process of recognition of miracles at Lourdes, here in Part II the author deals with the canonical process for recognizing miracles of confessors and martyrs as currently followed by the CCS. The article concludes on a comparative note, indicating the similarities and dissimilarities between the recognition processes observed by CCS and MBL.

Introduction

In the first part of the article, we saw the process followed in Lourdes for the verification of exceptional cures happening there and for their official declaration as miracles. Here in the second part, I wish to present very briefly the process for verifying miracles that are presented to the Congregation for the Causes of the Saints (CCS). I will conclude by comparing this process with that followed at Lourdes.

II. Process in the Congregation for the Causes of the Saints.

I do not intend to extensively detail the process of recognition of miracles followed by CCS, but only to very briefly outline the

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following: the documents dealing with the procedure; why miracles are required; what kinds are preferred; the structure of the process in two phases, diocesan/eparchial and Roman; two stages of the latter, study and judgment; the relevance of experts in the process; the constitutive elements to be verified; the authority competent to declare a presumed miraculous cure a miracle; and, finally, the similarities and dissimilarities between the procedures at Rome and Lourdes.

1. Main Documents Dealing with the Process

We see the current law on the canonization of saints in several documents. The topic is governed by the *Codex Iuris Canonici* (CIC), promulgated on January 25, 1983;¹ the *Codex Canonum Ecclesiarum Orientalium* (CCEO), promulgated on October 18, 1990;² “The Norms to be Observed in Inquiries made by Bishops in the Causes of Saints” (Norms), issued by the Congregation for the Causes of the Saints (CCS) and approved by the Roman Pontiff on February 7, 1983;³ and the *Regolamento*, or bylaws, of the Congregation for the Causes of Saints (*Regolamento della Sacra Congregazione per le Cause dei Santi*) approved by John Paul II on March 21, 1983.⁴ The latest document of this kind is *Sanctorum Mater*, the instruction for conducting diocesan or eparchial inquiries in the Causes of Saints, published by CCS on May 17, 2007.⁵ The two codes, each having only one canon on canonization, do not deal with the process in detail. Instead, they refer to the relevant special norms established by the Roman Pontiff through the

¹*Codex Iuris Canonici*, Auctoritate Ioannis Pauli PP. II promulgatus, AAS 75 (1983) Pars II, 1- 317) For the English translation see, The Canon Law Society of Great Britain and Ireland, *The Code of Canon Law* (Bangalore: Collins for Theological Publications in India, 4th print, 1991), p. 250.

²*Codex Canonum Ecclesiarum Orientalium*, Auctoritate Ioannis Pauli PP. II promulgatus, AAS 82 (1990) 1033-1353. For the English translation see Canon Law Society of America, *Code of Canons of the Eastern Churches, Latin-English Edition New English Translation*, Washington, DC 20064.

³Congregation for the Causes of the Saints, *Normae servandae in inquisitionibus ab episcopis faciendis in Causis Sanctorum*, AAS 75 (1983) 396-403. For the English translation, see the “Norms to be Observed in Inquiries Made by Bishops in the Causes of Saints,” in *New Laws for the Causes of the Saints*, pp. 10-17.

⁴In an audience granted to the then Cardinal Prefect, Pietro Palazzini on 21 March 1983, John Paul II approved this *Regolamento*.

⁵Congregation for the Causes of the Saints, *Sanctorum Mater* Instruction for conducting diocesan or eparchial inquiries in the Causes of Saints, in AAS 99 (2007) 465-510.

CCS.⁶ The Congregation has recently introduced a small reform in the study and evaluation of miracles attributed to Blesseds or Venerables. "Regulation of the Medical Board of the Congregation for the Causes of Saints, 23.09.2016"⁷

2. Requirement of Miracle

By canonization, the Church discerns the signs of God's presence and work among the people of God and in a Servant of God in a magnificent way. Affirming the holiness of such people, it presents to the universal Church models of sanctity to follow (DPM-Intro.).

A canonical investigation into the martyrdom or heroic practice of the virtues by a Servant of God aims to verify his or her sanctity. Virtuous words and actions may be prompted by mixed motivations: as Innocent IV and Benedict XIV affirm, the hidden or secret life of a Servant of God, which is known only to God, may not have been very virtuous or may even have been lax ("*... quia in secreto potuerunt laxiorem vitam ducere*"). Hence, the Church depends on miracles as a divine sign. For if God wills to grant the grace of a miracle through the intercession of a Servant of God, it is a clear sign of his/her sanctity. Thus, canonizable sanctity demands such divine confirmation of the Church's discernment and affirmation: hence the necessity of a miracle.⁸ The current legislation requires one miracle for beatification and another occurring after beatification for canonization.⁹ For martyrs, no miracle is required for beatification but one is needed for canonization.

⁶CIC c. 1403 §1 states: "Cases for the canonization of the Servants of God are governed by special pontifical law. §2: The provisions of this Code are also applied to these cases whenever the special pontifical law remits an issue to the universal law, or whenever norms are involved which of their very nature apply also to these cases." CCEO, c. 1057 says: "In causes of the Servants of God whereby they are inscribed among the saints, the special norms determined by the Roman Pontiff are to be observed."

⁷Congregation for the Causes of the Saints, *Regolamento della Consulta Medica della Congregazione per le Cause dei Santi*, 23-09-2016, signed by Cardinal Angelo Amato, prefect of the Congregation for the Causes of Saints, and Archbishop Marcello Bartolucci, secretary of the same dicastery.

⁸Cherian Thunduparampil, *The Role of Miracle in the Process of Canonization*, Dharamaram Canonical Studies (Bangalore: Dharmaram Publications, 2003) 3-4.

⁹Reg., art. 26 §1: "Per la beatificazione è richiesto un miracolo regolarmente approvato, e una vera *fama signorum*; per la canonizzazione è necessario un miracolo avvenuto dopo la beatificazione e regolarmente approvato."

Miracles are considered the “voice of God” (*vox dei*). They reconfirm the official “voice of the Church” (*vox ecclesiae*), which in turn is the recognition of the “voice of the people of God” (*vox populi*). By speaking and writing about a person’s holy life, visiting and praying at his/her tomb, seeking his/her intercession, and subsequently obtaining small or large favours, signs, and miracles, the people of God testify that a particular person lived a saintly life and died with the odour of sanctity. In short, miracles are a sign from above demonstrating that this particular person did live a holy life and hence enjoys the heavenly glory, having intercessory power before God on behalf of the faithful. The prefect of the Congregation, Cardinal Angelo Amato says that a “miracle, in deed, is the divine confirmation of the Roman Pontiff’s judgment about the heroic virtues of a Venerable Servant of God.”¹⁰

The new law requires that the bishop competent to instruct the cause make a canonical inquiry into the “alleged miracles, ... of the Servant of God whose canonization is sought.”¹¹ This recognition is preceded by a long, rigorous study and scrutiny at various levels, beginning with the diocesan inquiry.¹² The procedure to be followed at the diocesan phase is contained in *Norms* 32-35, while that to be followed at the Congregation phase is found in *DPM*, esp. III, n. 14 and in the bylaws (*Regolamento*) of the Congregation. “Faithful to the serious duty entrusted to her of teaching, sanctifying and governing the People of God, she proposes to the faithful for their imitation, veneration and invocation, men and women who are outstanding in the splendour of charity and other evangelical virtues and, after due investigations, she declares them, in the solemn act of canonization, to be Saints” (*DPM*, Intro.).

2.1. What Kind of Miracle?

The new legislation of 1983 (*DPM*) does not exclude from or require any particular type of miracles for beatification or canonization.

¹⁰Congregazione Delle Cause Dei Santi, *Le cause dei santi*, (Rome: Libreria Editrice Vaticana, 2011) p. 340: “Il miracolo è, in realtà, la conferma divina del giudizio del Sommo Pontefice circa le virtù eroiche del Venerabile Servo di Dio.”

¹¹*DPM* I, n. 1; cf. *Norms*, 5b.

¹²*DPM* I, 2, n. 5; cf. *Norms*, 32; Reg., art. 26 §1.

2.1.1. Physical Miracles

Considering that an overwhelming majority of cases proposed are miraculous healings from some physical sickness, the legislator emphasizes medical miracles and medical experts.¹³ Norms specify that "medical experts" must be heard in cases of miraculous healing (Norms, 34). The Instruction states: "In the Inquiry on an allegedly "miraculous healing," the Bishop must nominate a *Medical Expert*" (SM, art. 60 §1). The new bylaws (*Regolamento*), after referring to five experts in general, specifies that "if it is a healing," the *Positio* is examined by five *physicians*.¹⁴

DPM prescribes that miracles "... are discussed in a meeting of experts (in the case of healings, in a meeting of physicians), ..." ¹⁵ SM, 38 §2, after the two general paragraphs, clearly mentions physical healings: "In the case of *allegedly miraculous healings*, medical and clinical documents as well as test results are necessary (e.g., clinical records, medical records, laboratory exams and analysis)." Thus, medical experts are included so that miraculous healings can be scientifically verified with their professional medical expertise, while other technical experts are to be sought (*ad casum*) each time a "miraculous fact of another nature" is proposed *ad casum*.

Clearly, not only miraculous healings but also other phenomena presumed to be supernatural are considered for the beatification and canonization.¹⁶ Nevertheless, the very name "Consulta Medica"

¹³DPM, 12; Norms, n. 34 and Reg., art. 10 §2; 26 §2, 2 make special reference to the miraculous healings (e.g., "There is to be a Board of Medical Experts..." "In case of a cure from some disease, the bishop or his delegate is to seek help from a physician...")

¹⁴Reg., art. 26 §2, 2: "La Positio viene esaminata da cinque periti (medici, se si tratta di guarigioni)."

¹⁵DPM, III, 14, n. 1.

¹⁶See, Cherian Thunduparampil, *The Role of Miracle*, 321, f.n. 21, for the two miracles other than physical miracles considered by the Congregation after 1983. "The miracle considered for the beatification of the Servant of God Margarita Bays who was beatified on 29 October 1995 by John Paul II (for the Brief of beatification see AAS 88 (1996) 687-689) was the miraculous escape of Marcel Ménétrez from a tragic accident occurred while climbing the mountain, Dent-de-lys, Switzerland on the 25 March 1940. cf. Lausanne, Genève et Fribourg, *Beatificationis et Canonizationis De la Vén. Servante De Dieu Marguerite Bays Laioque du Tiers ordre séculier de S. François (1815-1879) Positio super miraculo* (Rome: Tipografia Guerra, 1993). The other cause was that of the Servant of God, Maria Antonia Bandrés y Elósegui who was beatified on

(medical board) suggests that most of the miracles proposed for verification are physical miracles. For other types, experts in the relevant technical fields will be constituted whenever needed. The fact that there has never been a stable Board of Experts in the CCS for such types of miracles suggests that such cases are very rare.¹⁷ Miracles of a moral nature are, however, not normally admitted.

2.1.2. Any “Miraculous Fact of Another Nature”

As seen above none of the documents speaks of physical miracles in exclusive terms. They deal, first of all, with miracles in general terms.¹⁸ There is explicit mention of miracles other than healings, though the law does not specify exactly what type of miracles besides healings are admissible. Without any special reference to medical experts, *Norms*, 33a simply states the bishop is to seek the opinion of an expert on the miraculous event. The new bylaws (*Regolamento*) also declare first in general terms, “the examination of the *Position* is done by “five experts” and then follows the specification on medical experts.¹⁹ The Instruction, *Sanctorum Mater*, deals with “miraculous fact of another nature,” and speaks of “technical expert” in that field: “In the Inquiry on an allegedly miraculous fact of another nature, the Bishop must nominate a Technical Expert” (SM, art. 60 §2). The same document in another article stipulates, “If the Inquiry regards an *alleged miracle*, ... an expert in the field. ...” without specifying if it is physical miracle (SM 81).

3. Structure of the Process

In the current law, the process of recognizing a presumed miraculous cure consists of two main phases: one in the local diocese or eparchy

12 May 1996 (for the Brief of beatification see AAS 89 (1997) 12-14). The miracle proposed was the prodigious salvage of Antony Bandrés Nararro from a train accident that happened at the station of Málaga on the 25 October 1961. cf. Salamatin, *Beatificationis et Canonizationis Ven. Servae Dei Mariae Antoniae Bandrés y Elósgui: Positio super miraculo* (Rome: Tipografia Guerra, 1996).”

¹⁷See, Robert J. Sarno, “I periti della Consulta Medica della congregazione delle cause dei santi e la verifica del miracolo” (simposio tenuto presso l’università di Lublin, Polonia, 23 maggio 1998) 10.

¹⁸DPM, II, 8; III, 14; *Norms*, nn. 5b, 32; 33a; Reg., 1983, art. 26: These numbers of the DPM, Norms and *Regolamento* speak of miracles in general (e. g., “The inquiry on miracles...;” “...report on the alleged miracle;”) which would imply all kinds of miracles.

¹⁹Reg., art. 26 §2, 2: “La Positio viene esaminata da cinque periti (medici, se si tratta di guarigioni).”

and another in Rome. The bylaws (*Regolamento*) of 1983 extensively treat the procedure to be followed in the examination of and judgment on the miracles during the Roman phase of the inquiry, both stages of which take place at the CCS itself.²⁰

3.1. Diocesan Phase

The diocesan phase is mainly intended to collect proofs and evidence of the proposed miraculous cure. The process begins with the 'instruction' of a cause (miraculous case) by the diocesan or eparchial bishop of the cured person at the request of the postulator for the cause.²¹

On behalf of the actor of the cause and after a serious preliminary investigation, the postulator asks the bishop to instruct the cause. Together with the petition he presents a "brief but accurate report on the alleged miracle" (*Norms*, 33) with pre- and post-healing documents and clinical reports of all the tests done. SM, 38 §1 stipulates: "Attached to the written request for the instruction of the Inquiry on an alleged miracle, the postulator must present to the diocesan or eparchial Bishop: 1. A brief and accurate report on the particular circumstances of the case; 2. A list of witnesses; 3. All documents relative to the case;" §2: "In the case of allegedly miraculous healings, medical and clinical documents as well as test results are necessary [e.g., clinical records, medical records, laboratory exams and analysis]" (*Norms*, 33a).

Once the request is accepted, the bishop nominates a medical expert²² (*Norms*, 34a; SM, 60) to help the tribunal prepare the questions and to examine the witnesses in a meaningful way, and thus to verify the inexplicable nature of the cure.

The testimony of the eye-witnesses plays a very important role in verifying the facts. Consequently, the bishop or his delegate examines the witness whom the postulator presents along with the request. He also questions other *ex officio* witnesses, including the doctor/s who

²⁰Cherian Thunduparampil, *The Role of Miracle*, 325.

²¹*Normae*, art. 5b, (cf. SM 21 §2): "In the case of an alleged miracle, the competent Bishop is the one in whose territory the event took place."

²²It is a fundamental general principle established in the Code that "the services of experts are to be used whenever, by a provision of the law or of the judge, their study and opinion, based upon their art or science, are required to establish some fact or to ascertain the true nature of some matter" (CIC, c. 1574; CCEO, c. 1255).

treated the cured person. Once the diocesan inquiry is over, the dossier will be sent to the CCS in Rome for further study and judgment.

3.2. Roman Phase

In order to better evaluate the miraculous cases, the Apostolic Constitution DPM and the new bylaws of 1983 established that "there is to be a Board of medical experts in the Sacred Congregation whose responsibility is to examine healings which are proposed as miracles."²³

For this purpose, the CCS utilizes a body of doctors (*Albo dei Medici*). In a statement to the members of the Medical Board and the International Medical Committee of Lourdes, the congregation's then-Prefect, Cardinal Angelo Felici, indicated the need and relevance of the Medical Board: "The recognition of a miracle is an act of discernment in faith but it presupposes an interdisciplinary pursuit."²⁴ Thus, medical experts specialized in different areas of medicine are nominated to this body by the Prefect of the Congregation to study and verify the alleged miracles proposed for beatification and canonization. According to the *Regolamento*, n. 28 there should be a *Consulta Medica* consisting of four experts presided by the president of the Medical Consultants. Through a reform Pope Benedict stipulated that *Consulta Medica* should consist of six members instead of four. If a particular case requires it, another expert could be nominated according to the nature of the sickness under discussion. An additional physician, functioning as secretary and without the right to vote, prepares the documents and the report of the meeting. In cases concerning miracles other than physical cures, other experts could be summoned in accordance with the nature of each case.²⁵

²³DPM, II, 12: "Pro examine sanationum, quae tamquam miracula proponuntur, habetur apud Sacram Congregationem coetus in arte medica peritorum." See, Reg. 1983, art. 10 §2: "Presso la Congregazione vi è un Collegio di medici per l'esame delle guarigioni che vengono proposte come miracolose." See, Cheria Thunduparampil, *The Role of Miracle*, 367.

²⁴Angelo Felici, "Il ruolo della Consulta Medica nell'esame delle guarigioni 'miracolose,'" *L'Osservatore Romano*, (3 dicembre, 1988) 4; Andreas Resch, *Mircoli dei beati*, p. 4; Cheria Thunduparampil, *Role of Miracle*, 367, f.n. 128.

²⁵Cf. Congregazione delle Cause dei Santi, *Le Cause dei santi*, 307-308; Regolamento 80 §3: if one treats "di un evento prodigioso di altra natura saranno nominate volta per volta periti esperti nella materia specifica" (Reg. 83 §3).

As the first step, the Congregation makes a study of the case examining thoroughly the dossier supplied by the diocesan bishop. Once the dossier reaches Rome, the congregation will appoint two experts in the field related to the presumed miraculous in accord with *Regolamento* 80 §1. In this preliminary and essential step, the two experts are appointed by the Congregation to examine the case individually and to present their individual reports and judgments on the case separately.

3.2.1 *Consulta Medica*

If at least one of the two experts responds to the case in the affirmative, it will then be referred to the *Consulta Medica*. In addition to the president of the *Albo dei Medici* who presides over it, the *Consulta* consists of six other medical experts besides the Secretary, Undersecretary, and the Promotor of the Faith. Another physician functions as secretary but lacks the right to vote. They will discuss the case in detail - the diagnosis, prognosis, therapy and the mode of the cure.²⁶ After a rigorous study with the help of advanced technology and all available medical information, the experts declare whether the proposed cure is explicable or inexplicable according to current medical science. In order to establish the inexplicable nature of a cure, it must be rapid or immediate, complete and lasting. As per the present regulation, once this character of the cure is ascertained unanimously or with a majority of votes - four out of seven - in the affirmative, the case can be passed to the next stage, that is, examination of the theological consultants.²⁷

²⁶Giuseppe Giunchi, "L'esame del miracolo sotto il profilo medico-scientifico," 212; "Giuseppe Giunchi who functioned as the president of the *Medical Board* for 21 years, concurred and said that the scientific knowledge of the medical experts "is of fundamental importance in defining a healing as miraculous, because only those events could be considered as miraculous whose origin it is impossible to explain on the basis of the natural laws *known to us*." See, Cherian Thunduparampil, *The Role of Miracle*, 367.

²⁷Angelo Amato, *Le cause dei santi*, 330, 327, 328: "In fine, per avere carattere di inspiegabilita, la guarigione deve essere rapida, o immediata, complete e duratura. Accertata all'unanimità, o a netta maggioranza, l'inspiegabilita di una guarigione, la causa può passare all'esame del Congresso Peculiare dei Consultori Teologi del Dicastero." The "New Regulation" of 2016, art. 15 specifies that a qualified majority of: "*cinque Periti su sette o di quattro Periti su sei presenti alla stessa seduta*" is required.

3.2.2 Theological Consultation

Once the medical experts establish the scientifically inexplicable character of the miraculous cure, the case passes to the theologians for further study and judgement from a theological perspective.

The theologians examine if the miracle happened through the intervention of the particular Servant of God or Blessed under discussion in response to the prayer of the patient and/or his relatives and friends. In short, their job is to ensure that the cure is the result of faith in the intercessory power of the Servant of God or Blessed and constant prayer to him/her. "The invocation is the most common form of proof for establishing the causal relation between a miraculous event and the Servant of God.²⁸ On the authority of Cardinal Lauraea, Benedict XIV said: "The proof of the intercession cannot be taken conveniently from any thing other than the invocation."²⁹ Hence, once they have the entire dossier including the report of the Medical Board, the theologians are,

- a) to ascertain the miraculous character of the healing which the technical experts have declared inexplicable according to the medical science; b) to ascertain the causal connection between the invocation of the Servant of God and the prodigious fact, in order to be able to attribute the miracle to the intercession of the same.³⁰

The mere fact that a healing is medically inexplicable or that a miraculous phenomenon surpasses the capacities of the known powers of nature does not disclose to us that it is the work of God through a particular Servant of God. It is the circumstances and the religious context in which an inexplicable healing or another phenomenon occurs that enables one to call such an event a miracle. When a medically inexplicable healing takes place in obvious circumstances of prayer and penance and through the invocation of a determined Servant of God, then the religious context is evident. "If a miracle takes place in such a context, then one can ascertain that there is a causal connection between the obtained or rather, let us say, the desired cure and the intercession of the Servant of God. The theological discussion is aimed at establishing this constitutive element of the miraculous event" and after the collegial consultations,

²⁸Salvatore Indelicato, *Il processo apostolico*, 351; See, Cherian Thunduparampil, *The Role of Miracle*, 383.

²⁹Benedict XIV, *De servorum Dei*, I, V, 7; cf. Cardinal Lauraea in 3. lib. sent. tom. 4. disput. 20. *de miraculis*, art. 25 §1, n. 1063.

³⁰Fabijan Veraja, *Le cause di canonizzazione*, 88.

"if two-third of the members of the theological consultants are in favour of the supernatural character of the proposed miraculous event the case will pass to the meeting of the cardinals and bishops for their examination and final judgment"³¹ which later may be confirmed by the Holy Father.

The ultimate goal of this process is to establish the authentic sanctity of a Servant of God before raising him/her to the honours of the altar and thus presenting him/her to the faithful as a model to be imitated and as intercessor to be invoked.

4. Constitutive Elements to be Verified: Scientific and Theological Aspects:

In the collegial meeting, the experts in the field related to the cure will whether, based on the dossier, "the cure merits the inexplicable character." For this, they have to verify whether the cure was instantaneous, rapid, and lasting. In performing their assessment, the experts utilize the documents and the results of other tests the cured person has undergone. All the documents and the testimonies of those who knew the person will be of great help for the doctors to arrive at their conclusion.

In modern times, the progress made in medical science and technology make it difficult to establish this or that diagnosis with 100% certainty. Therefore, the congregation also follows a probabilistic approach. Based on the documents, clinical records and testimonies of witnesses, such minimally doubtful cases can be described as *exceptional but not inexplicable cure* with moral certainty.³²

5. Recognition of Miracles - Vatican and Lourdes: A Comparative Note.

From the detailed discussion on the recognition process of miracles by Vatican (CCS) and Medical Bureau of Lourdes (MBL) it results that there are certain similarities and dissimilarities in the ways in which these two entities approach and treat the matter. Below, I present the most important ones as I evaluate it.

³¹Cherian Thunduparampil, *The Role of Miracles*, 378, 383.

³²Angelo Amato, *Le cause dei santi*, 32-329: "Il giudizio medico comporta sempre un'aderenza probabilistica e le leggi biologiche sono apprezzate in senso probablistico." See, Part I, foot note n. 38 of this article (Vol. 7/1 June 2016, p. 127) under 'Scientific Aspect.'

5.1. Similarities

1. Both Rome and Lourdes make official declarations of miraculous cures in the name of the Church.
2. Miracles and their official declaration function as a motivating sign of God's intervention and an inspiration not only to the beneficiary alone, but also to the faithful at large.
3. At the study level both the Congregation for the causes of the saints and Medical Office of Lourdes greatly depend on pre- and post-cure documentary evidence as a means to confirm both the illness and the cure.
4. Both the Vatican and Lourdes employ a rigorous process to confirm allegedly miraculous cures.
5. Lourdes and the Vatican consider scientific and theological aspects related to an exceptional cure as constitutive elements in the verification process.
6. Miracles considered by both Vatican and Lourdes are signs of God's presence and His concern for human beings, as they bring relief to the suffering patient and an invitation to all to have faith and hope in God and in the intercessory power of the Saints and the Blessed V. Mary.

5.2. Dissimilarities.

1. Whose intercession? While miracles proposed to the Vatican (CCS) are performed by God through the intercession of the Saints – confessors or martyrs, those reported to Lourdes are miracles that God works exclusively through the direct intercession of Mary, the Mother of God who cooperated with the salvation design of God the Father.
2. What kind of miracle? While CCS considers physical miracles and though very rarely “miraculous fact of another nature,” Lourdes considers only physical miracles.
3. Miracle's place of occurrence: Lourdes takes into consideration only miracles that happen in and around the Shrine of Our Lady of Lourdes. In the case of the saints, miracles happening anywhere in the world through the intercession of a particular Servant of God/Blessed/Saint will be considered, not necessarily at his/her tomb, in his or her region, or even in his or her country.

4. Competence: It is obvious that it is the CCS that is competent to verify the miracles of Saints. Those happening at Lourdes are only indirectly related to the Congregation for the Doctrine of Catholic Faith in the sense that the latter has approved the procedures followed in Lourdes. It is the Diocesan bishop of the habitual residence of the cured person who is competent to officially declare a miracle.

5. Beginning of the process: While the study of the miracles through the intercession of saints begins in the local diocese /eparchy of the cured person with the Bishop's official instruction of the cause, that of Bl. V. Mary of the Shrine of Lourdes begins at the centre, that is, with the registration of an exceptional cure at the Medical Office of Lourdes.

6. Final confirmation of miracle: While in the case of the Saints, the study commences in the local Church and reaches the centre (CCS) for the final confirmation, in the case of Lourdes, it begins at the centre, that is Lourdes Shrine/Medical Office (if we can make such a comparison at all) and from there moves to the local bishop for the final confirmation.

Thus, as far as the beginning of the process and the final confirmation of the miracle by Vatican and Lourdes are concerned, they are, let us say, in the reverse order.

7. Open structure and closed structures: One of the two major differences between the CCS and the MBL regarding the recognition process of a miracle that Dr. Alessandro de Franciscis shared during an interview given to this author is its "open structure."³³ The MBL follows a more open approach while Vatican's (CCS) is rather closed. Once a miracle takes place through a Servant of God or a Blessed, as far as possible, it is kept secret till the end of the process both at diocesan/eparchial and at the congregation level. They are subjected to the study of a determined number of specialists only and not open to all. In fact, publication of an unusual event as a miracle before its official declaration might hinder or negatively impact the progress of the cause. The case is just the opposite with MBL. An unusual, exceptional cure that happens through the intercession of Our Lady of Lourdes, is made as public as possible through the

³³Dr. Alessandro de Franciscis is the President of the Medical Bureau of Lourdes from 2009 onwards.

Medical Bureau's official Bulletin,³⁴ which all the registered members of the Medical Bureau (irrespective of his or her religious affiliation or difference of convictions) receive and anyone else who is interested can subscribe to freely. Any expert in a particular cure may study the case and express his or her opinion to the Medical Bureau.³⁵

8. Witness: CCS attributes much weight to eyewitness testimony, and the testimony of a comparatively large number of them are collected in a judicial process along with the relevant documents. But in the case of Lourdes, witnesses other than the cured person do not have much of a role and official relevance. Sometimes, the family doctor or the cured person's general physician, with his approval/testimony regarding the exceptional nature of the cure, may be considered a witness. However, Lourdes depends mainly only on one witness: the cured person.

9. Purpose of Miracle: The congregation for the Causes of the Saints requires miracles in order to establish the sanctity of a Servant of God or to reconfirm the same of a Blessed and to declare him or her a Blessed or a saint/martyr respectively. At Lourdes they are considered to proclaim the continuing intercessory power of Our Lady of Lourdes and to offer the faithful signs of God's presence and work in the world and thus to inspire and empower them in their spiritual pilgrimage on earth.

³⁴Association Médicale Internationale de Lourdes (AMIL), started publishing this Bulletin in February 1928: *Fons Viate* Bulletin of the Office of Medical Observations of Lourdes is published in 5 languages. (See, Part I, foot note n. 24 of this article (Vol. 7/1 June 2016, p. 122). It "treats of cures in a practical manner, including medicals and spiritual observations and a theoretical approach, which addresses the relation between science and faith based on an anthropological approach of the patient whereby all three dimensions are taken into consideration (body, mind and spirit)."

³⁵Thomas Benjamine Dytor, Member of AMIL, "Medicine in Lourdes: The experience of an English Medical Student," in *Fons Vitae*, Bulletin of the Office of Medical Observations of Lourdes, n. 321, January (2013) 18: He says, "If the resident doctor thinks the case is interesting or challenging he may employ the help of any of the other registered doctors in Lourdes at the time ... to gain their opinions (every case is open for any registered doctor or health professional to view at their own leisure.)"