

The Ability to Bring Moral Clarity to Bioethics Is

In His DNA

At some point in our lives, either we or someone in our family will be touched by a bioethics issue, and difficult questions will almost invariably arise: when someone we love is suffering, how far should medical technology be allowed to go to alleviate the pain? Should embryonic stem cell research be permitted on the basis that it may cure diseases like Parkinson's and thus alleviate untold suffering...someday? What is the truly "compassionate" thing to do if a person appears to be in a vegetative state? How can we know when human life begins?



And who can we rely on as a trustworthy guide as we think through these and other thorny bioethical issues?

Fortunately, Belmont Abbey College has just such a trustworthy guide in the person of Dr. Grattan Brown, assistant professor of theology. As a graduate student, Brown worked in a hospice caring for the dying. He has taught bioethics to medical students at Georgetown and to men studying for the priesthood at St. Charles Borromeo Seminary. He has also published illuminating lectures on bioethics issues, including "Seeing Through False Arguments for Embryonic Stem Cell Research," a lecture that people from all across America have ordered from Belmont Abbey College via the Internet. Indeed, of Dr. Brown's stem cell lecture, Ambassador Kenneth Whitehead has said: "I think this is one of the best summaries of the question that I have seen... It can serve as a solid introduction to this vexed subject for a while to come."

Recently *Crossroads* had the privilege of interviewing Dr. Brown and asking him a few of the questions we thought

our readers might want us to ask about bioethics.

CROSSROADS: How did you first become interested in the field of bioethics?

BROWN: My high school biology teacher introduced our class to genetics. He could teach us little more than the basic principles of genetics outlined by the Augustinian monk Gregor Mendel, who pioneered the field of genetics by predicting mutations among peas. That demonstration was enough to make me wonder. Later, a theology professor with a knack for striking examples often used bioethics illustrations, and I began to see the connections between theology and bioethics.

CROSSROADS: How would you describe your approach to the field of bioethics today?

BROWN: As a Christian and a theologian, I think the field of bioethics offers a way of gaining wisdom about the human person and society, as well as a set of questions that every member of society must consider. Sure there are controversies, but God calls Christians to gather wisdom about creation and about how to organize society. Scientific and technological advancement are first and foremost an opportunity to discover the mind of God through the observation and cultivation of nature.

The account of Creation in the first chapter of Genesis uses the term "dominion" for humanity's authority over creation. One important Church document on the treatment of the human embryo, *Donum Vitae*, notes that authentic scientific research is a form of dominion. The discovery and mapping of the human genome is a good example of this type of dominion. This "map" will forever change our understanding of human nature. Here is another example: We can interpret the theory of evolution as a working out of God's Providence even while atheists interpret it as a merely material account of change among species.

To be sure, unethical scientific practices obscure whatever wisdom might be gained from scientific experimentation and from ever more sophisticated medical procedures. Embryo-destructive research and euthanasia are two of the most widespread unethical practices.

Yet we should draw two conclusions from the fact of these abuses: 1) Assisted by revelation, Christians can patiently expose unethical science and medicine; and 2) uncomfortable as it is, suffering plays a part in attaining wisdom and, yes, ultimate beatitude. God creates each human being for perfection, and every experience can contribute to that path.

CROSSROADS: You mention the role of suffering in our lives, and your bio reveals that you have witnessed human suffering "up close and personal." You worked in a hospice in Italy, caring for the dying. How has that experience informed your views on various bioethical issues?

BROWN: That experience showed me how God works through illness and through medical professionals. I volunteered in the cancer hospice while working on my doctorate at the Alfonsian Academy in Rome. Once I was asked to sit in the room of a patient suffering from uterine cancer. I thought about her husband and three young children who were soon to be without a wife and mother. Suddenly I had an experience that leads so many people to atheism: sheer anger with God, demanding "How could you let this happen to this person, who is so needed on this earth, and whose absence will be so strongly felt?"

Recollecting myself a bit, I began to think more deeply. From the Bible I recalled Job's insight: God does not explain all His ways. This insight did not take away my sadness for this family. It did not answer all my questions. But it did allow me to continue thinking through bioethics issues with more than mere emotion and with the help of Revelation.

CROSSROADS: Did you also witness examples at the hospice of how human suffering can be redemptive, perhaps even ennobling?



BROWN: Yes. I remember one patient who knew he was dying of cancer. He was sorrowful about leaving his family, but cheerful. He continued writing his poetry ... really bad poetry, but kept on writing and sharing it. Everyone who walked into his room got a smile. I have learned a lot from patients like this one. They refuse to lash out against God or anyone else because of their suffering. They neither lose hope nor spin illusions about miracle cures.

I also think of my wife's uncle and godfather in this context. He is a great example of how a person's weakness can become a strength. Now over 60 years old, he has hemophilia, so his blood does not clot and internal bleeding causes intense pain to the knees and other joints. Nonetheless he has survived several major surgeries and recently retired after a celebrated 41 year career as dean of finance in a Catholic university. If you are a husband and father and aware that you can die simply from falling down, you play those roles with heightened awareness that your family might suddenly have to continue without you. His faith did not take away suffering, but showed him how suffering makes loving personal. Family events are tinged with this awareness, and he becomes an example for the rest of us.

CROSSROADS: So would you say that the Christian view of suffering that you've seen in action might have something to teach people in the field of bioethics?

BROWN: Yes. I think that medicine today relies so much on technology to overcome suffering, we overlook technology's limitations. When we experience intense suffering, either in ourselves or by seeing others suffer, we are driven to use every possible means to eliminate that suffering. It seems heartless and immoral not to try everything. But when eliminating one person's suffering causes another to die, there is a contradiction. The drive to eliminate suffering hits an intellectual brick wall. Some people ignore that contradiction. But a well-formed conscience senses and cannot shake



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that unsettling conclusion: I'm causing someone else to die so that I might live. The heart cannot abide it and cries out for an answer.

Jesus Christ answers that question: I will act so that others may live ... abundantly in grace here and now and eternally with God. Act so that others may live abundantly and eternally, that is a good definition of love straight from the Bible. I John 4:9 says “In this way the love of God was revealed to us: God sent his only Son into the world so that we might have life through him.” Long before he died on the cross, Jesus acted so that we might have life through him. He preached and healed; he taught real morality and celebrated. But those actions led him to the cross, where he accepted death rather than abandon love.

Do you see the parallel? Medical professionals use technology so that patients might have life. But that same

technology can lead us down a path in which we must choose to accept suffering and death rather than abandon love, even as an expression of love for others.

CROSSROADS: As you just mentioned, the common and even natural urge we have when we encounter great suffering is to use whatever means are available to eliminate that suffering. And as you say, it can seem heartless NOT to do so. This is where we come to the cause of many misunderstandings/misperceptions of the Catholic Church's stance on many bioethical issues, is it not?

Indeed, critics of the Church, including some scientists, can get quite emotional with their criticisms of the Church's positions. For example, some say that since the Church opposes embryonic stem cell research, it is heartlessly depriving suffering, wonderful, even very noble people like

the actor Michael J. Fox of any hope of curing their Parkinson's disease.

Thus, these critics charge, "rigid" Catholic doctrines force Catholics to act in ways that "lack compassion." How do you answer that criticism?

BROWN: What is true compassion? Sometimes people argue, for example, that euthanasia can be compassionate, especially with severe illnesses such as the persistent vegetative state. Some will say that if nothing more can be done to cure a patient, then assisted nutrition and hydration should be withdrawn. More and more doctors, nurses, and hospital administrators are sold on this practice and begin to view any other position as lacking in compassion.

important subject of "compassion": some critics would say that the Church seems to have a misguided or even distorted sense of compassion – and that this flows from what they would say is a misguided sense of what constitutes human dignity. For instance, here is a somewhat typical criticism leveled by a biology professor from Swarthmore: "Are scientists concerned about human dignity? Yes. It must be remembered, though, that people have always had different ideas as to what constitutes human dignity... [The] notion of human dignity [held by some] can be used to thwart improvements in the human condition. Conservative religious groups (the Catholic Church among them) vehemently opposed vaccination against

concept of human dignity to an embryo that has not yet become an individual (it can still form twins) and has no head, heart, arms, or even a distinguishable front or back...."

So again, the charge here seems to be that the Church has more compassion for the unborn, the "pre-conscious," than it has for the living who are suffering from the ravages of Parkinson's disease and the like. Therefore the Church is acting as a barrier to human progress. Therefore, it's backward and anti-scientific. How does one answer that critique?

BROWN: Again, the controversy concerns the methods. The Church is never against science and technology, only certain uses of science and technology. Everyone admits that some methods for solving human problems are off the table. The "Tuskegee Experiment" is a classic example in which researchers denied treatment to syphilis patients in order to study the disease's progression. Any research team that proposes similar methods can expect unequivocal condemnation today.

Some claim that the Church's opposition to embryonic stem cell research is "anti-science." But the Church has never opposed stem cell research, only destroying embryos in the process. To promote stem cell research, the Vatican has sponsored two international conferences and has even funded ethical stem cell research to the tune of \$2.7 million. The Archdiocese of Sydney made a \$100,000 stem cell research grant.

So we are talking about the method and not scientific research itself. Similarly, the Church is not opposed to methods of overcoming fertility or of preventing the spread of sexually transmitted diseases as long as those methods respect the integrity of marriage.

CROSSROADS: Some scientists and others might ask: "Isn't opposition to scientific methods, even embryo-destructive ones, an instance of the Church trying to tell scientists what they can and cannot do? Isn't the Church's position infringing on scientific freedom?"

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The fact is that our society is engaged in moral debate about a whole range of medical and scientific procedures. Generally, each side in those debates believes it has the most compassionate method. Productive debate proceeds when all sides presume good intentions in their opponents and focus together on the opposing reasons why certain procedures are truly compassionate and others are not. Catholic teaching argues that alleviating suffering at the end of life is a great good and morally obligatory, but argues that euthanasia, that is, using death to end suffering, is the precise opposite of compassion.

CROSSROADS: Understood. But to press you a little further on this very

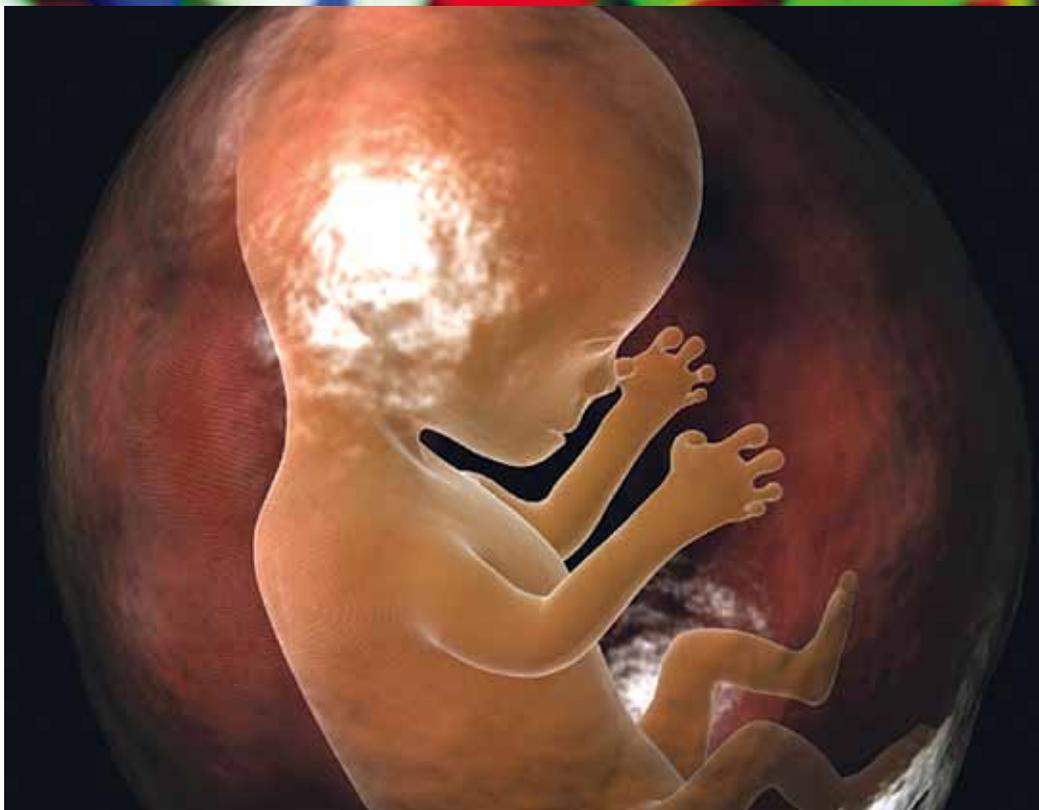
smallpox, even a hundred years after its first use. Smallpox antiserum came from cows (hence the term "vaccination"), and these groups felt that the injection of serum from a cow into a human was an affront to human dignity. Theologian Cotton Mather's home was firebombed by Bostonians who felt his support of vaccination blasphemous. Another definition of human dignity is more concrete. Physicians often note that disease not only affects the body but can rob the dignity from a person. Thus, supporters of human stem cell research argue that such study has the potential to restore dignity to the suffering. ... Supporters of stem cell research feel that it is more important to restore dignity to adult humans than to accord an abstract

BROWN: No. It is an instance of the Church recognizing a moral truth—do not kill—and encouraging society to organize itself according to that truth on a particular issue. Opposing embryo-destructive methods is not an infringement on scientific freedom because those particular scientific methods have an important moral as well as scientific dimension. Everyone—not merely scientists—has a responsibility to form a judgment about that moral dimension.

Here is a non-scientific example that I think everyone would accept. Suppose I have a plumber repair water pipes in my house. I am not competent to tell the plumber what kind of pipes or joints to use or how to route the pipes for optimum efficiency. But if the plumber proposes to use lead pipes or joints, I should object because the lead would compromise the health of my family and anyone to whom I might sell the house. Moreover, legislators recognize this danger and do not leave plumbers free to install lead pipes regardless of the circumstances. Similarly, one need not be a scientist to speak out about the morality of certain scientific methods. Those who propose embryo-destructive research methods cannot hide behind the privilege of scientific authority when those methods involve the destruction of human life.

CROSSROADS: Well who is to say that the embryo is a human being? There is a persistent line of argument on this very important subject, even among some powerful, influential Catholics, that goes something like this: “The main Catholic argument that allows abortion is that the essence of a human being is our mind or spirit or soul or human intelligence — and a fetus or embryo does not have one of those; therefore, the fetus is certainly not a human being or human person.

“That argument is from Psalm 139, as expanded on by St. Thomas Aquinas. The argument in both was that the embryo is not ‘formed’ enough, does not have a body (or later science would specify, a brain), complicated enough to hold a fully human intelligence, spirit, or ‘soul.’ Since the embryo is therefore not



a human being — since it is lacking a mind or soul — therefore, it is no great sin to terminate it.

“This is the real core of Catholic tradition...

“Ironically, the Pro Life antiabortionism we hear here and from many Catholics elsewhere, is not supported by the Bible, by the Church, or by science; it is in fact simply a well-intentioned, but in the end, extremely destructive new heresy. One that throws countless votes to the Republican party, and causes the gross neglect of other issues like Health Care, and avoiding unnecessary wars; subjects that were far, far more important to the Bible, and to Jesus himself for example.” How do you answer this argument?

BROWN: Excellent question! As with all important questions, we look for the evidence. Biology provides quite a bit of crucial evidence to answer this question, but biology alone cannot determine when an individual human life begins. Why? Biology measures only the body and cannot prove or disprove the presence of anything spiritual, such as the human soul.

We also have to interpret the evidence. The beginning of personhood does not depend upon how we would like to use the embryo. So we cannot claim that personhood begins 14 days after conception or at implantation simply in order to enable experimentation before that point. Any respectable answer about when an individual human life begins must be based upon objective criteria, that is, criteria pertaining to the embryo itself.

On this question, people disagree even when interpreting the evidence objectively. Some say a life begins at conception; others say 24 hours after conception at “syngamy,” when the genes of the parents combine and cell division begins; others say implantation. The biologist Maureen Condic has made a convincing and readable argument for conception in “When Does Human Life Begin?” (http://www.westchesterinstitute.net/images/wi_whitepaper_life_print.pdf).

Convincing as Condic’s argument is, biology is not enough. Philosophy and theology are necessary. The Church’s view articulated nearly 40 years ago in the Declaration on Procured Abortion

argues that an embryo could never become a human person if it were not already in some way human. The moral implication: Even if it were a potential human being, the embryo should be protected. The Church's most recent document on bioethics, *Dignitatis Personae*, states even more strongly that the embryo "possesses full anthropological and ethical status" without stating precisely that a human life begins at conception.

CROSSROADS: In 2009, you published a lecture that has been ordered via the Internet by people all across America entitled "Seeing Through False Arguments for Embryonic Stem Cell Research." What are the big developments in stem cell research since that time?

BROWN: There is good news and bad news. Unfortunately, the Obama Administration has spent millions on embryonic stem cell research and thus on the destruction of human embryos. In addition, the National Institutes of Health (NIH) has produced "ethical" guidelines for couples to donate "spare" embryos from their IVF treatments. These guidelines essentially make the destruction of embryos appear ethical because the parents willingly donated them to science. Now IVF clinics have an incentive to create more embryos.

The good news is that one ethical alternative to embryonic stem cells, adult stem cells, has produced a wide range of therapies and that another alternative, induced pluripotent stem cells (IPS cells), has enjoyed great progress in research. First, adult stem cells have led to cures of diseases from head to toe. You can read about them on the Internet, but beware if you are looking for therapy. There are bogus ones out there.

Second, IPS cells behave like embryonic stem cells. Scientists create IPS cells by manipulating the genetic structure of skin cells to make them revert to the more general "pluripotent" cell that embryos also produce. Cutting edge IPS research now asks how closely IPS cells

actually behave like their embryonic counterparts.

CROSSROADS: You mentioned bogus stem cell therapies. What other weird and exploitative uses of biotechnology are out there?

BROWN: Did you ever hear of the Raelian Movement? They believe that extraterrestrials created human life and resurrected Jesus by cloning. A more plausible and dangerous example of biotechnology run amok is "Singularity University," established by a group of technology leaders to "assemble, educate and inspire a cadre of leaders who strive to understand and facilitate the development of exponentially advancing technologies in order to address humanity's grand challenges" (<http://singularityu.org/about/>).

The problem is not using biotechnology but the attitude that goes along with it. In a video entitled "The best way to predict the future is to create it yourself," one of the founders of Singularity University, Dr. Peter Diamandis, teaches his audience that every human problem can be solved by the right mental attitude, persistence, the right technology, and capital. Every human problem certainly requires these four things but to think that they

suffice is pure superstition. The root of those human problems is sinfulness. Biotechnology cannot solve that one alone.

CROSSROADS: Why should laypeople, ordinary American citizens, care about bioethics? How does this subject or field impact their lives — perhaps without their even being aware of it?

BROWN: Consider the influence that technology has over how we live. The invention of the modern automobile in the late 19th century radically changed how we design cities. Over the next century, biotechnology will certainly bring radical changes to how we live and organize societies. Two big issues will certainly be genetic diagnosis and various types of enhancement, including genetic enhancement. Some of these changes will bring great benefit, but we can expect to manage some of the problems, just as we do with our automobiles. It will be difficult to oppose some of the abuses, such as the temptation to practice eugenics that we already see when parents abort children with disabilities.

We can take comfort that some aspects of human life do not change. God created the human person with an inquisitive drive to discover truth.





Scientific discoveries will continue to provoke wonder, leading us to greater wisdom about God's creation and plan of redemption.

CROSSROADS: How have Abbey students responded to your new course offerings on bioethics? Have any of them startled you with fresh insights or challenged you to look at any issues from a different angle yourself?

BROWN: I love teaching at the Abbey because nearly every class has a mix of Catholics, Protestants, and those of no religion at all. The bioethics course draws students from a variety of majors. The psychologists, biologists, philosophers, theologians, and business majors contribute something different and learn from each other. Philosophically, some students tend to a utilitarian view, others adhere closely to principles, others ponder from a natural law perspective. Students see that beneath these different approaches lie different values and priorities, and that in-depth discussion, as if the class formed a real ethics committee, advances everyone's understanding.

Consistently taking a utilitarian approach, in my view, ultimately leaves an emptiness in the soul. Acting always to bring about the best outcomes for the most people systematically eliminates society's most vulnerable and raises that problem about eliminating suffering by causing it in others. Yet the "utilitarians" are excellent at evaluating outcomes. Anyone who has made a difficult health care decision knows how dangerous it is to ignore the concrete benefits and burdens of any treatment.

The benefit/burden analysis still leaves us asking "What is the right thing to do?" That is where the students who are good at using principles really shine. But when their principles conflict, they are at

a loss at how to explain, in the final analysis, why a certain course of action is the best. This problem forces us to ask what makes up human dignity, if there are any intrinsically evil actions that always undermine human dignity, and, among all possible options, which option best brings out that dignity among everyone involved. Reflecting on these foundational questions does not give all the answers, but the students become stronger at thinking through topics and cases.

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CROSSROADS: So when one of your bioethics courses has run its course, what are, say, the top three ideas you hope you have imparted to your students?

BROWN: First, there is much to learn, especially from the suffering patient. In the course students hear about the difficult situations in which others find themselves. Sometimes it's the rare diseases that raise interesting ethical issues, like the Siamese twins sharing internal organs that caused so much controversy a few years ago. I hope that reflecting on those issues encourages compassion with intelligence.

Second, you can learn enough science and ethics to form a sound judgment. Students see the effort to understand one week's assignment pay off the next week and the next week and realize that what they learn can stay with them and enrich their lives. Some students have returned to tell me about cases in which they used what we discussed.

Finally, bioethics issues bring us close to the meaning of being human. The "lights go on" when they see some of the great ideas of human history emerge amidst bioethics discussion. For instance, the Christian tradition describes the beginning and end of a human life in terms of the union and separation, respectively, of the soul and the body. By contrast, a materialist perspective denies that any soul exists and thus sees little problem with stopping the function of a body that cannot feel pain, such as an embryo, or cannot enjoy a sufficient quality of life, such as a comatose patient.

In sum, I hope they learn about love in a "practical" way. That is, I hope they gain insight, through reason and revelation, into how God loves humanity, enabling us to love intelligently through the millions of actions we perform. ■