



ORTHODOXY AND BIOETHICS*

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As a specialist in genetics but not in ethics, Fr. Dimitrios addresses the youth gathered for the Syndesmos conference stating that recent discoveries in the field of genetic engineering date not older than twenty years ago when the first findings in this field were made public. Since human nature generally fears the unknown, the world is today divided between accepting what science brings to us and refusing it.

In the midst of that, there are three main issues to be considered in bioethics:

- The beginning of human life including abortion, in-vivo and in-vitro fertilization, researches done on human fetus, and cloning;
- Preservation of human life including pharmaceuticals and genetics;
- The end of human life including gerontotherapy, critically ill late adults, life-saving technology, and euthanasia.

The existentialistic anthropological conception of human nature sees man as an animal, different only in consciousness and self-awareness. It therefore gives man the right in everything, particularly in decision-making concerning life-and-death issues as creating a new life regardless of the difficulties and also ending life through merciful death when life itself is seen as obsolete.

The Orthodox perspective bases its view towards this issue on a different anthropology. Human beings are created after God's image;

*A conference given in the Syndesmos Orthodox Youth Encounter on August 18, 1998, Tur, Egypt.

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their aim is to reach unity with Him. "God became flesh so that we can become gods," says St. Athanasios of Alexandria. Only in understanding the unified nature of Christ we can understand the human being; a point stressed by the fourth ecumenical council. Taking Christ as the representative of humanity, Church Fathers such as Sts. Gregory of Nazianzus, Maximos the Confessor, and Gregory of Nissa understood the double components of the human nature to include two dimensions - an observable one which is the materialistic and an unobservable one which is the spiritual. Our mission as human beings is to preserve our bi-dimensional nature in order to become deified. This deification would then be called "the completion of the highest mystery".

According to St. Maximos the Confessor, man is a microcosm and his nature has the duty to unify in God among other things the created and the uncreated nature, to unify on Earth paradise and the inhabited Earth, and to unify in humanity male and female. As God in essence has one nature though He is three persons, so is humanity, which is constituted of different persons but united in one nature.

Man is a microcosm, a "micro-god"; he is therefore unique. Thus, he should be preserved and dignified, he should be able to reach for the maximum. Theosis (deification) can be achieved only in this manner.

With the understanding of what human is, we can start improving orthodox bioethics. We should first understand, in an orthodox way, the role of medicine and technology. St. Basil the Great states that . . . medicine was given to us from God who controls over our life as a prototype to the cure of the soul and to help us in removing whatever is excessive and adding whatever is missing" (St Basil, Cannons, 55). Therefore we see medical therapy of the body as a model of the therapy of the soul. The church is full of fathers who were also doctors: Cosmas, Damianos, Pandeileimon as well as others. Medicine was never far from church's perspective. Nevertheless, we should first verify every recent discovery so that we do not offend God by misusing His gift.

Back to the three main issues in bioethics that were stated earlier, let us first consider beginning of life. When does human life begin? Is it during or after fertilization, or when we obtain a zygote, or sometime earlier or even later? The answer to this issue is crucial since it is immediately related to abortion, genetic studies, and in-vitro fertilization. Free-will abortion has always been seen as a murder in Orthodoxy; however the position is sometimes different when it comes to the safety of the mother. Abortion is permitted in the case of a mother whose health is in danger and when pregnancy results from violation or incest. Now when prenatal tests show abnormalities, the issue is debatable according to test results and to the severity of those abnormalities. Recent research shows that we will soon be able to identify abnormalities from DNA tests and to control the ones responsible for them. The trend in the world nowadays is to permit abortion when genetic abnormality is diagnosed. The church refuses this attitude though it advises parents to have the required tests and mimeographs so that they both know the forthcoming difficulties.

In the past, mothers unable to naturally conceive babies had either to live without babies or to go for adoption. In-vitro fertilization and cloning nowadays changed this outcome. The method involves taking an egg and some sperms and then put them together in an artificial environment, and then implanting some of the fertilized eggs into the mother's womb. Whatever is not viable gets to be discarded whereas viable ones get frozen for future need. Accordingly, the newborn baby can have simultaneously up to five parents - the donor of the egg, the sperms-donor, the surrogate mother, and the two adoptive parents. You can imagine what legal issues one may confront given this situation.

Yet another problem appears: what will become of the unused viable fertilized eggs? When we dispose of them, we are killing several potential lives, and all this just for the sake of one person who wants pregnancy. Looking at the issue from a different angle, it is not sure whether those parents are doing the whole procedure from a misunderstanding of immortality and selfish love. As to cloning, the main problem is that we use it to produce human "spare-parts", and we categorically refuse this idea.

As to life preservation, we have nowadays pharmaceuticals in addition to genetic therapy, which is becoming public in the very near future. As an answer to the American trend in trying to make human biological life prolonged, St. Basil the Great states that "we should be very careful in our use of the art of medicine, that is not to let it be the only responsible for our health or sickness, but to consider it as a glory to God and equal to the care given to the souls" (Cannons, 55).

Medicine has improved drastically during the last decade, however, it seems as if nowadays, its utmost interest is no more to cure sickness, but to prolong human life. Medical technology is to be used to help the ill, on condition that it does not interfere with our basic orthodox beliefs. For even when it prolongs human life and this life is used to glorify God or to ask repentance, this is a blessed attitude. The importance is to avoid killing a life so that another may live.

Now as to the end of human life, technology has helped us prolong our lives providing us thereby with more time to finish our work on Earth. The trend is here twofold: to prolong artificially human life as much as possible, and to end this life when it can no more evolve. The problem arises with the second point, i.e. ending a life. A dying person should not be looked at as a series of tests and technological struggle between life and death, rather, as a person preparing himself to meet the Savior. We pray in our liturgy "for a Christian end to our lives, peaceful, blessed, without shame and suffering, and for a good account before the awesome judgement seat of Christ". Hence, we are bound to help one another reach this goal in a decent way: we should care for the dying in a compassionate and loving manner. He should really have his last confession and communion, surrounded by the ones he loves. And when excessive use of painkillers puts the sick into a coma; we should avoid doing so. Rather, we should attempt to keep the person conscious as much as possible. This is exactly why when we have a terminal case, we should not use artificial-breathing equipment.

Father Dimitrios concluded that we should not accept merciful killing because it is the ultimate standpoint of despair - an attitude

refused in orthodoxy. Instead, we can prepare rest-houses for the elderly where they would pass the remaining of their lives in an atmosphere of hope and comfort rather than just hoping to have their lives ended because of some economical difficulty their life-condition may entail on their relatives.