

ON LIFE AND DEATH AND THE ETHICS OF MEDICINE

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A physician not worthy of this title is reported to have performed a highly irresponsible act recently: He attempted an abortion on a teenager in her sixth month of pregnancy without first completing a reliable history and physical examination. The young and frightened girl was delivered within 24 hours of a mangled but still living creature, missing a piece of its skull. The miracles of modern medicine are such that life can be maintained and extended for long periods of time by artificially supporting the vital functions of the organism, even when these are severely compromised. The tragic case of a Karen Ann Quinlan is another case in point. As our knowledge of physiology and pathogenesis deepened, we have learned to overcome and override the wisdom of nature. Life is now routinely prolonged where certain death would have previously occurred. Not always a blessing, it obviously poses complex and frightening moral dilemmas for physicians, whose training ill-equips them to deal with such problems.

This writer addressed himself briefly to these issues in a recent editorial (Detroit Medical News, "More About Guyana--And Those Left Behind", December , 1978): "Life itself is sacred, to be cherished, guarded and preserved," adding that, "The horrors of Guyana and Auschwitz have become possible only after this elementary principle has been ignored." But reality is rarely so starkly black or white, and all absolute statements usually need to be qualified. Yet, the very recognition that justifiable exceptions exist to such absolute statements places a horrifyingly difficult responsibility on the shoulders of physicians, a burden of immense moral complexities. Many try to avoid this painful task by simply claiming that

human limitations forestall our making God-like judgments. But this luxury does not exist in reality for those, like physicians, whose decisions inevitably affect the lives of others.

What is our responsibility to healthy members of a family whose entire lives are misshapen, emotionally, financially and otherwise, by continually caring for a hopelessly damaged, vegetable-like organism, who lingers on endlessly "thanks" to our endeavors? Is society not responsible to protect its members against habitual murderers and rapists who could neither be reformed nor successfully incarcerated? A child of twelve can become pregnant, but few such children should, could or would responsibly care for an offspring that they bring into the world. Are abortions really unacceptable under any and all conditions? Uncompromising adherence to the principle that life is always sacred, even in utero, saves us from facing such horrible choices, but we then increase pain, suffering and even preventable death. On the other hand, are we not inviting another Guyana or Auschwitz if we compromise?

There ought to be no justification for the death penalty, but history demonstrates amply that the "general good" sometimes dictates otherwise. Every child ought to be a wanted one for no conceivable justification for abortions but gross malformations would exist then. If life sustaining equipment were never invented nor introduced, the moral question of when to pull the plug would never have to be asked. The list can be extended to include tens, if not hundreds, of horrendously perplexing moral choices. Physicians are saddled with them and, even if we try, Jonah-like, to escape the task--the monstrous choices remain nearby and force themselves upon us.

Those who refuse to involve themselves in the practical necessities of making life and death decisions may perhaps recognize a real incapacity to face such issues. Powerful unconscious forces influence the judgment and

sway the reasoning of every person. Denial and repression have always existed, long before they were named as such by modern psychology. Unconscious rage, from whatever source, had been diverted throughout history against individuals and groups that were seen as hateful, just as in the Biblical story, the scapegoat was driven into the desert to carry our sins away.

All societies have established value systems and moral codes to control such base and primitive wishes and fantasies. Since neither physicians nor priests are exempt, those not sure enough of the purity of their hidden motives are wise in disqualifying themselves from making such decisions.

Professed adherence to a strict moral code is in itself to guarantee that personality blind-spots will not mislead us in one direction or another. We will, however, minimize errors if the task is always entrusted to groups of individuals, physicians and others, rather than to any one individual. Blind spots tend to cancel each other out. It is an unenviable task to be performed by those who value and respect life and who know suffering and death. It must never be undertaken without a continuous, patient and painful search of one's own soul and motivations.

And those who in their confusion experience physicians as arrogant and insensitive abusers of authority, would they really prefer to entrust such decisions to the hands of quality-assurance bureaucrats?