HIPPOCRATIC OATH

...I will follow that system of regimen which, according to my ability and judgment, I consider for the benefit of my patients, and abstain from whatever is deleterious and mischievous. I will give no deadly medicine to any one if asked, nor suggest any such counsel; and in like manner I will not give a woman a pessary to produce abortion...
THE INHERENT VALUE OF HUMAN LIFE

INTRODUCTION

In a prophetic article in the July 14, 1949 issue of the *New England Journal of Medicine*, Leo Alexander, an individual who had worked for the chief counsel for war crimes after World War II, examined the initial causes of the Holocaust. The beginnings, he stated, were merely a subtle shift in emphasis in the basic attitudes of physicians. It started with the belief—which is common today in the euthanasia movement—that there is such a thing as “life not worthy to be lived” (Alexander, 1949). The Nazis often described the patients that they were killing as “useless eaters.” Among those physicians who helped start the Nazi killing mentality was Ernst Wetzler who, ironically, was the inventor of an incubator for children born prematurely. In commenting on his gruesome acts, Dr. Wetzler called his participation in the murder of disabled infants in Germany “a small contribution to human progress” (as quoted in Smith, 2000, p. 43). It is not surprising, in light of recent attitudes here in the United States, that just before his death in 1984, Alexander warned that these same lethal attitudes were taking root in this country. Biomedical ethicist Amil E. Shamoo agrees. He stated: “We in the United States don’t have systemic atrocities, we have compartmentalized atrocities. But the intellectual underpinnings are the same as they once were in Germany: for the good of science; for the advancement of knowledge; for the benefit of society; for the national interest” (as quoted in Smith, p. 47).

While we have not yet reached a point in which we are throwing individuals into crematoriums like the Nazis did during the Holocaust, an indifferent and apathetic attitude toward human life nevertheless has quietly taken root—the seeds of which were first sown in the act of violence against human life that is recorded in Genesis 4:8. This murderous act of Cain firmly established the roots of violence amidst humanity. The evil fruit of death that we see daily in newspapers and on the evening news is the result of generations of humans who have forgotten God—and thus the value of human life has plummeted. It is worth noting that one of the warnings Moses gave the children of Israel before they entered that land of milk and honey was not to forget God (Deuteronomy 8:10-14). Have we, in our own land of milk and honey, forgotten God? It appears that our prosperity is causing Americans to strive for an “ideal” human population in which the old, sick, disabled, and unwanted often are discarded like yesterday’s trash.

Are humans nothing more than “higher animals,” as some would have us believe? Sadly, the questions revolving around the value of human life are found at both ends of the spectrum. On one end there are individuals who consider embryos tucked safely away in the wombs of mothers who are eight
or nine months pregnant to be nothing more than “tissue.” Interestingly, this “tissue” is known to have well-developed internal organs, possesses active brain waves, responds to light and sound, and occasionally sucks its thumb. On the other end of the spectrum are aged individuals who argue that they already have lived a full life and therefore their death should be facilitated and hastened by the medical community via euthanasia (literally, “good death”). Lying in between these two extremes are those heart-rending cases in which families must decide whether or not to remove life support from a comatose individual who is lying in a bed and connected to a respirator. And then there are the cases where terminal illnesses have invaded the lives of those far too young to battle these wretched afflictions. Although rarely discussed aloud—and certainly never admitted publicly—there are also those cases in which the medical establishment often “trades off” a human life after comparing the high cost of medical treatment via a complex cost-benefit ratio. But what is the real cost?

What is the value of human life? What should be a Christian’s attitude, and what are a Christian’s obligations, in such matters? In order to better investigate these moral dilemmas, we first need to define life and death. According to Stedman’s Concise Medical Dictionary, life is: “vitality, the essential condition of being alive; the state of existence characterized by active metabolism; the existence of organisms” (see McDonough, 1994, p. 567). Death is defined as: “cessation of life; in multicellular organisms, a gradual process at the cellular level, with tissues varying in their ability to withstand deprivation of oxygen; in higher organisms, a cessation of integrated tissue and organ functions; in man, manifested by the loss of heart beat, by the absence of spontaneous breathing, and by cerebral death” (p. 253). On occasion, physicians will specify that someone has reached a state of brain death or cerebral death. This is defined as: “in the presence of cardiac activity, the permanent loss of cerebral function, manifested clinically by absence of purposive responsiveness to external stimuli, absence of cephalic reflexes, apnea, and an isoelectric electroencephalogram [EEG] for at least 30 minutes in the absence of hypothermia and poisoning by central nervous system depressants” (p. 253). But not everyone agrees with such definitions. When does life truly begin, and when is someone truly considered dead? Our society is finding ways to “bend” these definitions in order to accommodate specific situations as they arise.

**ABORTION—MURDER OF THE UNBORN**

In writing his lengthy opinion for the court in the infamous Roe vs. Wade case, Justice Harry Blackmun stated: “We need not resolve the question of when life begins.” With those few words, the lives of millions of tiny babies were cut short, sending their souls heavenward. The Centers for Disease Control in Atlanta, Georgia, report that over 1,200,000 abortions were performed in the United States in 1995 (see CDC—Abortion statistics, 2001; remember that these are only the instances that were reported). In fact, the United Sta-
tes has averaged well over a million abortions per year since 1977. The CDC estimates that 55 percent of legal abortions occur within the first eight weeks of gestation and that 88 percent are performed within the first twelve weeks. According to many, this short span of time makes a big difference. Prior to the twelfth gestational week, many people view the embryo as “nonliving”; thus, life is not “terminated” in an early abortion. However, the facts indicate a totally different picture, as James Drummey has pointed out:

Though it may still surprise some, there are few things more certain in January 1986 than that the unborn are human beings. It is a biological and scientific fact that human life begins at fertilization, when the sperm cell of the father penetrates the egg cell of the mother. That unique genetic package, something that each of us once was, contains everything that a person will become—the color of her eyes, the size of his feet, even whether he or she will contract diabetes at age fifty.

We know that its heart begins to beat eighteen days after fertilization, that brain waves can be recorded by the fortieth day, and that all body systems are present at eight weeks, and working by the eleventh week. Technological advances are such that more and more babies are surviving births after only 20 to 24 weeks of the normal forty-week pregnancy. And yet, the Minnesota Supreme Court ruled last month that an 8½-month-old unborn child was not a human being under Minnesota law (1986, p. 22).

Christians obviously cannot afford to be so tranquil in resolving the issue of when life begins. Our actions (or lack thereof) will stand in judgment one day. The inspired Word of God is crystal clear on such matters. Beginning as early as Genesis chapter 4:1, we read: “And Adam knew Eve his wife; and she conceived, and bare Cain, and said, ‘I have gotten a man from the Lord.’” Some forty times the Scriptures make reference to women conceiving. It is no accident that the inspired writers mention this extraordinary moment in which the sperm and egg come together—for it is only at that instant that their chromosomes join to form the full complement of chromosomes that is capable of producing human life. James observed: “The body apart from the spirit (pneuma) is dead” (2:26). But the opposite of that statement also must be true; if the body is living, then the spirit must be present. Thus, upon conception—when that full complement of chromosomes is actively metabolizing and living—God already has placed a soul within the living embryo. Additionally, Jeremiah the prophet stated that the word of the Lord came unto him saying: “Before I formed thee in the belly I knew thee; and before thou camest forth out of the womb I sanctified thee, and I ordained thee a prophet unto the nations” (1:5). The prophet Isaiah confirmed it this way: “Listen, O isles, unto me, and hearken ye peoples, from afar; Jehovah hath called me from the womb; from the bowels of my mother hath he made mention of my name….And now, saith the Lord that formed me from the womb to be his servant...” (Isaiah 49:1,5). Jehovah not only viewed Isaiah as a person prior to his birth, but even called him by name. It thus becomes obvious from an
examination of this text that God does not consider life as beginning at birth, but rather at conception.

In addressing a Senate Judiciary Subcommittee on April 23-24, 1981, Richard V. Jaynes stated: “To say that the beginning of human life cannot be determined scientifically is utterly ridiculous.” Those hearings were carried out to determine the question of when human life begins. Accompanying Dr. Jaynes that day was a group of internationally known geneticists and biologists who conclusively reiterated that life begins at conception—and they told their story with a profound absence of opposing testimony.

Dr. Micheline Mathews-Roth of Harvard Medical School gave confirming testimony, supported by references from over twenty embryology (and other medical) textbooks that human life begins at conception. The man known as the “father of modern genetics,” Dr. Jerome Lejeune, told the lawmakers: “To accept the fact that after fertilization has taken place a new human has come into being is no longer a matter of taste or opinion...it is plain experimental evidence.” Dr. Hymie Gordon, chairman of the department of genetics at the Mayo Clinic, added: “By all the criteria of modern molecular biology, life is present from the moment of conception.” Dr. McCarthy de Mere of the University of Tennessee, who is both a medical doctor and law professor, testified: “The exact moment of the beginning of personhood and of the human body is at the moment of conception.” Dr. Alfred Bongiovanni of the University of Pennsylvania School of Medicine concluded: “I am no more prepared to say that these early stages represent an incomplete human being than I would be to say that the child prior to the dramatic effects of puberty...is not a human being” (see East, 1981, as reference for each of the above quotes).

**FERTILIZED EMBRYOS—A FROZEN FATE AWAITS**

One of those giving testimony during that hearing was Landrum Shettles, often called the “father of in vitro fertilization.” Dr. Shettles noted: “Conception confers life and makes that life one of a kind.” And regarding the Supreme Court ruling in Roe v. Wade, he stated: “To deny a truth [about when life begins—BT/BH] should not be made a basis for legalizing abortion.” Interesting words from a man who helped fill in vitro fertilization clinics with embryos—embryos that already have been fertilized and thus, in all aspects are human.

In their 1998 National Summary, the Centers for Disease Control reported that 61,650 cycles of artificial reproductive fertilization occurred in the United States (see CDC—National Summary, 1998). On average, 5-12 eggs were fertilized in order to facilitate embryonic transfer, although it is not uncommon for some individuals to have at their disposal 20 or more embryos after artificial reproductive procedures. The CDC reports that, on average, physicians implanted only 3.7 embryos into women hoping to become pregnant. This would result in a minimum of 2-8 embryos being unused and therefore fro-
zen, which means that each year in the United States alone we are plunging somewhere between 123,300 – 493,200 embryos into the freezing depths of liquid-nitrogen canisters. At that rate, it will take only a few years to reach the 1 million mark. Sadly, one of the chief reasons such embryos often are discarded is financial. The high price of transporting these fertilized embryos to a long-term cryogenic center, combined with the yearly fees for maintaining the embryos in liquid nitrogen, eventually weighs heavily on those involved in this reproductive technology.

THOSE WHO ARE NOT QUITE “UP TO PAR”

But it is not just the unborn whose lives have become fodder for medical experimentation. Consider what happens after a baby is born. Researchers at the University of Oklahoma carried out research on babies that were suffering from spina bifida (Smith, 2000, p. 49). They hoped that one day their research would help clinicians determine which babies should receive treatment for their condition, and which should go untreated because of the perception that their lives would be of “insufficient quality” to be worth living. So the researchers established standards that children would have to meet in order to be treated. However, if the researchers deemed an infant’s potential for life or quality of life was “sub par,” then his or her parents were strongly advised against medical treatment. Of the 69 children included in this study, 36 received aggressive treatment, while 33 received only “supportive” care. None of the aggressively treated babies died, but 24 of the babies that received only supportive care died. [Interestingly, four of the babies who were recommended for “supportive care only” lived, because their parents insisted they receive treatment.] Nobel Laureate James Watson once stated: “No one should be thought of as alive until about three days after birth,” adding that parents could then “be allowed the choice” to keep their baby or “allow” their baby to die (1973, p. 13). The other Nobel Laureate of that famed partnership, Francis Crick, remarked: “No newborn should be declared human until it has passed certain tests regarding its genetic endowment and that if it fails these tests it forfeits the right to life” (as quoted in Smith, 2000, p. 55). So now we find ourselves arbitrating who should “forfeit their right to life.”

SUICIDE, EUTHANASIA, AND THE ELDERLY

What happens when the elderly members of society no longer feel loved and begin to think of themselves as a “burden”? Consider the eighty-year-old grandmother with multiple medical complications who does not want to be a bother to her children. Society sometimes places very little value on the disabled and elderly, and therefore many are taking their own lives prematurely either through euthanasia or suicide. Diane Coleman, founder of Not Dead Yet, stated: “There is a great revulsion against disabled people that is visceral.
This disdain is masked as compassion but many people believe that in an ideal world, disabled people wouldn’t be there” (as quoted in Smith, p. 28).

An Oregon report on assisted suicide for the year 2000 showed that more patients than ever before took their lives because they felt they had become a burden to friends, family, and caregivers. In Oregon, where assisted suicide was legalized in 1994, doctors prescribed deadly drugs to 39 patients— and yet when the local newspapers ran headlines bemoaning the state’s soaring suicide rate among adolescents, nobody connected the dots. Of those 39 cases, at least 27 people were reported as having died from a deliberate lethal overdose of controlled substances under Oregon’s assisted-suicide law. Additionally, the median time between a patient’s initial request for assisted suicide and his or her death went from 83 days in 1999 to a mere 30 days in 2000. Interestingly, all of the patients who have died using the Oregon law took barbiturates, which are regulated by the federal government. The 1970 Controlled Substance Act specifically says that drugs may be used only for “legitimate medical purposes.” Does assisted suicide fit that definition? The American Medical Association (AMA) is on record as supporting abortion, yet this same professional organization has taken a firm stand in defense of life in the area of doctor-assisted suicide. In a medical brief, the AMA stated: “There is, in short, compelling evidence of the need to ensure that all patients have access to quality palliative [reducing the severity of, or alleviating the symptoms without curing the disease—BT/BH] care, but not of any need for physician-assisted suicide...” (see AMA: Anti-Euthanasia, Pro-Pain Control). States like Oregon already allow euthanasia, and it is only a matter of time before other states adopt their own versions of this murderous legislation.

On average, eighteen elderly Americans take their own lives each day, with the highest rate coming from white American males who are 65 years old or older (see the United States Department of Health and Human Services, 1999). Disabled seniors who do not take their own lives often inadvertently cause their families to have to wrestle with an entirely different moral dilemma. Consider the following paradox. We imprison individuals for not feeding or taking care of animals, and yet our society now deems receiving nutrients through a feeding tube and/or IV in the case of humans a “medical procedure” that can be withheld, depending on what the patient’s power of attorney says. Is it “humane” to withhold food from a horse? The courts say “no,” and will send a person to prison for doing so. Yet that same judicial system will allow a person to withhold life-saving nutrients and water from the elderly that are often affectionately referred to as grandparents.

**CONCLUSION**

We need to reaffirm to society that God does exist! Ever since the last shells exploded from World War II, children have been receiving a steady diet
of evolution and humanism in public schools. Many junior high classrooms still have a poster spread across the top of the chalkboard with an ape-like creature at one end and a human at the other—and everything in between. As humans, we must recognize that life is a gift from God—the Giver of life (Acts 17:28). We also must realize that by devaluing human life, we are reducing for ourselves the value of God sending His only begotten Son. The famous verse that many children learn before they ever enter school says: “For God so loved the world, that he gave his only begotten Son, that whosoever believeth in him should not perish, but have everlasting life” (John 3:16). If human life has little or no value, then what does that say about the gift of Christ? Why did Christ suffer and die on the cruel cross of Calvary? What is the value of a human life? Considering Who the Giver of life is, the value of that gift is immeasurable!

REFERENCES


United States Department of Health and Human Services (1999), The Surgeon General’s Call to Action to Prevent Suicide.

TRUE OR FALSE

Write TRUE or FALSE in the blanks before the following statements.

1. The medical definition of life is: “Vitality, the essential condition of being alive; the state of existence characterized by active metabolism.”
2. The United States has averaged 120,000 abortions per year since the Roe vs. Wade case.
3. Brain waves can be detected in unborn humans by gestational day 40.
4. Euthanasia is illegal in all 50 states in America.
5. Under normal circumstances, in vitro fertilization does not involve the destruction of human life.
6. On average, 18 elderly Americans take their own lives each day.
7. We imprison people for not caring adequately for animals.
8. Many of the atrocities during the Holocaust were said to be for the good of science, for the advancement of knowledge, for the benefit of society, and for the national interest.

MULTIPLE CHOICE

Circle the correct answer(s).

1. We know that, in an unborn child, the heart begins to beat how many days after fertilization?
   (a) 20 (b) 18 (c) 42 (d) 80

2. The individual who stated: “We need not resolve the question of when life begins.”
   (a) James Watson (b) Leo Alexander (c) Diane Coleman (d) Harry Blackmun
3. Some people, upon reaching old age, may
   (a) Feel like a burden  (b) Feel unloved
   (c) Gain better eyesight  (d) Have stronger bones

4. What is the average number of embryos implanted during in vitro fertilization?
   (a) 2.5  (b) 3.7
   (c) 4.0  (d) 1.8

5. According to Leo Alexander, the initial causes of the holocaust were merely a subtle shift in emphasis in the basic attitudes of:
   (a) Political leaders  (b) Religious leaders
   (c) Physicians  (d) Jews

**FILL IN THE BLANKS**

1. Sir Francis Crick stated: “No newborn should be declared ________ until it has passed certain tests regarding its genetic endowment and that if it fails these tests it forfeits the right to life.”

2. Every year in the United States somewhere between 123,000 - 493,200 ________ are frozen.

3. Richard V. Jaynes stated: “To say that the beginning of human life cannot be determined ________ is utterly ridiculous.”

4. Dr. James Watson commented: “No one should be thought of as ________ until about three days after birth.”

5. Dr. McCarthy de Mere remarked: “The exact moment of the ________ of personhood and of the human body is at the moment of conception.”

**COMPLETE THE BIBLE VERSES**

*(New King James Version)*

1. Jeremiah 1:5: “Before I formed you in the ________ I knew you; before you were born I sanctified you; I ordained you a prophet to the nations.”

2. Isaiah 49:1: “Listen, O coastlands, to Me, and take heed, you peoples from afar! The Lord has called Me from the womb; from the matrix of my mother He has made mention of My ________.”
3. Deuteronomy 8:11: “Beware that you do not ________ the Lord your God by not keeping His commandments, His judgments, and His statues which I command you today.”

4. John 3:16: “For God so loved the world that He gave His only ________ Son, that whoever believes in Him should not perish but have everlasting life.”

5. Acts 17:28: “For in Him we live and move and have our being, as also some of your own poets have said, ‘For we are also His ________.’”