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Letters to the Editor

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Letter to the Editor

To the Editor:

I would like to respond to two recent articles in *Linacre Quarterly*.

First, I found the article "On Rescuing Frozen Embryos" (Aug. 2002), fascinating. I've always been interested in moral questions, yet I humbly admit my amateur status. When I first heard of embryo rescue, I could find nothing morally objectionable. After reading the article, I was quite impressed with the moral arguments against it. However, I ultimately found Helen Watt's argument the most persuasive because she better addresses the science of the situation from which the moral analysis can proceed.

The normal (or usual) "generative continuum" simply is not present in embryo rescue. As a matter of fact, the essential generative aspect — conception — is absent in embryo rescue. I would propose that in this case, it is the issue of conception that defines the act as moral or not. Conceiving a child outside the marital act is clearly immoral. But once the child is present, we are past that moral question. Implanting that embryo into a rescuer's womb is not the same thing as conceiving a child. This pregnancy is not the same, either qualitatively or quantitatively, as a pregnancy resulting from the conception. The critical generative aspect (creation of new life) is not present. So, I would argue that the embryo rescuer's pregnancy does not violate the marital act because it lacks the creative aspect to which the marital act is ordained (It would also seem that issues of chastity and

fidelity would not be problematic since conception does not occur.)

There are other considerations such as seemingly cooperating with or encouraging in vitro fertilization. Nonetheless IVF can still be and should be clearly condemned, while still attempting to legitimately help the child brought into being by this immoral procedure.

Although this idea might seem crass, one might consider that, from a moral standpoint, the rescuer's womb might be viewed as a temporary organ donation, a kind of biological incubator, which the child uses temporarily for growth and development.

Embryo rescue should be viewed as a heroic, charitable act of nurturing and of assisting the child to develop in a normal manner.

Next, I would like to respond to "The Tragic Case of Jodie and Mary: Questions about Separating Conjoined Twins" (May, 2003).

Dr. Kaczor makes some initial points that do not make sense to me. "Imagine a person living without organs through divine intervention." This is not a helpful observation. Are we to expect God to supply organs once they are removed? Later he notes that at early stages of development, the embryo survives without vital organs. But what is a vital organ at that stage? Of course there is no heart very early on, but the embryo does not need one at that time; it is not a vital organ at that time. He then rightly argues that removing vital organs per se is not wrong, but this must be coupled with

a procedure that replaces them or their function. To remove them without offering reasonable life sustaining therapy would be wrong, except maybe perhaps in some heroic organ donation which is freely chosen by the donor. Finally, he wrongly seems to equate a person being refused food and water with someone who voluntarily refuses food and water in a hunger strike. Again, a person may freely lay down his or her life for a just cause; but this is obviously different from an outside party imposing a lethal act.

But my main concern is with his analysis of intentional killing of the conjoined twins. If I properly understand his argument it is this: Under extreme circumstances, i.e., to preserve the life of person A, it is licit to perform a clearly lethal procedure directly on person B which directly results in the death of person B as long as the death of person B is unintended and the actual death of person B does not cause the good effect of preserving the life of person A. Under this approach it is licit to separate the weaker twin. It would also be licit to perform a "therapeutic" abortion to save the life of the mother.

I think this approach wrongly entangles intent and means — a "vexing problem" indeed. I would argue that in these situations, if a procedure which guarantees death is performed directly on a person, and it directly results in the death of that person, it is illicit because that person's death is a PRIMARY effect of the procedure; and the fact that his or her death is unintended and is not the cause of the good effect does not make it licit.

In the classic principle of double

effect the bad effect should be a secondary effect as well as an unintended effect. When a diseased gravid maternal organ is removed, the procedure is directed at the diseased maternal organ. Its removal and the cure of the mother are primary effects of the procedure, and the loss of the child is a secondary unintended effect. Certainly procedures performed on patients may cause death, but these procedures are initiated with a reasonable hope and chance of success. But when a clearly lethal procedure is performed directly on a person, and it directly causes the death of that person, that person's death is a primary effect of the action done and in my view is direct and intentional killing of an innocent human being regardless of the circumstances. So I would characterize Mary's death (as well as a "therapeutic abortion") as intentional killing.

— James E. Brown, Jr., M.D.
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