Flesh & Bone & The Protestant Conscience

Are biomedical advances erasing Christian distinctives?

A Christian eBook by Anne Turner
Exploring Biomedical & End-of-life Practices & Organ Sharing in the Light of Scripture

• Are biomedical advances erasing Christian distinctives?
• What exactly is the Christian doctrine of the Resurrection?
• How will you answer the medical middlemen seeking the flesh and bone of your loved one on the day of death?
• Should “my consent” be the ruling ethic in sharing body parts?
• Do you know and agree with the current scientific definition of Death?
• Do you believe in “The most good for the largest number of people”?
• Did you know the Living Will was popularized by the Euthanasia Society?
• Would you let your conscience be your guide?
# Table of Contents

**Introduction:** How would you answer?

1. Perplexed
2. A loud and clear cry
3. Have you signed your driver’s license?
4. Mistakes will be made
5. Will to live!
6. Encouraged by Catholics
8. Memorize Proverbs 31:8!
9. Where to stop?
10. DNA and the Protestant Conscience
11. Kidney stew, chopped liver, lobe of lung—pancreas attack!
12. Would you let your conscience be your guide?
13. Device-ive Health Care
14. Hastening Death
15. Render unto Science?
16. Criteria
17. How will you answer the callers who want skin and bone from your deceased loved one?

**Expert Testimony:** The Power and the Glory

**Appendix:** With God, all things are possible

**Afterword:** The Resurrection and the Sanctity of Life
INTRODUCTION

How would you answer?

Flesh and Bone and The Protestant Conscience is a long name for a short book.

The book was originally a blog series on www.SisterSite.org, a Christian blog presenting Bible studies, meditations and other content. The current url is SistersSite.org/

The author, Anne, sets out to discover how to answer the people who call on the day of a loved one’s death, to ask if you might be willing for their skin and bone to be used for medical needs.

How would you answer these callers?

The first chapter defines the dilemma:

My brother and I talked about it but could not come to any conclusions. We simply did not feel good about it, so we refused. How could we allow dad’s body to be flayed and drilled, sawed and mutilated? No! No! Never!

Were we wrong? Were we selfish? Sentimental? Old-fashioned? Uneducated? What would you call us?

After many years, I would still wonder, if I am asked again, for a sibling, myself or a friend, would I allow any of their skin and bone to be removed upon death? Would you?

Answering this question is simplified by arriving at it through a series of inquiries to explore the current medical definition of death, the burgeoning body parts industry, the many assaults on human life, and related issues. Anne’s intent was to discover God’s mind in these matters.

Her desire is for readers to think through the problem for themselves, and for leaders in the church to realize that laypeople need their help and guidance. Her answer is presented as her own conclusion, and she does not speak for her church denomination.

Since the chapters originally were blog posts, a few have reference to specific days of the calendar year. Chapter Six was posted on St. Patrick’s Day of 2014 and Chapter 10 was posted during Easter week.

The hyperlinks in the content are referenced in order at the end of each chapter.
My father passed away in his sleep, just as my sister had prayed that he would. Her prayer was that the Lord would take him away easily and painlessly. Wouldn’t we all like to go that way?

It was early in the morning and I did not know he had left me until around 6:30 AM. I normally rose early to enjoy time reading the news and the Bible before starting to work in my home-based business. My dad and I lived together for roughly ten years before he died.

He usually woke up around 5:30, but at times slept longer, and I decided he needed extra sleep, but finally I went to check on him, and he was not there. Or, was he?

What would you say? Most Christians would explain that his spirit had departed but his body was there.

I called EMS and several technicians arrived shortly and made EVERY effort to revive dad. Finally, they took his body to a nearby hospital and I got dressed and followed them.

There I found him on a gurney in a private area with very low light. How impossible that he was not there. My father! A wonderful father. Before leaving him, I kissed his forehead.

I was given instructions on how to proceed with necessary details, and called my brother who was less than a few hours away.

As the pace of the day quickened, my brother and I began to receive phone calls from strangers. They wanted to know if we would permit dad’s skin and bone to be used for medical purposes. There were many of these calls. How strange! I did not recall that we had received such requests after mom died in the late 1980s. It was now 2006. We were perplexed.

Perhaps you have experienced this. If not, what do you think your response would be? My brother and I talked about it but could not come to any conclusions. We simply did not feel good about it, so we refused. How could we allow dad’s body to be flayed and drilled, sawed and mutilated? No! No! Never!

Were we wrong? Were we selfish? Sentimental? Old-fashioned? Uneducated? What would you call us?

After many years, I would still wonder, if I am asked again, for a sibling, myself or a friend, would I allow any of their skin and bone to be removed upon death? Would you?
The Flesh and Bone and the Protestant Conscience series will explore a globe of ideas, inquiries and facts relating to human body parts and scientific explorations, medical procedures, practices relating to death, controversies about healthcare and end-of-life dilemmas, and enlightening Bible passages.

The landscape includes the seascape, or, put another way, it is a vast, 360-degree tour, and though we turn slowly scanning the horizon, no doubt sights and insights will be overlooked. It’s just too much to contemplate!

Where is the starting point? I see

- companies offering new insurance instruments that cash in on the market for body parts;
- the collagen of aborted fetuses used for cosmetics, hand cream and more;
- the probable melting of the “snowflake” frozen human embryos that resulted from in vitro fertilization, whose “Snowflakes” organization had been funded by President Bush;
- Belgium approving a law in 2014 to allow doctors to euthanize children;
- the lustful drive to legalize assisted suicide;

and always, the redefinition of words that resonate with memories or notions we may have of respect for the dead or for life. And I have only turned in my circle five degrees or less, figuratively speaking.

The scenes are out of order. Overlaps must be resolved and topics categorized, but how? And, is a Protestant Conscience capable of discerning how to rightly judge the medical, bio- and death ethics of today?

Searching the internet for expert opinions, many good pages come into view. One was on the United Network for Organ Sharing site, a page listing the many faith denominations with a stance on the topic. The only faith not in favor of organ donation was the Shinto, because the Japanese do not approve of injuring a dead body due to their strong identity in ancestors.

Many protestant denominations have position statements on abortion and some other topics, but what about tissue or organ donation? Of those I am familiar with, such dilemmas are left to the individual conscience.
Perhaps you already hold an opinion or belief about some practices, but others are unclear, even daunting. Snowflake babies?* Stop doing that! But what about donating your kidney? Hmmm.

Here is an example of the thinking I want to pursue in this series: A Wall Street Journal article, updated 1-18-14, reported that in 2012, 95,000 Americans were on the waiting list for new kidneys, yet only 16,500 kidney transplants were performed that year.

“Since the number of kidneys available at a reasonable price would be far more than needed to close the gap between the demand and supply of kidneys, there would no longer be any significant waiting time to get a kidney transplant. The number of people on dialysis would decline dramatically, and deaths due to long waits for a transplant would essentially disappear. Few countries have ever allowed the open purchase and sale of organs, but Iran permits the sale of kidneys by living donors. Scattered and incomplete evidence from Iran indicates that the price of kidneys there is about $4,000 and that waiting times to get kidneys have been largely eliminated. Since Iran's per capita income is one-quarter of that of the U.S., this evidence supports our $15,000 estimate. Other countries are also starting to think along these lines: Singapore and Australia have recently introduced limited payments to live donors that compensate mainly for time lost from work.” [reference2]

After reading this article, wouldn't most caring, logical people agree that the U.S. should follow in these footsteps?

After all, there is a market for women's eggs. It's the same principle. Or is it? What criteria should be satisfied? WWJD?

The cry for bodies and body parts from the living and dead is loud and clear, but what about the cry against it? It is weaker, restrained, measured: weaker because raised by a minority, restrained by a vocal majority, measured or carefully worded to uphold truth and life.

In the Book of Jude we find an example of it: But even the archangel Michael, when he was disputing with the devil about the body of Moses, did not himself dare to condemn him for slander but said, “The Lord rebuke you!” (Jude 1:9)

The Lord can override any power block, and Moses was buried: And Moses the servant of the LORD died there in Moab, as the LORD had said. He buried him in Moab, in the valley opposite Beth Peor, but to this day no one knows where his grave is. Moses was a hundred and twenty years old when he died, yet his eyes were not weak nor his strength gone. (Deut 34:5-7)

References for hyperlinks:

1 United Network for Organ Sharing -
2 Cash for Kidneys: The Case for a Market for Organs
http://tinyurl.com/nyn4zat

ORIGINALLY PUBLISHED 02-17-2014

* A “snowflake” baby is an embryo frozen after being discarded in the process of in vitro fertilization. An article that helps to explain this phenomenon is: “Soul on Ice...”

Added Winter 2019
A blog series on Live Kidney Donation can be found on SistersSite.org,
http://sisterssite.org/biotech/category/kidneys
THREE

Have you signed your driver’s license?

To take up where we left off, reflecting on the death of Moses, those who study to look into God’s ways may draw certain conclusions:

1. Moses was healthy when he died at age 120. (Deut 34:5–7) The Lord selected the timing of his death. The timing of a person’s death is God’s right.

2. He was buried by God or perhaps by the archangel Michael. Burial is a duty which those who love us best or those appointed are charged to carry out.

3. There was an argument about his body between two angels (Jude 1:9), and the good angel did not try to win by his own wisdom or power, but by standing behind the Name of the Lord. Disputes over dead bodies are not uncommon, and no one can confront Satan except in the Lord.

Have we outlived the truth or comfort of the first two verities? Haven't all the advances in medical technologies deposed God as the arbiter of death? And what is wrong with cremation?

Somehow the lamentations of Jeremiah come to mind: How doth the city sit solitary, that was full of people! How is she become as a widow… he hath violently taken away his tabernacle as if it were of a garden… (Lam 1:1a; 2:6) Jeremiah could recall the grandeur of Jerusalem as he lamented her ruination. Even the temple had been leveled as when a time of harvest ends and rotting roots are exposed. (Lam 2:6)

I remember when cars on the highway pulled over to show respect when a funeral procession came into view. Cremation was associated with Auschwitz. Everybody got buried, I think. The church and societal institutions stood as beacons.

Were those old days better? Is it not right to share organs and save lives? Isn't cremation OK? For the moment, let’s focus only on the timing of one’s death in the context of organ donation by those who are presumably dead.

Definitions of death abound. Traditionally, it was considered as the time when the soul left the body because the person had stopped breathing.

In 1968 death was redefined by a Harvard Medical School committee to relocate the function of the brain as the seat of life. The criteria for brain (legal) death are: 1. Coma or Unresponsiveness, 2. Absence of Brainstem Reflexes, 3. Absence of Breathing (Apnea).
The advent of mechanical respiration introduced a way to keep a person alive beyond when natural death would have occurred. However, prior to 1968 ventilators were used and patients died on ventilators, so there was no controversy about the time of death, because a ventilator can push air into a body, but after death, the air cannot come out.

Today, a ventilator may be added as the patient nears death, to sustain life for organ donation. It’s the law:

If determined to be a prospective donor, the Revised Uniform Anatomical Gift Act (UAGA 2006), section 21, creates a default rule requiring that measures necessary to ensure the medical suitability of an organ for transplantation may not be withheld or withdrawn. The initiation and/or continuation of life support systems is the default rule and overrides a prospective donor’s expression in an advance health care directive not to have life prolonged by life support systems. To resolve the tension between the presumed intent to donate organs and the expressed intent not to have life support systems administered merely to prolong life, section 21 presumes that for a prospective donor the desire to save lives by making an anatomical gift trumps the desire to have life support systems withheld or withdrawn. (ed) The Revised UAGA (2006) requires a prospective donor to expressly provide contrary intent to prevent the use of life support systems for organ donation purposes in either a declaration or advance health care directives. (The United States Revised Uniform Anatomical Gift Act (2006): New challenges\(^1\) to balancing patient rights and physician responsibilities) (Revised 2007\(^2\))

One physician who has stood against the reinvention of death, Dr. Paul A. Byrne, explains in his article, Do Your Organs Belong to the Government?\(^3\), that transplantation DEPENDS ON LIVING BEINGS:

The heart, liver and other vital organs are suitable for transplantation only when there is circulation and respiration albeit supported by a ventilator. After true death the ventilator cannot support circulation and respiration. After true death vital organs cannot be transplanted from a corpse…

Brain death is not TRUE death… True death is when the soul separates from the body.

(In other words, death occurs when a person stops breathing and the heart stops beating. The absence of blood circulation, respiration, pulse, and other vital functions, along with specific testing, prove that a person has died.)

In his article Dr. Byrne shares facts we all need to consider:
• The Federal Government is heavily involved with obtaining organs for transplantation.
• HIPAA’s privacy statutes can be set aside by 14 reasons why the government can obtain your medical information, and organ donation is one of them.
• It is no longer necessary by law for an organ donor to be of sound mind when their consent is given.
• In some states a person only 14 years old is legally able to sign to be an organ donor when they apply for a learner’s permit to drive.
• In the Revised Act of the Uniform Anatomical Gift Act (UAGA), a revocation of an anatomical gift does not equal a refusal.
• After the Harvard Criteria was published in 1968, 30 more disparate sets of criteria were published by 1978; many more have since been published. There is no general agreement as to which set of criteria to use to declare a person “brain dead.”

It is important to realize that if you sign your driver’s license or sign an Advance Directive, then you may be enabling a hospital staff to determine when you die. Would this be your intention and desire? Or would you not rather die in God’s perfect timing?

Of course, having life support removed may not be an unloving or wrong decision. In a Christian context, a doctor can direct a family in such matters that must be individually assessed with much prayer, yet fully guided by facts as well. The conscience cannot function without facts.

References for hyperlinks:

1 The United States Revised Uniform Anatomical Gift Act (2006): New challenges to balancing patient rights and physician responsibilities
http://www.ncbi.nlm.nih.gov/pmc/articles/PMC2001294/

2 Amendment to Revised Uniform Anatomical Gift Act

3 Do Your Organs Belong to the Government?

ORIGINALLY PUBLISHED 02-24-2014
Dr. Bernard Nathanson had overseen or performed about 75,000 abortions when his conscience began to trouble him. His original goal was to help dying women in the back alley days, and he had lobbied to make abortion legal. He even aborted his own child conceived with a girlfriend. For safety’s sake, he felt he would do the best job for her.

Yes, you may ask me...[W]hat did you feel? Did you not feel sad -- not only because you had extinguished the life of an unborn child, but, more, because you had destroyed your own child? I swear to you that I had no feelings aside from the sense of accomplishment, the pride of expertise. On inspecting the contents of the bag I felt only the satisfaction of knowing that I had done a thorough job. You pursue me: You ask if perhaps for a fleeting moment or so I experienced a flicker of regret, a microgram of remorse? No and no. And that, dear reader, is the mentality of the abortionist: another job well done, another demonstration of the moral neutrality of advanced technology in the hands of the amoral.

(from The Hand of God, Bernard Nathanson, 1996, pp 60,61)
In 1984 he asked an abortionist colleague to tape an ultrasound movie of an abortion. What they saw convicted them and they could no longer, in good conscience, abort babies. In the ultrasound, the fetus is seen pulling away from the probing instruments of the abortionist, crying out in pain, crying for help. This video, *The Silent Scream*[^1], is online, useful for anyone who is contemplating an abortion, to see exactly what will happen. Seeing is believing.

Also, believing is seeing; or it should be. As the hymn goes, *I once was blind but now I see.* However, we all know that it is possible to live many years and not see certain practices as immoral. The nudge of the conscience has not been felt or effective, perhaps for lack of seeing the lifestyle or reality underlying the sin we accept in ignorant bliss.

Silent screams are not confined to the helpless young. Anyone who has agreed to give the gift of life as an organ donor could experience the nightmare of wanting to scream but not being able to voice any sound at all.

A brain dead donor will be administered a paralyzing drug to prevent him or her from squirming and grimacing when a first incision is made. Yet, even paralyzed, the donor’s pulse races and blood pressure shoots up. Genuine cadavers don’t feel pain… Brain dead donors are often also anesthetized when their organs are removed. (from *Imposed Death*, The Human Life Alliance, 2009)

Will there be a sequel to *The Silent Scream*? Probably not— transplanting organs is too profitable not to pursue. *The total bill*[^2] for a heart transplant patient is nearly $1 million. For multi-organ transplants it’s nearly $2 million!

From the title of this post a reader may think I am poking fun at these horrors. No, I’m not. But is **murder** too strong a term for such practices? Are they not, rather, simply mistakes? After all, if a doctor is trying to save a life through organ transplantation, and he or she makes every effort to verify that the donor is legally dead, and on top of that anesthetizes the donor just in case their reflexes may jerk and cause a slip of the knife, then if anything else occurs, it’s just a mistake. What else could you call it? The doctor is obeying the law.

If you accompany a friend for an abortion or fail to object to it, you are not being unlawful. If you sign your driver’s license or an Advance Directive to be an organ donor, you are doing what the lawmakers and healthcare industry want you to do.

Should a Protestant Conscience object? Obey the authorities! (*Titus 3:1*) Or, shouldn’t we look to the sixth commandment?

Hold it. Should we in armchairs judge those on the front lines of medical practice? Let’s take a more careful look. Perhaps at this juncture we could say: It may be dangerous to move...
boundaries (Deut. 27:17)—as the concept relates to ethical norms.

There is much we don’t know about the human body and the brain. Example: In 2007 Zack Dunlap, 21, flipped over on his four-wheeler and sustained catastrophic brain injuries. After 36 hours, doctors declared him brain dead and preparations to harvest his organs were underway. Zack's cousin, a nurse, scraped his foot with a pocket knife and he jerked his foot away.

Zack recalls hearing the doctor pronounce him dead and being “mad inside” but unable to move. He is now talking and even walking.

Many prayed for Zack and all agreed his recovery was a miracle. Was it? What is your definition of a miracle?

References for hyperlinks:

1 The Silent Scream website
http://www.silentsscream.org/

2 2011 U.S. organ and tissue transplant cost estimates and discussion
https://transplantliving.org/before-the-transplant/financing-a-transplant/the-costs/

3 ‘Dead’ man recovering after ATV accident

ORIGINALLY PUBLISHED 03-03-2014
It’s time to recapitulate. This series of articles addresses many of the advanced medical practices and bioethical viewpoints that shape our contemporary treatment of humans as physical beings. And, may a Protestant Conscience go along with them? Specifically, I am leading up to whether a Christian ought to approve the harvesting of skin and bone from the cadaver of a loved one.

So far we have looked at the definition of death, organ donation by “brain dead” people, and transplantation ethics.

The Protestant Conscience is interested to know what the Bible says about subjects. When this is known it will be obeyed by grace through faith. However, in some of these new-fangled technologies, it is hard to grasp where in Scripture enlightenment may be found.

On the other hand, I once heard a preacher say: “We don't need to pray to know how to get from the house to the barn.” It should not be hard to figure out that operating on a person while he is alive though anesthetized, to harvest his organs to give to another human, is not something the Lord would condone.

In my previous post, I stopped somewhat short of calling organ transplantation from ‘brain dead’ people killing. It’s hard to do, since our society and all civilized countries espouse the practice, and the medical profession is wedded to it.

It seems presumptuous to rudely condemn professionals and nonprofit advocates whose stated goal is to save lives by transplanting organs from those whose time on earth is probably pretty much over, who will be memorialized in the life of a grateful recipient. Why would anyone oppose that? Good heavens, National Donor Day in the U.S. is on Valentine’s!

I cannot count the many occasions that a doctor has healed me and even saved my life. Though my illnesses were mostly minor, had I not received a correct diagnosis and treatment or medication, I would not be here. I respect my doctors and can even say that I love them. I am not sure what any of them think on this topic.

It will be best to share statements of two of their colleagues. Both of the following excerpts are found on the Organ Facts website from men named David, but it will take more than two British Davids to stand up against the Goliath medical establishment.

Human organ transplantation is Wrong because it necessitates the abuse of the
dying or harming the healthy.

Doctors should not be involved in such things…

The fundamental problem is that one cannot get transplantable organs – expected to function in the body of another for 10 years – from the truly dead. Hence the attempts to redefine death in an anticipatory sense for that purpose. All of them – the neurological and the recent faux circulatory – redefinitions are… no more than legal fictions – inventions for the purpose. Added to that are the terrible things certain members of our profession seem willing to do to their patients before they are in any sense dead when the condition of the wanted organs becomes the paramount consideration. - Dr. David Evans

Live organs can only come from living bodies. Death is commonly associated with an apnoeic, cold, ashen grey, pulseless, stiffening corpse, and not the warm, pink, breathing (albeit with a ventilator), heartbeating, responsive “donor”, and yet there is no requirement for explanation of the different conditions that will apply when a box is ticked for organs to be taken “after my death”. Increasing pressure continues to be applied to obtain this far-from-fully-informed “consent” or, when that fails, to abandon any pretence by using increasing compulsion.

It is well documented that those diagnosed as brain stem dead (BSD) respond to the trauma of surgery as for any other major operation by hypertension, tachycardia and movement, and require paralysis and some form of anaesthesia for control. Neither the “donor” nor relatives need be apprised of this nor is anaesthesia offered or guaranteed on the donor card or register. - Dr. David J. Hill

The best thing to do is to sign a Will to Live --NOT a Living Will. You can download your state’s Will to Live form here² and read more about the need for a Will to Live here³ and here⁴, all on the National Right To Life website.

Living Wills are dangerous documents, but that would be another lengthy blog series.

If you still feel unconvinced, be sure to read the Myths of Organ Donation⁵: Doctors will try to keep me alive even though I am an organ donor… Organ and Tissue donation will not disfigure me… Surgeons will wait until I am dead before removing organs… No one will gain financially from my organs and body tissues… Organ selling and organ robbing stories are silly “Urban Myths”…
References for hyperlinks:

1 Organ Facts website
http://www.organfacts.net/

National Right To Life links:
2 Download Your Will to Live Today
http://www.nrlc.org/medethics/willtolive/states/

3 Questions and Answers on the Will to Live
http://www.nrlc.org/medethics/willtolive/qawtl/

4 Living in the Bullseye of Euthanasia
http://www.nrlc.org/medethics/willtolive/cockfield/

5 The Real Myths of Organ Donation
http://www.organfacts.net/organdon/real-myths/

ORIGINALLY PUBLISHED 03-10-2014
Top of the morning to you on this St. Patrick's Day! St. Patrick evangelized Ireland using the shamrock to explain the Trinity. A Scotsman by birth, in his early teens he was forcibly taken to a pagan land of Druids, which the Emerald Isle once was. As an adult he would evangelize Ireland.

Have you found yourself in a pagan country, a land of heathens whose creed involves human sacrifices? Did their magic – Poof! – vaporize the Protestant Conscience? Are you under their spell or instead, emulating Patrick?

Though logically the topic of this post following from the last, should be about organ donation by the living, I will vary the landscape from gruesome visions of squirming and disfigured human bodies. Let’s look at new life.

If you are prolife, do you have a consistent life ethic? That is, do you believe human life should be protected from its start to its natural end? If so, then you will not agree to the practice of many forms of birth control, because they are abortifacient: they destroy the life that has begun.

From the Life Institute website, a fact of life is stated, which is scientific truth:

If and when a sperm does penetrate the shell of the ovum, it sheds its tail, and will proceed slowly into the center of the ovum. Its 23 chromosomes will line up next to the ovum’s 23 chromosomes, thus constituting a new cell, a fertilized ovum of 46 chromosomes. From the entrance of the sperm until the first cell division is a period of about 24 hours.

What is present at fertilization is an entire new human body, even though it is yet a single cell. This is the most complicated cell in the universe, for it contains within itself all of the information that is needed for this human to develop into a mature adult.

Methods such as “The Pill,” IUD, Ring, Patch and some others do not consistently prevent pregnancy; however, they can prevent implantation of the new life in the womb, and not infrequently. In May of 2012, a study involving 334 women was published in New England Journal of Medicine. Of these, 156 became pregnant due to failed contraception, 133 on the pill, patch or ring, and 21 using IUDs. No wonder it is said that The Pill is the number one cause of
abortion. Teens using such methods seek abortions when their contraception fails. Imagine the penalties on the mother's health!

On the “The World’s #1 Natural Health Website,” Mercola.com, Dr. Mercola encourages the use of natural birth control methods. Many couples today have figured out that Natural Family Planning tools such as a simple thermometer, can pinpoint when to avoid sexual relations, and such methods are 98 percent successful. See here².

Catholics who look to their church for guidance are way ahead of us protestants in these matters. They have upheld a consistent life ethic and stand as an example to us. Yet our lack of faithfulness to the Lord in this matter was not always so. An early view to the protestant understanding of respect for life is found in Calvin’s commentary on Genesis 38³, vs 10, in his reflections on Onan, Judah’s son who spilled his seed on the ground:

10. And the thing which he did displeased the LORD. Less neatly the Jews speak about this matter. I will contend myself with briefly mentioning this, as far as the sense of shame allows to discuss it. It is a horrible thing to pour out seed besides the intercourse of man and woman. Deliberately avoiding the intercourse, so that the seed drops on the ground, is double horrible. For this means that one quenches the hope of his family, and kills the son, which could be expected, before he is born. This wickedness is now as severely as is possible condemned by the Spirit, through Moses, that Onan, as it were, through a violent and untimely birth, tore away the seed of his brother out the womb, and as cruel as shamefully has thrown on the earth. Moreover he thus has, as much as was in his power, tried to destroy a part of the human race. When a woman in some way drives away the seed out the womb, through aids, then this is rightly seen as an unforgivable crime. Onan was guilty of a similar crime, by defiling the earth with his seed, so that Tamar would not receive a future inheritor.

Luther, too, had a consistent prolife ethic, as told in an excellent, brief summary of how and why protestants went in the opposite direction of Catholics in the 20th century. This article, History of Contraception in the Protestant Church⁴, subtitled, How Protestants Learned to Love the Pill, was written by Dr. Allan Carlson who also published a book in 2011, Godly Seed: American Evangelicals Confront Birth Control, 1873-1973.

Not long after this we see a blog post⁵ in June 2012, by Dr. Albert Mohler, noting “The effective separation of sex from procreation may be one of the most important defining marks of our age—and one of the most ominous…”

Yet, it was in 1968 that Pope Paul VI issued Humanae Vitae⁶, a document that opposes artificial methods of birth control and upholds the values of chastity, self discipline and “seeking true solutions,” appealing to doctors, nurses, Christian couples, scientists, public authorities, and all of society. Dr. Mohler points out that this encyclical overreaches in some aspects, but agrees
with much of it.

Today there are glimmerings among young protestant couples who do not agree with the common wisdom accepted by many churches on contraception. They are building a consistent life ethic in their marriages and homes, and often have large families by design, making them laughing stocks in our culture of convenience.

A website that supports their views and lifestyle is Quiverfull\(^7\), and I also came upon a Pharmacists for Life site\(^8\).

No doubt more searching online would turn up other grassroot protestant and prolife stirrings that may help to upend the movement to enforce an ethic of small families through artificial contraception. That movement is hard at work to export abortifacient products to all nations by way of world cultural agendas and funding, which you can learn more about by searching on the internet.

These things are not easy to discuss at church meetings, yet young couples may welcome help in discerning how to think about Scripture and family. However, a Protestant Conscience must decide what is right based on the Bible at all times, even when the church is silent.

*Parental Joy by Karl (Kirill) Lemoch (1841–1910)*

Kaluga Art Museum; no date; [Public domain], via Wikimedia Commons
References for hyperlinks:

1 Life Issues Institute: Abortifacients
http://www.lifeissues.org/abortifacients/

2 Unplanned Pregnancies 20 Times More Likely on Birth Control Pill than IUD
http://articles.mercola.com/sites/articles/archive/2012/06/21/iud-better-than-birth-control-pill.aspx

3 Calvin’s Commentary on the Bible, Genesis 38
http://www.studylight.org/commentaries/cal/view.cgi?bk=0&ch=38

4 History of Contraception in the Protestant Church

5 Can Christians Use Birth Control?
http://www.albertmohler.com/2012/06/05/can-christians-use-birth-control-4/

6 Encyclical Letter, Humanae Vitae of the Supreme Pontiff Paul VI
http://www.vatican.va/holy_father/paul_vi/encyclicals/documents/hf_p-vi_enc_25071968_humanae-vitae_en.html

7 QuiverFull website
http://www.quiverfull.com/

8 Pharmacists for Life International
http://www.pfli.org/

ORIGINALLY PUBLISHED 03-17-2014
Sometimes birth is enabled by ART—Assisted Reproduction Technology. Many in our society, including many Christians, have sought this type of help. The Protestant Conscience must address ART, for human life from its nano stages to its resurrection is all related.

Since Sistersite.org is a Christian blog, I would like to note that while I find the ARTs troubling, if anyone reading this post is suffering from infertility, my heart is with you. As a single person, I have not experienced this miserable condition, but I have heard those struggling with it express the deepest despair, and in my teens I witnessed an aunt break down in anger, tears and ranting from her distress. She and my uncle adopted two wonderful children in the days when that was easy, and their sorrow turned to joy.

Infertility strikes the most minor chord in a woman or man’s emotions. It is valiant of scientists and physicians to strive to reverse the condition. Yet, there are barriers man should never cross.

I don’t think anyone who is infertile will consider this blog post to be uplifting, but again, it is integral to the discussion of Flesh and Bone and the Protestant Conscience.

On the Resolve.org website, there are good descriptions of the ARTs, with in vitro fertilization (IVF), the most popular, defined as: “…a highly sophisticated, meticulously timed procedure, which involves removing a ripened egg or eggs from the female’s ovary, fertilizing it with semen, incubating the dividing cells in a laboratory dish and then replacing the developing embryo in the uterus at the appropriate time.” Resolve.org also encourages everyone to celebrate National Infertility Awareness Week which begins on Easter, April 20, this year (2014). “Resolve to know more.” What would we do without public relations?

The first IVF baby was Louise Brown, born in England in 1978, however the origin of the science reaches back to the 19th century. It is not hard to learn more about this science by searching on the internet.

In 2012 in the USA, according to the Society for ART, there were 61,740 live births out of 165,172 procedures done (MedicalDaily.com). A 2013 figure reported on CBSnews.com is: “over 5 million babies born through Assisted Reproduction” worldwide. According to the NumberOf.net website, roughly 200,000 IVF babies are born worldwide each year, and a related statistic is noted: “Ideally, 10 to 12 eggs are retrieved from the female candidate during in vitro fertilization or IVF.” Normally one egg is released, or rarely, two or three.
So, why not use IVF?

1. **Bad definition.** IVF may be instigated on a false premise that a woman or couple is infertile because after a year of trying, she has not conceived. Is 12 months an adequate timeframe for the quest to become pregnant? Do not let others define for you what infertility is. That is an arbitrary figure.

2. **Waiting may help.** If testing is done to show that both the man and woman have normal prospects, then perhaps other causes are preventing the conception. What about environment, stress, poor diet, age, or even God's perfect timing? “Wait on the Lord.” (Ps 37:34) If the Lord is withholding this gift, prayer and fasting may help to understand why. Perhaps something is out of order in one's life; something not one's fault, or maybe it is, but whatever it might be, by setting things in order, the child will enter life in the best possible situation. Rushing things might compound a dire circumstance. In other words, the second reason not to rush to IVF is to perfect patience and other deficiencies as one prepares a good home and character.

3. **Health dangers.** Increased risk of ovarian cancer is a prospect due to the stimulation of the ovaries so that multiple eggs are released. Other dangers include ectopic implantation and multiple births which can lead to premature birth dangers or aborting all but one fetus, not good for the mom—or fetuses.

4. **Sin not.** (Ps 4:4) The IVF process requires the man to perform an act we might expect from an early teen, but never by a man in a Christian marriage. By requiring this, you may open a door for him that provokes self condemnation and other sinful forays. (Also, see John Calvin’s comment on Gen. 38 in the previous post.)

5. **Revolution and mayhem.** Removing the conception process from marital love making introduces a gamut of previously pandora-boxed evils. A good explanation is given by Dr. Bernard Nathanson about whom we read in the fourth post of this series. He tells about a child who had eight parents thanks to IVF.

The problem in assisted reproductive technology, is that it is turning upside down all of our relationships to each other. For example, there is egg donation and sperm donation then surrogate mothers and embryo transplants and frozen embryos. The absurdity of this comes up in a case in California in which a trial judge had an eight-year-old girl appear before him. A couple who wanted a baby (the woman could not carry a child and the man had weak sperm) commissioned the assisted reproductive technologist to mix somebody else’s sperm, the sperm donor, with somebody else’s egg. They paid for it. They created an embryo, the embryo was put in the womb of a surrogate mother and she delivered the baby nine months later. Then the question arose as to who were the parents and just about the time the question arose the original couple who paid for all this filed for divorce. So the question became was the original couple the
parents of this child or was the sperm donor and his wife the parent or the egg
donor and her husband the parent or the surrogate mother and her husband the
parent? The judge concluded there were eight parents literally, biologically but
the child had no parents and was placed in a foster home. I mean the permuta-
tions and combinations of this kind of technology are staggering. - Dr. Bernard
Nathanson

We also know that there are instances where children in the same classroom have the
same father, but they do not realize it. We know what could occur if they should marry a half-
sister or brother. Could that be one reason why the Resolve.org website has a page for “Finding
the right reproductive attorney”? Also, IVF is used by single women or anyone wishing to have
their own child.

6. Bad influence. If we agree to or support the practice of IVF we may encourage young
people who are seeking medical careers to pursue specializations that are ungodly. It’s the role of
older adults to guide youth who may not have had the time to think through the consequences
of their pursuits. Christians must speak out to warn about dangerous trends in society. We are
salt and light (Mat 5:13, 14), watchmen on the wall (Ez 3:17).

7. Destruction of life. The definition of life was made clear in the previous post. In IVF,
many fertilized ovum are discarded and many successful conceptions are frozen. At times, em-
byros are implanted in a womb, and then a twin or a number of siblings are aborted.

8. Unethical experimentation. We cannot know whether IVF will irreparably damage
the child-to-be. Though the procedure has been done successfully for over 35 years, we are only
now finding that IVF is linked to increased risk for birth defects as well as birth problems. Though it may be argued that normal activities for conceiving children can result in stillbirths or
genetic abnormalities, nevertheless, “willingness to perform a nontherapeutic experiment carrying potential hazards to the subject on that subject without that subject’s own personal consent” is unethical. (Human Existence, Medicine and Ethics, pp 17-38 topic, William E. May, PhD)

9. Expense. The cost for IVF from start to finish will be as much as or more than
$20,000. If it is less, it will nevertheless be very expensive. This is as much as an adoption of a
newborn through a nonprofit agency or from a foreign country.

10. Let God be God. If somehow, in the time tunnel, or before the foundation of the
world, you were given the choice of being born of a loving union in darkness—or even an unlov-
ing one—“curiously wrought” (Ps 139:15) by the hand of God, or of being conceived of prime speci-
mens selected by the knowledge and judgment of man, which would you choose? Even though
the works may appear similar, the sovereignty of God is a comfort to ponder and to prefer. Yes,
you may say, but that is only a consideration in an ideal world, and we live in the real world of
difficulties and disappointments where ART is a comfort. But is our own comfort a Christian
reason for bringing children into the world?
References for hyperlinks:

1 Adherents website National and World Religious Statistics
http://www.adherents.com/people/pn/Bernard_Nathanson.html

2 In vitro fertilization linked to increase risk for birth defects, research suggests
http://www.sciencedaily.com/releases/2012/10/121020162613.htm
   Added Jan 2017: https://www.cdc.gov/art/key-findings/birth-defects.html

3 Higher risk of birth problems after assisted conception
http://www.sciencedaily.com/releases/2014/01/140109003800.htm

ORIGINALY PUBLISHED 03-24-2014
Infanticide could take months, even years to explore, ranging from the science of amniocentesis to the cost-benefit approach in evaluating whether a newborn with a specific deficiency should be “signed over to the hospital” and left to starve.¹

I would need to touch on the legal ramifications that complicate the physician’s natural instincts to save lives no matter what the handicap, and the physician’s legal duty to thoroughly inform parents at every stage, which can weaken the parents’ natural instincts.

A thorough discussion of infanticide ought to include the huge numbers of infant girls killed each year in India and China, called gendercide. Though no statistics are kept, estimates of hundreds of thousands are no doubt low. And the U.S. statistics are, according to www.infanticide.org, for infants under the age of one year, a homicide rate of 11th in the world. This would represent a separate issue from the infant born needing medical treatment. Infanticide is a complex topic with deep history and an extensive future.

Infanticidio (Infanticide) by Antonio García Vega

Source/Photographer, Antonio Garcia Vega; [CC-BY-SA-3.0 (http://creativecommons.org/licenses/by-sa/3.0)], via Wikimedia Commons.
My goal is to provoke thinking about Flesh and Bone and the Protestant Conscience, so a good place to begin is with Bible passages relating to infanticide.

Israel was warned early never to do it, as the nations driven out of the promised land had done. (see Deut. 12:29-31) But when that command became fuzzy in their thinking, they imitated the heathen in this practice. For this, they were expelled from their land, judged and decimated.

About their vile disobedience, the Lord said through Jeremiah, They have built also the high places of Baal, to burn their sons with fire for burnt offerings unto Baal, which I commanded not, nor spake it, neither came it into my mind: Therefore, behold, the days come, saith the LORD, that this place shall no more be called Tophet, nor The valley of the son of Hinnom, but The valley of slaughter. (Jer 19:5, 6)

They murdered their own children, and in turn were slaughtered by evil nations.

Another infanticide passage, also from Jeremiah, is: Thus saith the LORD; A voice was heard in Ramah, lamentation, and bitter weeping; Rachel weeping for her children refused to be comforted for her children, because they were not. (Jer 31:15) This is echoed in Matthew in reference to Herod’s slaughter of all the children two years old and younger in Bethlehem, to assure the death of the baby Jesus. (Mat 2:18)

We need to pray for God to enliven our Protestant Conscience to obey his command, Speak out for the one who cannot speak, for the rights of those who are doomed. (Prov 31:8) The IN-FANT, not the parent, is the one who cannot speak.

And for the parents of abnormal children, it’s good to know that the Lord holds the tears of his saints in a bottle (Psalm 56:8); their tears are remembered.

In 1982, Infanticide and the Handicapped Newborn was published, a collection of excellent articles on aspects of the practice and related ethical reflections. One essay by C. Everett Koop shared a personal story that should cause all of us to fear the Affordable Care mandate now facing us. Dr. Koop was a reformed Presbyterian (Presbyterian Church in America) and President Reagan’s Surgeon General. With Francis Schaefer, he helped to tell the world about the dangers of the slippery slope. On his tour through England to show the Whatever Happened to the Human Race? films with a prolife Englishman, Professor Zachary, Dr. Koop recalled:

A woman rose to ask a question: “I am a general practitioner in the National Health Service. Three years ago a daughter was born to us who had spina bifida and I was told that she would die within three weeks. When a nurse told me that our daughter was being starved to death, I signed her out of the hospital against advice. She is now a bright, adorable three-year old girl who is the light of our lives. However, she has an incontinent bladder and orthopedic deformi-
ties which keep her from walking. But because I signed her out of the hospital against advice and because she was initially classified as nontreatable, there is no way that I can obtain any urologic or orthopedic help for my child. At my own expense I am keeping her on urinary antibiotics in order to protect her kidneys. What can I do?”

Professor Zachary told her that the only recourse in England was to seek private care. I told her that if she could get the child to Philadelphia we would eventually send her home walking in calipers, her urine controlled with an ileal bladder—and she might even be the second lady prime minister of Great Britain some day. - C. Everett Koop (Ethical and Surgical Considerations, in Infanticide and the Handicapped Newborn, p. 99)

Dr. Koop pioneered many surgical techniques to remedy birth defects and performed many thousands of pediatric surgeries. It was his influence that helped to pass the Baby Doe Act in 1984 to keep handicapped infants from being denied treatment.

Notwithstanding Baby Doe, in the U.S. we have seen a shift from a “sanctity of life” to “quality of life” ethic. No matter what fingers we put in the dike, abortion on demand makes it too easy to view the newborn as chattel. Infanticide is practiced in the Western world. With Death Panels* in the wings, the apocalypse will rush ahead.

Man was charged by God to exercise capital punishment on any murderer (Gen 9:6) yet somehow we have rebelled to kill the innocent and preserve the lives of murderers.

We say man is made in God’s image and thus deserves utmost respect and honor, but an imperfect specimen may not be viewed in that vein. Yet perhaps in our view of them, God is able to see our hearts.

The Bible says, God is a Spirit. (John 4:24) He became a man (John 1:14). His being is far more complex than we are able to perceive. God is not offended to have reflected in his image the smiles, tears and entirety of the disabled and handicapped.

Who hath made man’s mouth? or who maketh the dumb, or deaf, or the seeing, or the blind? have not I the LORD? (Ex 4:11) As we look upon the flawed newborn, the TREATMENT option is the best choice unless an extreme condition prevents it. There is no dilemma or problem that resides outside of prayer’s reach and effect.

Dr. Koop concentrates the issue:

We are constantly bombarded by propaganda concerning the cost of the handicapped to society. I submit that the costs imposed by all the physically and mentally handicapped are a drop in the bucket compared to the costs imposed by the morally handicapped… These are the people who perpetrate crimes, for
whom we are asked to provide every conceivable rehabilitation program…Why then do we demand perfection for those who have physical and mental handicaps but go to great lengths to protect and tolerate gross imperfection from the much larger number who are morally handicapped? (paraphrased, ibid, p. 104)

References for hyperlinks:

1 Doctor Insists Parents of Baby With Cleft Lip Starve Him to Death

2 L’Abri Fellowship website
   http://www.labri.org/

3 C. Everett Koop profile

4 Baby Doe Law
   http://en.wikipedia.org/wiki/Baby_Doe_Amendment

ORIGINALLY PUBLISHED 03-31-2014

*The Independent Payment Advisory Board of the Affordable Care Act
[2017 update: This Act is now under scrutiny and replacement by the Trump Administration.]
RIDDLE

Q: Two people stood on a precipice from which they could see the future. One saw a rose-colored sunrise with golden rays that beckoned him to step out and shine. The other saw terrifying black clouds and a cavernous gorge where many were descending despite its putrid odors. He stepped back. What was the name of the precipice and who were the two men?

A: The precipice was the embryonic stem cell ledge of the universe. The person who saw a bright future was a mad scientist and the other was the prolife individual who has grasped that life starts at conception. The scientist was mad because his embryonic stem cell research is opposed by prolife advocates.

In all history, we are the only ones who have stood on this precipice. Though Daniel was apprised that knowledge would increase (Dan 12:4) he could never have foreseen that scientists would someday harvest tiny embryonic stem (ES) cells for biomedical inventions.

To be factual, society went over this precipice in the 20th century as ES cell research was performed to develop the first ES cell lines. Since that time a lot of litigation and experimentation have gone on. You can keep up with the score—mad scientists vs. prolifers—on the Bioethics.com website.

Searching the Bible for EXACTLY when new life begins has been a topic of much exploration for Christian bioethicists and laypeople. Most will agree that human life is created at conception. Possibly, there is an aspect of the soul that has no beginning nor end. (Eph 1:4) After conception, the new life continuously develops through many stages, until death.

Dr. David Vandrunen concludes in his book, Bioethics and the Christian Life,

Given what we now know about fertilization and the development of young human life through pregnancy, the evidence drives us to the conclusion that respect for image-bearing human life should extend all the way back to fertilization. The implications of this conviction have become profound in our own day. Christians can maintain such a view only by resisting great pressure from the world and sometimes even from their own sinful temptations in the face of suffering. (Crossway Books, 2009, p. 168)

Some of the great pressure derives from the urgent, intense demands of those who want
ES cell research to be fully accepted and legal.

This topic is complex to blog about because such research became partially legal during the Bush presidency, while other efforts were restricted. Some stem cell lines were created prior to legislative efforts to stop such experimentation. (Stem cell lines are cultures of stem cells that can be divided for more to be grown. An infinite number of stem cells can be the result of one culture.) In any case, President Obama signed an Executive Order on March 9, 2009, lifting restrictions on stem cell research, and issued a Presidential Memorandum ensuring that “sound science” be protected from politics. However, states may weigh in on these issues.

Human ES cells are “pluripotent,” that is, they are able to differentiate into many types of cells, yet being so “young” they are also unstable, and many scientists are striving to direct scientific research and therapies toward non-ES cells, also termed “Adult” stem cells. Non-ES cells can be derived from adults, children, infants, placentas, umbilical cords, and cadavers.

Though unethical practices are found in non-ES cell harvesting, ethical research can be done. In fact many exciting discoveries and therapies are resulting from non-ES stem cell research such as bone marrow transplants. The “StemCellFactsNow” YouTube channel brings some of these success stories to light.

All that glitters isn’t gold. For example, a 2003 article in Science News reported: “An unusual study of the brains of women and girls who had received transplants of bone marrow from men indicates that marrow cells can transform into nerve cells. Researchers found that each female brain had nerve cells containing a Y chromosome, presumably derived from the transplanted bone marrow.” Is that a good thing? Females normally do not have a Y chromosome.

Did you know that ES cells are found in children's vaccines? That ES cells were used by Pepsi to develop flavor enhancers? The company backed off of its product improvement following a boycott by prolifers. Many uses of ES cells are never made known. Therapeutic cloning is legal now.

The further we go, the further we go.

In February 2014, a news story appeared on the internet, Dad May Join Two Moms for Disease-Free Designer Babies. The seventh post of this series (Chapter Seven) will help you to understand IVF. [Update 2017: The “three-parent baby” is now approved in the UK. ref]

The purpose of the experiment would be to create babies from the DNA of three people, with the goal of preventing mothers from passing on debilitating genetic diseases to their children. A baby or “chimera” so conceived would be genetically modified, an organism with DNA from different sources.

In a retracted article on www.myfoxny.com, FDA weighs risks of 3-person embryo fertilization, a professor stated, “We constantly live on slippery slopes and it’s our job as moral humans to hold a good position on the slope. If you’re worried about genetically engineered mon-
sters or superheroes then you try to stop that, you don’t try to stop medically useful interventions because you’re worried that 17 steps down the line it will turn into something we don’t like.”

On the other hand, maybe when you find yourself on the slippery slope, your goal should be to climb to the top and help to hold the moral high ground, not to keep your toe or foothold on the slime.

References for hyperlinks:

1 YouTube Channel- StemCellFactsNow
https://www.youtube.com/user/StemCellFactsNow

2 Dad May Join Two Moms for Disease-Free Designer Babies
http://preview.tinyurl.com/mxxox9l

Added June 2017 (How long before we go from IVF to IVG?)
Creating babies from skin cells – what is in-vitro gametogenesis and what are the risks?
http://www.ibtimes.co.uk/creating-babies-skin-cells-what-vitro-gametogenesis-what-are-risks-1600491

ORIGINALLY PUBLISHED 04-07-2014

Added Winter 2019
A discussion of Induced Pluripotent Stem Cells which are similar to ESCs but are not from embryos can be found on the SistersSite.org in the ABCs of Biotech blog series,
http://sisterssite.org/biotech/post/ipcs-the-fountain-of-youth

At the time the Flesh & Bone series was posted, the IPSCs were not much in the news.
DNA and the Protestant Conscience

It can be argued that the Protestant Conscience has been groggy and tenuous for the past hundred years or more. But the conscience of the Bible-believing Protestant has been exactly right in one critical issue: Creation. Most Protestants and Catholics are theistic evolutionists.

Who else but the Biblical Christian Believer can offer clear answers in the biotech controversies now threatening the world and the human genome? Creationists can lead the way in defining what is ethical and moral and what is not in the GMO malaise. And it is not enough simply to subscribe to Intelligent Design; more arguments are needed to safeguard humanity. After all, who knows whether the “intelligent designer” voiced his or her opinion on maintaining the created kinds? But our God called his created kinds GOOD. (Genesis 1)

Let’s look at some of the activities in the biotech world today.

Since the mapping of the human genome that was completed in April 2003 along with other biotech research, our government and venture capitalists have funded projects for scientists to discover methods, improvements and cures never before possible, some which alter the genetic makeup of living organisms.

Though the capacity to fundamentally change the genetic makeup of a species was demonstrated about 40 years ago, a moratorium on “rDNA” or the recombinant DNA that results from merging DNA from two organisms was in force for a time.

Here is a web page that lists rDNA outcomes foreseen at the turn of this century. By now some of these potentials have been realized. From the wonderful, such as discovering cures for diseases, to the terrifying, such as the unintended consequences of GMO crops, to the frivolous, such as finding out your DNA story, we are certainly not in Kansas anymore, whether we are discussing DNA or rDNA.

What should Christians think about these things? For the simple uses of DNA, such as proving paternity or uncovering one’s heritage, what objection could there be? To heal diseases or develop other reparative therapies using ethical methods, we are in favor. But any work to mingle the “kinds” created by the Lord should be off limits. Any work to enhance or improve the species should be questioned. Eugenics is ever pushing and prodding to be in control.

For the evolutionist, progress by way of research and experimentation that merges types is fundamental. After all, to many evolutionists, that was God’s mode of creating. He started with an amoeba and over millions of years continued combining traits of kinds and such until he
figured out how to make a man.

*Homme-lièvre (Man-hare) by Jean-Baptiste Coriolan*

The creationist knows that macroevolution, that is, one kind evolving into another, is impossible. Microevolution, or adaptation to one’s environment, is fundamental, and hybridization is possible.

The creationist knows that God’s boundaries are strict (Gen 6:2) and to be respected. God created a perfect world and saw that it was very good (Gen 1:31). When we consider that all things were made through Jesus Christ, and without him was not anything made that was made (John 1:3), and that he is perfect (Eph 4:13) and all-powerful (Mat 28:18), why would we attempt to improve or to enhance his creation? To build a “superman” is a quest of Nazis.

The cry goes out from the technocracy, “The most good for the largest number of people!” But Christ’s teaching is: “As you did it to one of the least of these my brothers, you did it to me.” (Mat 25:40)

In the context of the controversy, the evolutionist and biotechnologist may not respect boundaries but feel free to experiment by mingling kinds or inventing new ones so that the
greatest good may accrue to the most numbers. If some people are sacrificed or if the entire human genome becomes a superhuman entity, as long as this leads to more progress from the perspective of the world, then fine.

For the Christian, if even one human is sacrificed in experimentation or if kinds are spoiled, the Lord is injured as well. The Christian ethic is to uphold the created kinds and to care about the individual. Our God is a personal guide and friend even though the omnipotent Creator.

The Christian has rest in God’s Word. We are not awed by scientific advance that is not glorifying to God. Cats were not made\textsuperscript{8} to be jellyfish. If a human has “trisomy” from a birth defect, we do not judge, but we oppose the research of the Department of Defense to invent a man with 47 chromosomes\textsuperscript{9}.

God’s plan for us is resurrection to eternal life, not perfection through eugenics. \textit{For if we do not rise, then Christ was not raised from death, but now is Christ risen from the dead… For since by man came death, by man came also the resurrection of the dead…} (1 Cor 15:16–22) Death resulted in deterioration, mutations and imperfections, but resurrection will bring restoration to a perfect world —glorified bodies to a glorious new Earth.

\textit{A Happy Easter to all!}

References for hyperlinks:

1 Catholic Church and evolution
http://en.wikipedia.org/wiki/Catholic_Church_and_evolution

2 All About The Human Genome Project (HGP)
http://www.genome.gov/10001772

3 Asilomar and Recombinant DNA

4 Impact of Recombinant DNA
http://tinyurl.com/m4gnnsm

5 DNA Sequencing Lays Foundation for Personalized Cancer Treatment
http://tinyurl.com/mqnne4q

6 Genetically Modified Organisms (GMOs): Transgenic Crops and Recombinant DNA Technology
http://tinyurl.com/kd9ho8f
7 Family history is in our DNA. What’s in yours?
http://dna.ancestry.com/
http://tinyurl.com/n54qub7

8 12 bizarre examples of genetic engineering
http://www.mnn.com/green-tech/research-innovations/photos/12-bizarre-examples-of-genetic-engineering/
glow-in-the-dark
http://tinyurl.com/d4gd59b

9 DARPA to Genetically Engineer Humans by Adding a 47th Chromosome
http://tinyurl.com/mvn9sj4

ORIGINALLY PUBLISHED 04-14-2014
Kidney stew, chopped liver, lobe of lung -- pancreas attack!

“The immediate as well as the—insufficiently known—long term risks of a unilateral nephrectomy (live kidney donation) in a perfectly healthy person cannot be called minimal or negligible.” - ref¹

I enjoy seeing the website slideshows with all the smiling faces of those who have received organs from living donors and reading the success stories. But I wonder, how many of the recipients went to the trouble to research the risks for the donors before they happily accepted their kidney or other organ?

Why is it that searching on the internet for RISKS to LIVING DONORS only brings up a few sites, while many, many sites with substantial financial backing are easily found when seeking information about ORGAN DONATION?

“You only need one kidney” is strewn across the internet and quack-quacked by those seeking to get a kidney from an unsuspecting subject.

I wonder if people who are in favor of such altruism would agree that caring people won’t mind donating a nipple or eye? For some reason, when body parts— or preborn babies for that matter— are hidden, it’s very easy to discount them as though they are not needed or important.

It’s true that some are born with only one kidney and some lose one from injury, and they may live healthy lives. It’s true that many organ transplant surgeries go well for donor and recipient alike. And it’s doubly true that invading a human body to collect organs is commonly perceived to be a sound ethical and moral decision on the part of the donor. The odds are in the donor’s favor, but then again, life is not a horse race.

Where is the cold eye of logic when a person needs to be counseled about whether donating an organ is appropriate? The common wisdom is: “The primary ethical dilemmas² surrounding organ transplantation arise from the shortage of available organs. Not everyone who needs an organ transplant gets one and in fact, the scales tip quite heavily in the opposite direction.” (quoted on various websites across the internet) Would you agree that this is the primary ethical dilemma?

It is also illogically accepted as fact that the donor’s consent makes organ transplantation an ethical practice. Should “my consent” be the ruling ethic in sharing body parts?
Since this blog series is about Flesh and Bone and the Protestant Conscience, let’s drill down to the moral level of the argument. How should a Bible-believing Christian think about organ donation? What does the Bible say?

A few references to missing body parts or those received by others come to mind: 1. If your hand or your foot causes you to stumble, cut it off and throw it away ... Matthew 18:8, 9; 2. When he reached home, he took a knife and cut up his concubine, limb by limb, into twelve parts and sent them into all the areas of Israel... Judges 19:29, 30. These have no bearing on this topic. Perhaps the best way to approach it is to consider that we are fearfully and wonderfully made as stated in Ps 139:14.

We should question those who make statements like, “You don't need that appendix. It's just a vestige of evolutionary development.” Did you know that Duke University PhDs discovered its use³? They found that “following a severe bout of cholera or dysentery, which can purge the gut of bacteria essential for digestion, the appendix acts as a reserve for good bacteria to emerge.”

Similarly, there may be a need for two kidneys in times of stress. “Under normal conditions, healthy kidneys do not work at their maximum capacity; there is a certain reserve that can be activated in times of stress.” (Jewish Virtual Library⁴)

The many safety catches God designed prevent us from dying early if our health is seriously compromised in an unusual circumstance. Don’t believe the silly blurbs⁵ that say we no longer need tonsils or coccyx. You can also find web pages that explain that we do need all the normal body parts that we have even though we can live without some that become diseased.

But isn’t it OK to give away a gift we have received from God? Is it not brave and honorable to share life, such as through donating a kidney?

Will you still feel it was right if unforeseen consequences result?

Nearly a year and a half ago, Jeff Moyer donated a kidney⁶. It’s something he says changed his life forever. “Transplant surgery is a miracle,” marvels Moyer. “I mean, to think that my kidney saved someone else’s life⁷— that’s staggeringly wonderful.” His reaction is surprising given all he’s been through. Like most surgical patients, when Moyer awoke, he was in a lot of pain. He was reassured that the post-surgical pain was normal and he’d be back on his feet again in a couple of weeks. But weeks, then months went by. His scars faded, and the pain didn’t⁸. (NPR.org)

If you were Jeff, would you question your decision? Would you wonder, Why didn't the Church help me make a good decision⁹? Why was I not better informed of the RISKS?

We are now on a path to Default to Donation¹⁰. That means: If people do not make known their preference about becoming an organ donor, they will be presumed to be a donor by the industry. This of course pertains to those who are brain dead (see posts 3 and 4 in this series),
yet it defines as well the mindset of those hard at work to GET MORE ORGANS! Haven't you heard of the DOT— it's not the Department of Transportation anymore. It's the Department of Transplantation!!

What, then, some may ask, is the difference between “giving my body to be burned” (1 Cor 13:3) and giving my body to be used in helping another to live?

Here are some differences:

**Christian martyrdom** VS **Organ donation**

1) **Not in path of danger by choice but by persecution** VS **Put oneself in path of danger**
2) **Result is physical death** VS **Result is usually life extension for the recipient, but could be death for donor or recipient**
3) **Proves faith and love** VS **Proves love for family member or fellow human who is the organ recipient but family of donor may become his/her caregiver and experience serious financial distress**
4) **Purpose is to maintain a Christian witness, help others** (Dan 3:16-18; Mat 10:22, 33; Rev 3:21) VS **We may question whether this act shows a positive Christian witness in light of the points made in this list**
5) **May affect the lives of family members; must trust God will take care of them** VS **Same could be said, but Scriptural mandate is to stand firm in persecution, not in organ sharing**
6) **Encourages others to stand firm in Faith and not be afraid** VS **Encourages others to be donors, but if they donate, a harmful outcome may occur**
7) **Obedience to God’s Word** VS **The Christian has not balanced the wisdom of Ps. 139 against the act of donating**
8) **“The blood of the martyrs is the seed of the Church.”** VS **Furthers the agenda of organ donation enthusiasts**
9) **The Christian martyr knows he has eternal life.** VS **What do we know of the potential donor’s spiritual life? If a Christian, how will the Lord view his/her sacrifice?**
10) **Could protect innocent people** VS **Innocent victims are preyed upon or sold for their organs**

If you have donated an organ with true Christian love in your heart, ignorant of potential repercussions, your motives were right (1 Cor 13:1-3). And if anyone gives their body to be burned without love for God or people, that sacrifice is not good from the Lord’s point of view.

As Christians, we should question any movement that has such tremendous support of world opinion.

References for hyperlinks:

1 Living Donor 101- reference for Myth 1: Journal of Medical Ethics 2001;27:162–164
http://www.livingdonor101.com/myths.shtml
2 Ethics of Organ Transplantation

3 Biofilms in the large bowel suggest an apparent function of the human vermiform appendix.
http://preview.tinyurl.com/kd3egpf

4 Unilateral Nephrectomy: The Adverse Effects of Live Kidney Donation

5 10 Body Parts You Could Do Without
http://mentalfloss.com/article/51459/10-body-parts-you-could-do-without

6 From Fear To Elation: Prepping To Be An Organ Donor

7 Giving A Kidney, Gaining A Lifelong Friend

8 Organ Donation Has Consequences Some Donors Aren't Prepared For
http://tinyurl.com/7mpt6bq
http://www.npr.org/blogs/health/2012/07/02/155979681/organ-donation-has-consequences-some-donors-arent-prepared-for

9 Churches asked to become blood and organ ‘donor churches’
http://tinyurl.com/lfs1tl3
http://www.christiantoday.com/article/churches.asked.to.become.blood.and.organ.donor.churches/35273.htm

10 Organ Transplantation - Framing the Issue
http://www.thehastingscenter.org/Publications/BriefingBook/Detail.aspx?id=2198

11 NKF (Natl. Kidney Foundation) Supports Increased Funding for U.S. Transplantation Programs
http://tinyurl.com/od5e8ax
http://nkfadvocacy.wordpress.com/2014/04/17/nkf-supports-increased-funding-for-u-s-transplantation-programs/

12 Girl smuggled into Britain to have her ‘organs harvested’
http://tinyurl.com/n7k7zqv
http://www.telegraph.co.uk/news/uknews/crime/10390183/Girl-smuggled-into-Britain-to-have-her-organs-harvested.html

ORIGINALLY PUBLISHED 04-21-2014
Would you let your conscience be your guide?

Is my mind in tune with the mind of Christ? A Christian must carefully consider this question.

It’s harder to do with respect to advanced biomedical projects and procedures that require some understanding of scientific facts, and not simply a knowledge of Scripture. But even non-technical issues can be hard to address today: How should a Christian think about euthanasia by starvation when doctors and the state attorney general all agree it is time to withhold feeding from a brain injured patient?

Some things are family matters, but someday it may be our family.

We cannot judge the practice of in vitro fertilization without understanding how it is done. If we are asked whether we will sign our driver’s license to be an organ donor, we will not know what to do based only on our knowledge of the Golden Rule. We need to understand what the procedures ARE.

Then, there are more simple questions like whether it is right to allow the skin and bone from your recently deceased family member to be harvested for medical or cosmetic use. Where in Scripture is there guidance on this? Does it matter? Does God care? This is where we are heading in this blog series.

Christians are not expected to think the same on every issue. There will be disagreements due to varying interpretations of Scripture, the amount of time a person has studied an issue, or the level of spiritual enlightenment of the individual based on age, home background, church affiliation, and other influences.

There can be unity of spirit among Christians despite differences in doctrine, to some extent. However, on large issues, consensus is right. The Bible encourages debate to make clear in an argument which view is correct (1 Cor 11:18, 19). But what if no consensus can be reached? This may reveal a deeper problem, namely that the individual conscience is not in tune with the mind of Christ.

What would be the cause or causes of this dilemma, apart from a lack of knowledge on the specific issue? Confusion may dominate following debate. Not enough prayer, fasting and waiting to hear from the Lord may result in immature judgments.

A Christian must be guided into all truth by the Holy Spirit. At times, we must pray for MORE of the Holy Spirit. We need a deeper walk with Christ. It’s essential to put away all
known sin and to ASK for a greater portion of the Holy Spirit. (Luke 11:12, 13) Yes, even if we have been Christians for many years, there are times of refreshing and these are to be sought: Seek and you will find.

What can harm or cloud the conscience?

Self interest, ambition, or any of the works of the flesh listed in Galatians 5 (Gal 5:19-21); things like mistreatment by others, neglect by those who ought to care, or any circumstance that results in severe discouragement so that one cannot think clearly, are some of these culprits. Desire to be like others, love of the world, overwork, busyness; drugs, alcohol, bad company; continuing sin, fear, childishness, pride, permissive or indulgent attitudes—any of these could impair the conscience, generally and with respect to the sanctity of life issues. Or, seeking answers from experts or friends, in some instances, rather than in the Bible could lead to wrong conclusions.

We must pray to know: Is my mind in tune with the mind of Christ? For if we would judge ourselves, we should not be judged. (1 Cor 11:31) And then, in a while, have confidence. The person who sincerely desires and studies to know God’s mind and be obedient will always receive the help needed to make good decisions and the strength needed to carry out duties.

It is good to find professionals who can guide our thinking. I have learned from Dr. Theresa Deisher, PhD, a scientist seeking to do ETHICAL biomedical research. A revealing video, *The Commoditization of Human Beings*¹, features her insights and suggestions on how to think about biomedical issues, both for laypeople and her colleagues. She presents some criteria that can guide medical research and practice:

Does it take the life of a human? Will what I plan to do exploit another human? Will it hurt someone with a disease or in poverty? …Is what I want to do good for the patient? Will it do harm? …We need to get back to first ethical pillar: Do no harm.

…Is this affordable and available to all? …Embryonic stem cell research so promoted by one political party costs hundreds of thousands of dollars. In contrast, adult stem cell therapies are $25,000 or less. We need to prefer the treatments that are just as good and economically advantageous…It is time for scientists, for the media and for politicians to provide some truthful dissemination of stem cell uses and progress.

…All scientists need to think; cloning is on the doorstep. Are we promoting things that will facilitate that? Is exploiting humans beings for commercial products really progressive?

Let’s be Christians who are on the cutting edge of a good conscience!
Reference for hyperlink:

2 The Commoditization of Human Beings
https://www.youtube.com/watch?v=4Ia1T5thh5w

ORIGINALLY PUBLISHED 04-28-2014

La Conscience (d’après Victor Hugo) by François Chiffart

(Artist lived 1825-1901). This image is in the public domain because its copyright has expired.
Evil is aggressive, insatiable for expansion, thrives on confusion, and always seeks to dominate.

This may seem like an overblown way to begin a post on Assisted Suicide (AS), but maybe not.

A good illustration of how evil succeeds is found in Joshua and Judges, where we witness the people of God slide from the victory over Jericho to the decimation of their youngest tribe after the gang rape of a Levite’s concubine by Benjamites who wanted to sodomize the Levite, of the tribe devoted to God’s service. His concubine was offered by her father in his stead. (Jdg 19:23, 24) Evil won in less than four centuries.

Another example is the demise of the American healthcare system in under three centuries. What began as unselfish missions, many named for apostles and saints, has devolved to “nonprofits” or businesses (–most with excessive advertising boasts and budgets) which are essentially ruled by insurers and government mandates unless the Trump administration can make positive changes and soon. Evil demands control.

How did the Netherlands, the safe haven for Protestant Reformation refugees in the 16th century, become the leading edge for euthanasia in Europe? From the sublime to the ridiculous, how surely turn the masses to willful death.

The heart is deceitful above all things, and desperately wicked: who can know it? (Jer 17:9) This truth would be unbearable if not for the Cross that lifts us to New Life. Still, we must acknowledge our true nature and that our best endeavors are on a track to become devices if we will not consider others better than ourselves (Phil 2:3) and seek first God’s kingdom and righteousness (Mat 6:33). The biblical “device” is the thought or plan of evil counsel (2 Cor 2:11).

Take the term compassionate, a good quality. We often use it to describe the sort of care patients in hospitals or nursing homes ought to receive. Then, someone devises the idea that people who lie in bed all day and need help for daily necessities are better off dead. It would be compassionate to assist them to die.

We put a severely suffering animal to death; why not a person? What’s wrong with us? Why make people suffer? Help them out! Their care is a burden to others, emotionally and financially. Have compassion—assist them to die!

When we see societal movements that strike relentlessly against well-thought-out boundaries and protections, we are seeing evil personified.
After its founding in 1938, the Euthanasia Society of America grew to form an educational council and in 1967 introduced the Living Will. Now, one cannot step foot into a hospital before being hounded, “Do you have a Living Will?”

In 1980 the Hemlock Society was begun, headquartered in Oregon, to popularize “Death on Demand” and by 1994, AS was voted in by Oregon citizens. Today, patients desiring treatment under the Oregon Health Plan may be offered assisted suicide instead, to save costs (ref1). Evil is quick to expand.

The same year that AS was legalized in Oregon, the Death with Dignity National Center was established in Washington, DC, to push the notion and practice to all the states. AS is legal in Washington, Montana and Vermont, and its promoters have other states, and ultimately, all states, in their sites.*

Worldwide, its promoters are continually “taking aim” as are their critics. Dr. Dick Sobsey, University of Alberta, Canada, lists many reasons to oppose AS. One of his dozen Problems with Assisted Suicide2 is:

Our belief that we should prevent most suicides while encouraging and assisting suicide for some individuals represents our own biased views of illness and disability. For example, an individual convicted of the murder of a child may face life in prison and social disgrace. Such an individual faces a poor quality of life and may express the wish to commit suicide. Yet society does not endorse suicide for convicted criminals and takes an active role in preventing suicides in prison. Suicidal prisoners are often deprived of belts and even shoelaces to prevent hanging. Why should we label the suicide of such a prisoner as irrational and try to prevent it while we label the suicide of an individual with illness or disability as rational and offer assistance to carry it out?

Evil thrives on confusion.

The Gallup Poll reports3 that 54% of medical providers support Euthanasia and 86% of the public does, for the terminally ill or for those on life support. However, nearly every medical and nursing organization in the US considers physician-assisted suicide to be wrong. Statistics can be a device for shaping public sentiment.

Of course, statistics can also assist in making things plain. For example, on the Dignitas website (as of 5-5-14), the opening statement denies what the tabloids in the UK publish about their AS clinic. The supposed erroneous tabloid4 reported that Dignitas assisted six Swiss clients to die in 1998, and by 2009 had helped more than 1000 from about 30 countries-- which Dignitas also reported on its own website. Denial and lying are devices for opinion management.

In the literature that exposes the AS movement, we become aware that suicide is an aggressive thought in the mind of an individual. A depressed person can find it hard to push the
thought away, once admitted. It grows and seeks to confuse and to dominate.

How many realize that their lives are overrun by evil not merely because they are contending with their own human nature, but because of the interference of spirits whose mission is to defeat them and to hasten their death? How many read with understanding Bible passages such as …be turned and rebuked them, and said, “Ye know not what manner of spirit ye are of.” (Luke 9:55)

*Death Has Breathed by Jože Gorjup (1907–1932)*

It’s going to be a fight to the finish. Two websites that oppose each other on the AS battlefront are the Patients Rights Council⁵ and the Final Exit Network⁶. We can learn from these.

Many have given up the fight. Apostasy is prophesied (2 Thess 2:3), iniquity shall abound (Mat 24:12); but it is well worth our time and effort to stand with David against AS. Remember his swift action when the Amalekite boasted that he had helped Saul to die (2 Sam 1:15, 16).

It is also incumbent upon Christians to resist the Devil (James 4:7; Eph 6:13-17).

**References for hyperlinks:**

1 Quick facts about assisted suicide
http://alexschadenberg.blogspot.ca/2013/01/quick-facts-about-assisted-suicide.html
2 Broadreach Counseling and Mediation - 12 Problems With Assisted Suicide
http://www.broadreachtraining.com/advocacy/euth12rsns.htm

3 Euthanasia Statistics
http://www.statisticbrain.com/euthanasia-statistics/

4 Assisted suicide statistics: the numbers Dignitas helps to die, by country
http://preview.tinyurl.com/pl5oxp6

5 Patients Rights Council
http://www.patientsrightscouncil.org/site/

6 Final Exit Network
http://www.finalexitnetwork.org/

ORIGINALLY PUBLISHED 05-05-2014

* Update Jan 2017: More states have passed Assisted Suicide legislation
https://en.wikipedia.org/wiki/Assisted_suicide_in_the_United_States
Between light and darkness are twilight and its darkest moment, dusk. Blind spots mar our vision and distant objects blur against the horizon. A disadvantage has been imposed; we feel a loss of control.

When families and societies move from the light of a Christian worldview toward the pitch black of existentialism or any anchorless perspective, it is dusk. Things that once were crimes are blurred with legal acts. The Church and Courts are at odds on what is punishable; the momentum of change is dizzying. At nightfall any church may become one of the distant, undefined objects.

Thankfully, though darkness always descends (ascends?), metaphors are not binding upon our lives. Anyone can run back to the light— the light of the world, Jesus Christ (John 9:5). Otherwise, shades of gray encircle us like whirlwinds on a sea of doubts; we soon will believe anything, even such nonsense as the euthanasia activists promote.

Euthanasia is a good example of an issue that seeks cover of cultural darkness, taking varying forms to spread its influence. Like assisted suicide it may entail a person's consent, but involuntary euthanasia is an act or an omission that ends a life, often in a hospital setting.

It is not euthanasia when a person or family decides against a therapy that would be extremely burdensome. Palliative and end-of-life care is now state-of-the-art, and nearly without exception, no sufferer need be in pain. In any specific situation, a Protestant Conscience in a prayerful setting will be guided how to judge, though it may take A LOT of prayer.

A “watcher on the wall” on this issue is Wesley J. Smith, an attorney who turned to writing as a means of making a positive difference in the twilight. In July 2014 he wrote in the Weekly Standard:

Advocates of assisted suicide tell two – no, three – lies that act as the honey to help the hemlock go down. The first is that assisted suicide/euthanasia is a strictly medical act. Second, they falsely assure us that medicalized killing is only for the terminally ill. Finally, they promise that strict guidelines will be rigorously enforced to protect against abuse.

Recent legislative proposals and developments in the field demonstrate the mendacity of these assurances. For example, a new bill tabled in the Scottish
parliament would legalize assisted suicide for “terminal” or “progressive and either terminal or life-shortening” conditions—undefined terms that could easily include chronic ailments such as diabetes…

Belgian law allows broad access to euthanasia and assisted suicide when “the patient is in a medically futile condition of constant unbearable physical or mental suffering” caused by an illness or injury, and which cannot be alleviated… [This has included] the joint euthanasia of elderly couples who preferred immediate death to eventually widowhood…

Belgian doctors also combine voluntary euthanasia with organ harvesting…

And now, the Belgian parliament seems likely to legalize child euthanasia: By an overwhelming 50-17, the senate just passed a bill allowing doctors to kill sick children. The justification? It’s happening anyway... (ref)

Also, see this evidence for how laws and safeguards are ignored where infractions are not prosecuted. Imagine the immense frustration of most of the medical establishment!

Twilight is a short period of time. An interesting timeline showing the progression of societal acceptance of Euthanasia is here.

Activists and elected officials work hand in hand or glove, as it were. Once Living Wills—that bind doctors from treating patients—became legal documents, laws were enacted dictating that any facility receiving Medicare or Medicaid must tell each adult patient about their right to refuse treatment by signing a Living Will. Then, Medicaid and Medicare accepted Hospice as an approved provider.

I once thought of applying to be a Hospice Care Consultant for a healthcare company that provided a hospice workforce. The job description was lengthy and one requirement was: Develop, execute and evaluate strategic marketing plans including tactics designed to meet budgeted admission goals. Does that seem strange to you? Maybe it’s just me.

Is cost control by way of “death panels” the end run? We’re on the doorstep of the broad legalization of physician-assisted suicide (PAS), that will be called “death with dignity” and “aid in dying.” But if the “Choice in Dying” referendum comes to your state for a vote, remember, in 2000, Maine voters defeated the PAS legislation 51% to 49%, and Massachusetts repeated that exact margin of defeat in 2012. Your vote counts!

Get on board with the Always to Care, Never to Kill team. Please read this entire declaration! A portion of it is below.

…Once we cross the boundary between killing and allowing to die, there will
be no turning back. Current proposals would legalize euthanasia only for the terminally ill. But the logic of the argument and its practical consequences will inevitably push us further. Arguments for euthanasia usually appeal to our supposed right of self-determination and to the desirability of relieving suffering. If a right to euthanasia is grounded in self-determination, it cannot reasonably be limited to the terminally ill. If people have a right to die, why must they wait until they are actually dying before they are permitted to exercise that right? Similarly, if the warrant for euthanasia is to relieve suffering, why should we be able to relieve the suffering only of those who are self-determining and competent to give their consent? Why not euthanasia for the suffering who can no longer speak for themselves? To ask such questions is to expose the logical incoherence and the fragile arbitrariness of suggested “limits” in proposals for legalized euthanasia. We must not delude ourselves. Euthanasia is an extension of the license to kill…”

Thou shalt not kill (Ex 20:13). God is the only one allowed to hasten death.

References for hyperlinks:

1 Wesley J. Smith Blog
http://www.weeklystandard.com/author/wesley-j.-smith

2 Legalizing euthanasia or assisted suicide: the illusion of safeguards and controls
http://www.ncbi.nlm.nih.gov/pmc/articles/PMC3070710/

3 Euthanasia Historical Timeline

4 Always to Care, Never to Kill

ORIGINALLY PUBLISHED 05-12-2014
Render unto Science?

Why not donate your body to medical science?

An analogy: The Pharisees worked to ensnare the Lord in controversy so that he would condemn himself. On one occasion they asked him, “Is it lawful to give tribute to Caesar or not?” Christ’s response was to point out the image and name on the coin: Caesar. “Render to Caesar the things that are Caesar’s, and to God the things that are God’s.” (Mark 12:14–16)

The “tribute” referred to by the Pharisees was a poll tax on each man counted in the census to pay for the state’s administration. Since Israel was under Roman rule, they were required to pay these masters, but wouldn’t Jesus, if he really was divine, advise them to look only to God as deserving their tribute?

Likewise, how would Christ answer us today if we ask him, “Should I donate my body to medical science?” Would he say, “Render unto science and medicine the body, for it has the appearance and scent of those who rule on earth, and of those who can be helped by the wise men of these professions” — ?

Or, might he say, “Please donate some skin and bone but not your entire body” — ?

Yet, we are not made in the image of man.

Christ said to his disciples, “Ye shall be hated of all men for my name’s sake. But there shall not an hair of your head perish.” (Luke 21:17, 18) Surely, if such a minuscule part of the Christian’s body is precious to God, he would not advise us to parcel out the more useful parts — would he?

Perhaps that verse should be taken in context of the Resurrection, since the disciples did perish, most as martyrs, but in the resurrection, their hair and body will be restored! Or, maybe it was just a figurative expression to assure them that all would be well, no matter what.

Would you donate your body to a medical school? According to many, the experience of studying a corpse in the classroom is essential:

Medical professionals and students continue to emphasize the necessity and importance of dissection in developing lifesaving techniques, training doctors, and better understanding the human body. What’s more, even among those medical schools that stopped using dissection as a teaching tool in favor of computer programs or other models, most have since reinstated the practice. (ref)
If doctors, teachers and medical students say they need cadavers, who are we laypersons to object? However, the Protestant Conscience wants distinctions to be made.

We understand that in the outworking of human destinies, evil will be done; harmful and sorrowful events and circumstances will occur. For example, in transferring the kingdom of Israel from Saul to David, battles were fought and lives were sacrificed. Yet, even after Saul's death when a truce was in process, David's captain, Joab, took revenge on Abner who had been Saul's captain. This was condemned by David (2 Sam 3:28, 29); Joab went too far.

A New Testament example is found in the story of John the Baptist, beheaded as demanded by Herod's wife. It was wrong for John to be imprisoned, but much more evil to behead him and Herod knew it. The limiting of evil is often in God's agenda.

The distinction that a Protestant Conscience requests with regard to body donation for training medical students is that of careful limitation. Be full of care when you request and use these cadavers, not unthinking or disrespectful.

We are liable to give the medical profession too much reign. In addition to medical schools requesting cadavers, many others seek and find them. A 2006 article in USA Today calls the "body trade" a lucrative business and notes that modern-day body snatchers get as much as $850 for an elbow. (etc) (ref). After reading that article I became interested to read Body Brokers (copyright 2006 by Anne Cheney), a book that detailed plush seminars in beachfront hotels where bodies that had been sold by crematoriums were laid out in fine display for surgeons who, while enjoying respites, could practice techniques using new medical instruments, at the expense of the instrument and anatomical companies. So, families were paying for cremation and the state-licensed crematoriums were making millions by selling bodies for the benefit of medical science — so they could rationalize their crime.

Can we know that the ashes of the bodies of loved ones sent for cremation really belong to OUR loved ones? The crematory managers introduced in Body Brokers were careful to be sure the ashes given to families were the proper weight for human remains.

Perhaps such abuse might be stemmed if cloning were legal. Organism cloning is a method in which an identical copy of a creature is made in a lab through manipulating a one-parent cell by asexual reproduction. Already the animals cloned include a mouse, cow, goat, monkey, pig, cat, ox-like animal, sheep, rabbit, mule, rat, deer, horse, water buffalo, dog and ferret (ref). These "no-dad" creatures were only experiments. But if we had a crop of human clones, not just embryos for the production of stem cells, but grown up clones, then medical experimentation could be carried out without bothering real people.

Clones would not have souls, would they? How would you feel about this? How would they feel?

If humans are triune creatures, comprised of body, soul and spirit, how would these
manifest or interact in a clone? Would the clone make a really good pet, or instead be a candidate for the gospel message? There are people who would like to have a cloned son or daughter; in the future, family planning may take on a new spectrum of meaning.

How did the clone get into this *Render unto Science* post? Well, we are talking about who owns the patent on the body: God or man? Who has the right to state how it may be used and how those who break the rules may be prosecuted?

Or, is it a dual ownership? After all, he has said, “Ye are gods.” *(John 10:34)* And we have the instruction to rule over nature *(Gen 1:28)*. Could that not include inventing ways to maintain good health? If cloning and body donations facilitate this, why not promote them?

We humans enjoy pushing every limit, spinning webs and constructing devices for problem solving. We let our conscience be our guide when we ought to question our sense of propriety.

What is the right way to view and to treat humans? Will we be careful in our judgments, relating each ethical question to the sanctity of human life made in the image of God, striving for a consistent life ethic? Or, will the ground of our deductions be whether or not personal consent has been given?

This is a question for us, for Christians. We already know how the world will rule.

It is good to know that God is our sole owner and will exercise his full title in due time. When man believes he is in charge, disaster is close at hand.

*References for hyperlinks:*

1 Importance of dissection in medical training
   [http://www.northwestern.edu/newscenter/stories/2011/05/medical-ceremony-cadavers.html](http://www.northwestern.edu/newscenter/stories/2011/05/medical-ceremony-cadavers.html)

2 Illegal trade in bodies shakes loved ones

3 Cloning - general information
   [http://www.biosystems.usu.edu/htm/research/cloning/cloning-general](http://www.biosystems.usu.edu/htm/research/cloning/cloning-general)

*Originally Published 05-19-2014*
We are winding down to the end of this series on Flesh and Bone and the Protestant Con-science.

Looking back, we have covered or touched on:

• Body Donation to Medical Schools
• Cloning
• Euthanasia
• Assisted Suicide
• Stem Cell Research and the difference between Embryonic Stem Cells and non-ES cells
• Organ Donation
• Definition of Death and When Life Begins
• In Vitro Fertilization
• Abortion and Birth Control Methods
• Infanticide, and
• Recombinant DNA

Other topics such as the singularity, in which man and machine are merged, could be studied, but the subjects covered provide an adequate backdrop for the sanctity of life issues in their overall relation to the question under consideration: Is it OK to harvest skin and bone from a cadaver?

Perhaps you assumed from the last post that I think it is fine for Christians to do so, as long as body parts are used for helpful medical procedures. No, in the last post we only covered body donation to medical schools for training purposes, and in this post we add: For research. But sharing cadaver parts for therapies or in healing others’ physical conditions is a horse of a different color.

Before addressing that practice, it is interesting to note that an aspect of collecting skin and tissue from cadavers is to supply “biobanks” businesses whose combined net worth is projected to reach $216.3 million in 2018. A growth industry!

A law professor with bioethics background, Lori B. Andrews, describes the biotech
boom:

When I was growing up, it was said that the chemicals in the body were worth 89 cents. Today, though, like a bullish stock market, the price tags on body parts have soared. The value of a human egg can be tens of thousands of dollars. A single cadaver can be mined for medical and research uses – its skin worth $36,522, its bones $80,000, its tendons $21,400, and so forth. The value of a particularly interesting human gene – or even snippets of human genetic material – can be billions...

The range of human tissue sources available to researchers and biotech companies is extraordinary. There are brain tissue banks, breast tissue banks, blood banks, umbilical cord banks, sperm banks, and tissue repositories for studying AIDS, Alzheimer’s, other mental illnesses, and aging. Over 282 million archived and identifiable pathological specimens from more than 176 million individuals are being stored in United States repositories. At least 20 million new specimens are added each year. Some specimens are anonymized or coded and not identified with specific individuals; others carry patient names or codes that allow personal identification. Between these pathology samples, forensic samples, public health samples, and samples collected on people associated with the military, virtually everyone has his or her tissue “on file.”

*Portrait of Dr. Simarro at the Microscope by Joaquín Sorolla y Bastida*

1897. Oil on canvas. Entitled and signed lower right side, over the books: J. Sorolla B. Joaquín Sorolla [Public domain], via Wikimedia Commons
I cannot object to a reputable research company obtaining a cadaver for honorable purposes any more than I would object to a medical school doing so. The Bible says, *It is the glory of God to conceal a thing; but the honour of kings is to search out a matter.* (Prov 25:2) Though this pertains to state matters, it can be applied to the scientist who desires to examine the tissues and diseases in a cadaver that may reveal a cure. Or, forensic experts may need a cadaver to help solve a crime.

With a right perspective much good can be accomplished, yet when we view the human body as a commodity or impersonal material that can be exchanged at will, we inevitably stray from the traditional Christian perspective that the body is the temple of the Holy Spirit (1 Cor 6:19), and that human life created in God’s image is sacred. We instead arrive at the opposite viewpoint, that a cadaver is due respect only as a medical treasure.

The logical and actual outcome of this perspective is insurance futures, financial products that make people worth more dead than alive, allowing others to reap financial rewards through anticipating their deaths. Limits and respect must be restored!

It is reported: “Ground-level body wranglers in the U.S. can get as much as $10,000 for each corpse they secure through their contacts at hospitals, mortuaries and morgues. Funeral homes can act as middlemen to identify potential donors. Public hospitals can get paid for the use of tissue-recovery rooms.” (ref)

We need to ask: When the “wranglers” call for the body parts of our loved one who has died, what happens if we say, Yes--? Are these parts really useful?

According to a Christian physician, Dr. Greg Kenyon, very few body parts are helpful.

“…the clearly dead or cadaver donors are those with no question that death has occurred as, all signs of circulation, breathing, and brain function are absent for a long enough time. The only human parts that remain useful in this situation are skin, bone, heart valves and corneas (from the eyes). Skin and bone can usually be obtained from the patient or from a living donor. Pig and synthetic heart valves are so successful that human heart valves are not used. In practice corneas are the only human parts used from clearly dead donors.” (ref)

Dr. Kenyon’s article was posted or revised in Spring 2013, and barely a year later we find that a corneal regeneration procedure has been developed that uses no donor cornea but rather introduces a recombinant human collagen that mimics the human cornea’s connective tissues to stimulate revival of function. The new procedure offers benefits over transplantation as well. So, in the near present and future, the need for cadaver corneas may be nil.
Similarly, there are “biomaterials” that mimic bone structure, such that replacing damaged bones or joints can be accomplished with regenerative procedures\(^7\).

And likewise, there are new procedures for skin grafting. One\(^8\) uses the patient’s own skin in a minimally invasive way, is less painful, and faster and simpler for the specialists and patients.

So, whether for skin, bone, valves or corneas, medical science is moving beyond the need for donated cadavers, except for research and training purposes.

Nevertheless… “Families are led to believe they are giving the gift of life. They are not told that skin goes to enlarge penises or smooth out wrinkles, or that executives of tissue banks and nonprofit groups that obtain body parts routinely earn six-figure salaries. The products are rarely life-saving as advertised.” (ref\(^9\))

But, realistically, it is at least possible that some body part could potentially help an unfortunate sufferer, despite varying rates of donor organ rejections and the use of parts for procedures that are frivolous.

So, is it OK to donate the body parts of your deceased loved one, when the calls come after they die? What do you think? Does God care what becomes of the body after death? Can you trust the person who calls to be honest as to how the gift will be used? How will you respond?

Is “consent” the overarching principle that ought to adjudicate the practice of sharing body parts from a moral or ethical standpoint?

In other words, if a person consents to his or her body being used for organ donation, however that may flesh out (scuze me) then the deal is honest, which matters to God. He cannot abide lies. Are honesty and consent the main arbiters of the practice?

There is also an argument from a Christian or other religious standpoint that objectifying the human body and promoting tissue and organ donation inevitably leads to abuses. Innocent children are kidnapped and prisoners exploited for their organs. Financially destitute women undergo harmful treatments to become egg donors; assisted suicide will become common to provide financial gain. We should never get started down these roads.

People become confused: Honor your father and mother as easily leads to helping them die, if their organs could help younger people, and seems kinder than helping them to live.

People wonder: The Bible was written so long ago when the body could not be viewed as a resource...hmmm... Have biomedical advances outdated its timeworn truths? May we read it in a strange, new light?

For example, most know the story of the Good Samaritan who, though not of sound doctrinal persuasion, was the good neighbor who unselfishly helped the crime victim, using his
own resources. Is that the paradigm for the one today who would use his own flesh to help his fellowman?

What is the truth? Where is the answer? What do you think? Does God care?

References for hyperlinks:

1 Biobanks Market - Global Industry Size, Share, Trends, Analysis And Forecast 2012 - 2018
http://www.transparencymarketresearch.com/biobanks-market.html

2 Harnessing the Benefits of Biobanks
http://com/karm7e6

3 Are You Worth More Dead Than Alive?
http://preview.tinyurl.com/lx23h4r
http://www.nytimes.com/2012/08/12/magazine/are-you-worth-more-dead-than-alive.html

4 Skin, bones and tissue for sale: How the dead are being used for grisly trade in human body parts
http://tinyurl.com/luabmby
https://emergingtruth.wordpress.com/2012/07/18/skin-bones-and-tissue-for-sale-how-the-dead-are-being-used-for-grisly-trade-in-human-body-parts/

5 Organ Donations -A Christian Family Physician’s Perspective
http://frcna.org/component/k2/item/8638-/8638-

6 Stable corneal regeneration four years after implantation of a cell-free recombinant human collagen scaffold

7 Innovations in Human-Bone Repair and Replacement
http://tinyurl.com/o8tde5d

8 New skin grafting procedure
http://www.standard.net/stories/2013/08/05/new-skin-grafting-procedure

9 Body Donors Fueling A Booming Business
http://www.sweetliberty.org/issues/hate/bodybrokers.htm

ORIGINALLY PUBLISHED 05-26-2014
How will you answer the callers who want skin and bone from your deceased loved one?

What if I were to tell you that the current push for abortion, IVF, embryonic stem cell research, assisted suicide, euthanasia and organ transplantation is a Satanic plot against the sanctity of human life?

Perhaps you would agree up to a point.

In particular, what if I say that the agenda to aggressively obtain permissions and to harvest organs for transplantation and to rifle through cadavers for shareable parts undermines the doctrine of the Resurrection?

Would you respond, “Well, isn’t saving lives or repairing bodies more important to God than religious theories and doctrines?” Each person must draw his own conclusions. Yet, we need the help of those who have formally studied God’s Word, for any answer must derive from a
process of deduction drawing from the whole Word of God, since there is no specific reference to biomedical practices in the Bible.

In this post (chapter) of the series we will consider these questions:

1. Should a Christian be cremated or buried (interred)?

2. Should a Christian be buried whole or desecrated, that is, without certain organs, parts, skin or bones?

Perhaps you will say, “It is not desecration to share body parts and tissues that help to heal the living.” If a person’s intent is to help others, then is permitting a loved one’s skin, tissues, bone and other parts to be removed, properly speaking, abuse? We do know the Lord always considers our motives.

Parceling out a corpse does destroy its integrity, but we do not think of its integrity in the same way as we might if it were not in a process of rapid deterioration. Yet, for a person, integrity may remain in a realm we cannot see, as a body awaits its resurrection. Only the Lord sees it whole; man cannot.*

We need to wonder: Why is donor skin rejected by a burn victim’s body? An article on Human Skin Banking explains:

Although demonstrating many characteristics of an ideal wound covering, allograft skin contains Langerhans cells that express class II antigens on their surface. These cells reside in the epidermis of the skin and will ultimately result in an immunologic rejection response. This typically results in an acute inflammatory reaction and may lead to the development of a deep wound infection. (ref 1)

Donor (allograft) skin may serve as a dressing, but other means may do this today. (See post 16)

Why are the statistics so high for rejection of donor parts? In many situations, a donor will never know whether the donated parts helped or harmed the recipient.

Nevertheless, it is not my purpose to change your mind if you desire to share your own body parts or those of your loved one upon death.

Thinking through the decision is important, and the next chapter is helpful in considering the Resurrection as sufficient cause not to share body parts. However, perhaps other writings and Bible passages should be argued besides those in the following chapter.

The theologians of today will look to those upon whose shoulders they stand, but can previous generations speak to the situation of the pastor or seminary professor of the 21st centu-
ry, in light of the new realities of biomedical and technical advances? Perhaps our church leaders must break new ground in adjudicating these matters.

Back to the questions: 1) Should a Christian be cremated or buried? and 2) Should he be buried whole or desecrated? -- Perhaps you will say, “Considering the potential abuse of those who show themselves willing to be organ donors (posts 5, 11) not to mention of the unwilling, and considering that the few body parts that may be useful from a corpse could also be replicated by cell regeneration or other therapies (post 16), and considering that there is no way for me to know if the body of my loved one would be used for good purposes, (post 16) why would you pursue this question further? And cremation is a matter of economics and environmental concerns, nothing more.”

When it is a matter of expense, we have already noted that a Christian may determine to donate his or her own body for medical training or research purposes under a strict agreement with the recipients as to how their corpse will be handled, and this would be free of cost. For some, body donation may be a desire of the heart to help train medical students or to assist researchers in finding a particular cure.

Nevertheless, I suggest that regarding how the dead are handled, though other factors such as expense may enter the decision-making process, it is important to pursue answers that center on the doctrine of the Resurrection. Have confidence that God will provide the resources for you to bury your dead, if this is your wish for your loved one.

The concept of the Resurrection is of importance to all people, for each human will be resurrected. Paul pointed this out to Felix when he presented his own defense against the accusations of the Jews, *I admit that I worship the God of our ancestors as a follower of the Way, which they call a sect. I believe everything that is in accordance with the Law and that is written in the Prophets, and I have the same hope in God as these men themselves have, that there will be a resurrection of both the righteous and the wicked.* (Acts 24:14, 15)

The “just” are those who have trusted in Jesus Christ for salvation, and the “unjust” fall into various categories. Some aspects of their resurrections are unknown, mysteries not to be revealed before a set time. It is the certainty of the Resurrection of the Just that is pertinent to the Christian’s questions about burial and how to answer the calls for body parts that may flood in when a loved one dies.

There are many good websites and pamphlets on cremation versus burial. Nearly all that I have read favor burial for the Christian. A good list of pertinent Scriptures is here.

I like the passage that speaks of the body being planted: *For if we have been planted together in the likeness of his death, we shall be also in the likeness of his resurrection: Knowing this, that our old man is crucified with him, that the body of sin might be destroyed, that henceforth we should not serve sin.* (Rom 6:5, 6) In this passage, it may seem at first that Paul is referring to the human body in a negative light. Is he?
Other passages come to mind: The flesh is weak… (Mat 26:41); It is the spirit that quickeneth—the flesh profiteth nothing (Jhn 6:63); they that are after the flesh do mind the things of the flesh; but they that are after the Spirit the things of the Spirit (Rom 8:5); they that are in the flesh cannot please God (Rom 8:8). No, these words refer to the unspiritual man, NOT to our bodies.

Think of the biblical references to the body as “the temple of the living God” (2 Cor 6:16; 1 Cor 3:16, 17; 1 Cor 6:19). The human body is a wonderful creation, and to burn it at death is disrespectful. It’s as though we see no more relation between it and the soul that once inhabited it. BUT THERE IS A RELATION between the body and soul after death. There is an integrity of person that outlasts the grave.

Here are some Scriptures that demonstrate that truth:

1. 2 Kings 13:21

   And it came to pass, as they were burying a man, that, behold, they spied a band of men; and they cast the man into the sepulchre of Elisha: and when the man was let down, and touched the bones of Elisha, he revived, and stood up on his feet.

   Obviously, though Elisha’s soul was with the Lord and only his skeleton remained on earth, those bones retained his spirit in some way that we cannot define.

2. John 11:39-45

   The miracle of raising Lazarus showed that even after four days his soul was reunited with his body though rigor mortis and indeed complete putrefaction had set in. Martha’s comment to Jesus was: “By this time he stinketh”. Jesus’ reply was: “Said I not unto thee, that, if thou wouldest believe, thou shouldest see the glory of God?” (John 11:39, 40) [To repeat: Resurrection of the dead is the GLORY of God.]

3. Matthew 27:52, 53

   After Christ was crucified, the temple veil was torn in half, an earthquake shook the area, “and the graves were opened; and many bodies of the saints which slept arose.” Evidently, the spirits had no trouble finding their decomposed bodies or bones. They rejoined them, came out of their graves and “went into the holy city, and appeared to many.”

   At the First Resurrection (Rev 20:6) Christians will rise to meet their Lord in the air, some barely decomposed from recent death, some from invisible particles after burning to ashes, whether from war or even cremation, and some yet alive, but those alive will follow the dead in order. (1 Thess 4:16, 17) This is not easy to accept, yet we do know from science that in a closed system, matter (or mass/energy) can neither be created nor destroyed but only transformed, making it easier to consider that we may become invisible without disappearing, and then become visible again in some new form.

   The Resurrection Body will be quite different from the earthly one (1 Cor 15:36–49), neverthe-
less the corpse or dust from which it emanates has some invisible, continuing, unbreakable link that we cannot deny if we believe God, and for which we ought to praise Him!

Simply because some do burn up, have body parts cut off, or drown in the ocean, there is no reason to imitate the catastrophic in end-of-life matters. War and other circumstances beyond our control are not meant to furnish examples to us for the proper handing of body preparation at death and burial.

Cremation and body desecration belittle our marvelous frames. The sins of the flesh all begin in the mind, so we shouldn't blame the body for cooperating with those suggestions. The conscience must guide the will and needs enlightenment to do so. Should the conscience not rule well, the body has rest at death but not the soul may not. (Luke 16:24, 25)

Do not view the body as a worthless, troublesome thing you will be glad to be rid of. You could contemplate instead that it pictures the daily dying of our sin nature, as we press into Christ for help to be like Him. Thus we can view our deterioration in a positive light!

Even though a disease has left a body so ravaged that it may seem cremation is best--hold that thought--for there is another reason we bury.

Burial is embedded in Scripture as the method by which the Christ would be handled after his death, prefiguring that he would rise. Christ explained this to the disciples on the walk to Emmaus (Luke 24:46), which prophecy is to be found in the Old and New Testaments (Isaiah 53:9; Jonah 1:17; Mat 12:40) and the language is frequent that he would be raised from death (Mat 16:21, 17:23, 20:19, 27:64; Mark 9:31, 10:34; Luke 9:22, 13:32), pointing to burial, not any other way. It would be important for the women and disciples to find the stone rolled away and to see the gracheloses and head napkin. The testimony of the Resurrection is that Death has been defeated.

We often read of a king’s end in the Old Testament, that he “slept with his fathers and was buried with his fathers.” (1 Ki 14:31, et al) Burial or interment was the method of handling a body after death, a practice which looked forward to Christ’s resurrection, though the nation was not aware of this aspect of their witness to the world.

The patriarchs, all Israel and Christians were or will be or ought to be buried, for Christ was buried so that he would also rise from death to fulfill the Scripture, as will all those who are His except for that special category, those who are alive at his second coming, and of course, those who met with catastrophe and thus could not be properly buried.

Burial reminds those who grieve to focus instead on the Resurrection of the Lord and his victory over death, and that “in Christ shall all be made alive.” (1 Cor 15:22) As we bury our loved ones, we show we believe the Bible and look forward to the Resurrection of the saints. When we bury them whole, without missing body parts that were not lost in life’s trials, we testify that the body, too, is the person: A dead body has relation to its soul and in some marvelous, unknowable manner, will know it again at the last day. As well, a Christian burial assists the memory to be at
peace.

It is not that God cannot regather the missing parts of an individual from other individuals or from annihilation to restore the unique person; it is that the Bible teaches there is an integrity of person, body and soul and spirit, whether alive or dead, for the just and the unjust. The quotations from theologians you will find in the next chapter support this truth.

If we deny the importance of the person as an unique individual whose body is due respect whether alive or dead, do we not also disrespect the doctrine of the Resurrection, which is an essential doctrine of the Christian faith?

But, you may say, it seems illogical to permit body donation to medical schools and research companies, but not to let a portion of a cadaver be sliced off for use by these same institutions. That may be argued, but a Christian should not let a loved one be donated to any organization not known for ethical and God-honoring training and research. We cannot know at the last moment where their skin and bone are heading, and if we have not prayerfully considered this issue, the day of death is not the time to address it.

Respect for the dead is a dying notion, along with respect for life, along with respect for sound Christian doctrine. For any in need of a strengthening touch, recall the encouragement of the Man dressed in linen whose face appeared as lightning, with eyes as lamps of fire and words like the voice of a multitude (Dan 10:5, 6) when he said to Daniel, But go your way till the end. And you shall rest and shall stand in your allotted place at the end of the days. (Dan 12:13)

All creation groans and travails in pain together with us, having been subjected to death because of the sin of man, and waits with us for the redemption of our bodies. This hope keeps us from giving up. When we feel weak and incapable, the Spirit helps us, groaning in intercession for us. (paraphrased from Rom 8:22-26)

Now, what will you say if body brokers call for parts on the day your loved one dies? Read a little further for expert testimony and some final thoughts.

References for hyperlinks:

1 Human Skin Banking

2 What Does The Bible Say About Cremation?

ORIGINALLY PUBLISHED 06-01-2014 and REVISED 1-29-2017

* NOTE FOR PROTESTANTS WHO SUBSCRIBE TO THE WESTMINSTER CONFESSION: The answer to Question 86 in the The Westminster Larger Catechism, “What is the communion in
The communion in glory with Christ which the members of the invisible church enjoy immediately after death, is, in that their souls are then made perfect in holiness, and received into the highest heavens, where they behold the face of God in light and glory, waiting for the full redemption of their bodies, which even in death continue united to Christ, and rest in their graves as in their beds, till at the last day they be again united to their souls.
I enjoyed reading more about the Resurrection in Scripture and in the writings of well-educated Christians, all who now await Resurrection. Some excerpts are shared here.

*We will see God in our own flesh.*

*For I know that my redeemer liveth, and that he shall stand at the latter day upon the earth: And though after my skin worms destroy this body, yet in my flesh shall I see God: Whom I shall see for myself, and mine eyes shall behold, and not another; though my reins be consumed within me.* - Job 19:25-27

*Not merely the soul is in Christ, but also the body.*

And when Christ came to save his people, he came to save their bodies and their souls. *“Now the body is not for fornication, but for the Lord.”* Is this body for the Lord, and shall death devour it? Is this body for the Lord, and shall winds scatter its particles far away where they never shall discover their fellows? No! the body is for the Lord, and the Lord shall have it. *“And God hath both raised up the Lord, and will also raise us by his own power.”* 1 Cor. 6:13, 14

Now look at the next verse: *“Know ye not that your bodies are the members of Christ.”* Not merely is the soul a part of Christ—united to Christ, but the body is also. These hands, these feet, these eyes, are members of Christ, if I be a child of God. I am one with him, not merely as to my mind, but one with him as to this outward frame. The very body is taken into union. ⋯ Did not the apostle say *“they two shall be one flesh. This is a great mystery; but I speak concerning Christ and the Church?”* Eph 5:31, 32. “They are one flesh;” and Christ’s people are not only one with him in spirit, but they are “one flesh” too. The flesh of man is united with the flesh of the God-man; and our bodies are members of Jesus Christ. Well, while the head lives the body cannot die; and while Jesus lives the members cannot perish. - Charles Haddon Spurgeon

http://www.spurgeon.org/sermons/0066.htm

*Not only the soul is sanctified, but also the body.*
All those who are chosen in Christ, who are given to him, who are redeemed by him, and are in union with him, are sanctified by the Spirit of God, and that not in their souls only, but in their bodies also; for as the body, as well as the soul, is defiled by sin, it also stands in need of the sanctifying influences of divine grace. Accordingly the Spirit takes up his dwelling in the bodies, as well as in the souls of men; “What! know ye not,” says the apostle, “that your body is the temple of the Holy Ghost, which is in you?” 1 Cor 6:19

He begins and carries on the work of sanctification in the one, as well as in the other, as is needful; and will, at last, completely finish it; for which the apostle prays, saying, “And the very God of peace sanctify you wholly; and I pray God your whole spirit, soul and body, be preserved blameless unto the coming of our Lord Jesus Christ,” 1 Th 3:13. Now, if the bodies of these sanctified ones are not raised, the Spirit of God will not only lose that which he has taken possession of, as his dwelling-place, but also a considerable part of his glory, as a Sanctifier. - JOHN GILL, D. D.

http://www.pbministries.org/books/lime_st/gill.htm

The doctrine of the Resurrection elevates and enlivens our faith, and teaches respect for the body, whether alive or dead.

What an instruction is this doctrine to faith and trust in God, Father, Son, and Spirit? If God can and will raise the dead, what is it he cannot do? Faith should not stagger at any thing which God has promised to perform, or be discouraged at any difficulties in its way, or at any trials and afflictions it meets with. The consideration of this, that God quickens the dead, Rom 4:17-20, quickened Abraham’s faith, so that he “staggered not at the promise through unbelief,” though there were difficulties attending it insuperable to nature.

And when the apostles had the sentence of death in themselves, they were directed not to trust in themselves, “but in God, which raiseth the dead, who, (say they,) delivered us from so great a death, and doth deliver; in whom we trust that he will yet deliver us,” 2 Cor 1:9, 10. Moreover, this doctrine may teach us, that all due and proper care ought to be taken of our bodies, both whilst living, and when dead. All proper care ought to be taken of them whilst living; though they are not to be pampered, they are not to be starved: they are to be fed and clothed, according to the blessings of life, which God bestows upon men, provided the bounds of moderation and decency be observed; for to transgress these by luxury and intemperance, is not to use our bodies well, but to abuse them: and when the body is dead, care ought to be taken that it be decently interred, which may
be confirmed by the examples of Abraham, Joseph of Arimathea, and others. -
JOHN GILL, D. D.

http://www.pbministries.org/books/lime_st/gill.htm

...why should not my countenance be sad, when the city, the place of my fathers’ sepulchres,
lieth waste... Then the king said unto me, For what dost thou make request? So I prayed to the God
of heaven. And I said unto the king, If it please the king, and if thy servant have found favour in
thy sight, that thou wouldest send me unto Judah, unto the city of my fathers’ sepulchres, that I may
build it. - Neh 2:3-5

The realization of the promises and threatenings of God depend upon the
same people having the same bodies.

If the same body is not raised, how will the end of the resurrection be answered,
which is the glorifying of God’s grace, in the salvation of his people, and of his
justice in the damnation of the wicked? Hence the one is said to “come forth to
the resurrection of life,” and “the other to the resurrection of damnation.”

How shall every one “receive the things done in his body,” according to that he
hath done, “whether it be good or bad,” if the same bodies are not raised, who
have done good or evil? Where would be the justice of God, if other bodies,
and not those which Christ has purchased with his blood, the Spirit has sanc-
tified by his grace, and which have suffered for the name of Christ, should be
glorified? as also if other bodies, and not those which have sinned against God,
blasphemed the name of Christ, and have persecuted his saints, should suffer
eternal vengeance, and be punished with everlasting destruction from the pres-
ence of the Lord, and the glory of his power?

Where would be the veracity of God, either in his promises or threatenings,
if the good things he has promised, are not bestowed upon the same persons
to whom he has promised them, and if the punishment he has threatened, is
not inflicted on the same persons to whom he had threatened it? For how they
can be the same persons, without having the same bodies, I do not understand.
Besides, what a disappointment will it be to the saints, who are waiting for the
adoption, to wit, the redemption of their body, from all weakness and corrup-
tion, if not that, but another body, shall be given them, and be united to their
souls, and be glorified with them!

In fine, if the doctrine of the resurrection of the dead, which the Scriptures of
the Old and New Testament hold forth, does not intend the resurrection of the
same body; it is no other, nor better, than a transmigration of souls into other bodies, which was the old Pythagorean notion. … if the body was reduced to nothing by death, the resurrection of the body would not be properly a resurrection, but a creation of a new body. - JOHN GILL, D. D.

But when thou makest a feast, call the poor, the maimed, the lame, the blind: And thou shalt be blessed; for they cannot recompense thee: for thou shalt be recompensed at the resurrection of the just. – Luke 14:13, 14

All who are born again await a body suitable to their new life; we shall obtain complete freedom from sin at the Resurrection.

As in Adam the doom of sin is advancing by a slow but sure process unto the “second death” Rev. 21:8, so in Christ the reward of righteousness is advancing surely to its consummation. Even now believers are the sons of God and if sons then heirs, but “it doth not yet appear what we shall be” 1 John 3:2. Christians have already received the “first fruits of the Spirit,” the earnests and foretastes of what is coming, yet they are “waiting for the adoption, to wit, the redemption of the body” Rom. 8:23.

The new Life which they have received shall yet be clothed with a body suited to it and since Christ Himself is our Life (in every sense and application of that term), it must be a body fashioned like unto His glorious body, for “as we have borne the image of the earthy, we shall also bear the image of the heavenly” 1 Cor 15:49. It is on the Resurrection morning that there will be “the (full) manifestation of the sons of God” and then shall appear their “glorious liberty” Rom 8:19, 21—freed from every vestige of sin in spirit and soul and body! - A.W. Pink

Verily, verily, I say unto you, The hour is coming, and now is, when the dead shall hear the voice of the Son of God: and they that hear shall live. For as the Father hath life in himself; so hath he given to the Son to have life in himself; And hath given him authority to execute judgment also, because he is the Son of man. Marvel not at this: for the hour is coming, in the which all that are in the graves shall hear his voice, And shall come forth; they that have done good, unto the resurrection of life; and they that have done evil, unto the resurrection of damnation. (John 5:20-29)

The comfort of the doctrine of the Resurrection is that we all will have once again our same bodies --though we shall be as angels. - Luke 20:36
I come now to some practical thoughts from this doctrine before I go to the other. My brethren, what thoughts of comfort there are in this doctrine, that the dead shall rise again. Some of us have this week been standing by the grave; and one of our brethren, who long served his Master in our midst, was placed in the tomb... Now, there were tears shed there: do you know what they were about? There was not a solitary tear shed about his soul. The doctrine of the immortality of the soul was not required to give us comfort, for we knew it well, we were perfectly assured that he had ascended to heaven. The burial service used in the Church of England most wisely offers us no comfort concerning the soul of the departed believer, since that is in bliss, but it cheers us by reminding us of the promised resurrection for the body; and when I speak concerning the dead, it is not to give comfort as to the soul, but as to the body. And this doctrine of the resurrection has comfort for the mourners in regard to the buried mortality.

You do not weep because your father, brother, wife, husband, has ascended to heaven—you would be cruel to weep about that. None of you weep because your dear mother is before the throne; but you weep because her body is in the grave, because those eyes can no more smile on you, because those hands cannot caress you, because those sweet lips cannot speak melodious notes of affection. You weep because the body is cold, and dead, and clay-like; for the soul you do not weep.

But I have comfort for you. That very body will rise again; that eye will flash with genius again; that hand will be held out in affection once more. Believe me, I am speaking no fiction. That very hand, that positive hand, those cold, clay-like arms that hung down by the side and fell when you uplifted them, shall hold a harp one day; and those poor fingers, now icy and hard, shall be swept along the living strings of golden harps in heaven. Yea, you shall see that body once more. - Charles Haddon Spurgeon

http://www.spurgeon.org/sermons/0066.htm

For thou wilt not leave my soul in hell; neither wilt thou suffer thine Holy One to see corruption. - Ps 16:10; Acts 2:27

Behold, I shew you a mystery; We shall not all sleep, but we shall all be changed, In a moment, in the twinkling of an eye, at the last trump: for the trumpet shall sound, and the dead shall be raised incorruptible, and we shall be changed. - 1 Cor 15:51, 52

ORIGINALLY PUBLISHED 06-16-2014

La Resurrezione (“The Resurrection”) by Pericle Fazzini
Bioengineering is taking place worldwide to explore for cures for multitudes of diseases.

In post 16 (Chapter 16) of this series, one new cure was described as introducing a “recombinant human collagen that mimics the human cornea’s connective tissues to stimulate revival of function.”

Perhaps the term “recombinant” was a red flag to the careful reader. Is it not true that recombinant DNA could be destructive of the human genome?

Here is a little more information on the corneal therapy that is an alternative to donor cornea transplantation:

...in Fagerholm et al... we showed the regeneration of corneal tissues and nerves after implantation of cell-free, biointeractive corneal implants made from 1-ethyl-3-[3-dimethylaminopropyl]carbodiimide hydrochloride (EDC) and N-hydroxysuccinimide (NHS) crosslinked recombinant human collagen type III (RHCIII). These RHCIII corneal implants were designed as simple mimics of the largely collagenous extracellular matrix of the cornea stroma to stimulate in situ regeneration of pathologic corneas. (ref1)

The advantage of this new procedure, in addition to there not being enough donors for the many corneas needed, is described below.

Over four years the regenerated neo-corneas were stably integrated without rejection, without the long immunosuppression regime needed by donor cornea patients. ... Histopathology of a regenerated, clear cornea from a regrafted patient showed normal corneal architecture. Donor human cornea grafted eyes had abnormally tortuous nerves and stromal cell death was found. Implanted patients had a 4-year average corrected visual acuity of 20/54 and gained more than 5 Snellen lines of vision on an eye chart. (ref2)

Understanding whether a therapy violates human or an individual’s physical integrity requires careful study of the scientific procedures and materials used. In this case, it appears that through research, probably studying both human and animal collagens, the structure of a protein was discerned, enabling its reinvention in an artificial, cell-free substance that, when implanted in a human eye, stimulated growth of corneal cells to function normally. This is a cure, not a ge-
genic reengineering to create a superman. I hope if I have not understood this, a professional will let me know and I will revise this document.

Ultimately we will be able to understand whether a biotech advance is OK from a Christian perspective, or not. However, it seems likely that few will have the time or inclination to delve into the realms of information that can reveal these clues and help us to draw conclusions. We need experts to guide us.

It’s easy to feel overwhelmed, but take heart. God has given us every reason to feel encouraged. In understanding small and great things, our measures are the same as angels’ (Rev 21:17). If man can discover nano particles, map the three billion chemical base pairs that make up human DNA, and learn to regenerate sight from reconstructing the patterns made by the Lord in designing vision, then man, with God’s help, is able to glorify Him in his healthcare and end of life decisions. (Mark 9:23)

References for hyperlinks:

1 Stable corneal regeneration four years after implantation of a cell-free recombinant human collagen scaffold

2 Stable corneal regeneration four years after implantation of a cell-free recombinant human collagen scaffold.

ORIGINALLY PUBLISHED 07-26-2014
With respect to sharing body parts and taking advantage of biomedical advances, there will be continuing divergent viewpoints among Christians. Some will trend toward encouraging the use of new technologies that do not rely on cadaveric parts, much less on living donors, embryonic stem cells or in vitro processes; others will consider that donating body parts demonstrates unselfish Christian love, and will emphasize that we should rely on doctors to advise us about health procedures, not on the church.

It seems likely that in the coming decades “respect for life” will more and more be related to “quality of life” and “admiration for those willing to merge their bodies with others,” and resources will be accordingly apportioned. As abortion continues, euthanasia and infanticide increase, and more body parts are shared, the less will be the sentiment that each human is unique and deserves protection. And what is to become of the doctrine of the Resurrection?

“Give us your oil,” cried the foolish virgins in the well-known parable (Mat 25:8), but the wise would not. Christ rejected the foolish virgins who were pure by moral standards, but did not have the oil of the indwelling Holy Spirit.

A living soul cannot be divided to companions or any others. Each individual must prepare his or her own heart and have the fulness of the Holy Spirit. I cannot stand before the Judge of the world behind another person’s beliefs or spiritual life. And when I come before the Judge on the merit of Christ’s sacrifice, I must come in my own flesh and bone.

Somehow, each person’s soul and body have been united for service and are not severed, despite appearances, after death. A relationship is persisted and at last, the soul and body reunite as one person. The apostle Paul stated that if we do not believe this, then neither was Christ raised and our faith is in vain. (1 Cor 15:13, 14)

Good reasons have been given in this blog series on why organ donation, along with many other practices that denigrate the sanctity of life, should be prevented; yet perhaps most won’t agree with these conclusions. For some, “sanctity of life” has reference to general respect for human life made in the image of God, but perhaps not to the divinely ordained life of each individual. Therefore, while they vocally oppose abortion and euthanasia, other procedures such as in vitro fertilization and organ donation may not seem wrong. In many cases, Christians have not been exposed to enough information to make thoughtful decisions.

The relief of human suffering is always a goal, but upholding Christian doctrine is, too. So, when these two collide or seem mutually exclusive, what is wrong? We must search for ways
to reconcile the two. Perhaps if we begin with the need to uphold correct doctrine, our practices will then be geared to research and procedures that are not contrary to Christian beliefs.

For example, with respect to stem cell research, some states have reapportioned their funding to include or concentrate on adult stem cell therapies. These states would be ideal locations for Christian biotechnologists.

There are many successes to announce for non-ES (adult) stem cell treatments. With these, over half have used the patient’s own stem cells to engender healing from heart disease, spinal cord injury, stroke, juvenile diabetes, multiple sclerosis and many others. (I learned this from a lecture at the 2014 National Right to Life Convention but cannot find my specific reference on this.)

When using donor stem cells there is danger of graft-versus-host disease, so why not concentrate research on how to make use of stem cells that are the patient’s own? An interesting success story is found here. It tells of doctors who used patients’ own stem cells to grow trachea tissue that led to successfully transplanted windpipes in two patients who had tracheal cancer.

We cannot think through all possible scenarios, though perhaps in some symposium it could be attempted. For example, one may wonder, how is the doctrine of the Resurrection harmed by donation of a lobe of a liver by a live, healthy donor? It seems similar in some respects to blood donation. After donating blood the body replenishes it fully in four to six weeks, and likewise, a human liver regrows to full size within a few weeks. (ref2)

In this case, the best reason not to donate is that it risks the donor’s health. Those who favor such donations state that MOST donors recover completely. Yet, healthy human life is not to be managed on a lottery system or law of averages. Of course, the reason not to obtain a liver from a brain dead patient is that he or she is not dead yet (see Post 5), and the cadaver has no liver to donate (see Post 16).

Does this seem cold-hearted? It is NOT wrong to speak out for the living, healthy person who may compromise his or her own health through organ donation. It is loving. Those who favor healthy people donating their liver lobes and other organs state as a good reason the growing numbers of sufferers on waiting lists. Laying guilt on tender-hearted people who had no role in the circumstance is wrong. Hailing them as heroes for risking their own health is flattery at its worst, an evil manipulation.

In some cases, family members desire to donate an organ or part to another family member. Sorting out this emotional dilemma is a task for the family and their pastor, but perhaps the pastor will have no concept of what is at stake. Again, we need those in positions of authority to become knowledgeable about bioethics and current medical practices. Laypeople need help to navigate the options and confusion.

At the least, for those suffering from diseases and poor health, Christians should advo-
cate for research that will regrow livers and other organs through non-ES cell therapy or other appropriate biotechnologies.

The idea that love for the doctrine of the Resurrection could be the best reason for not sharing cadaveric parts will be anathema to many. Yet, as A.W. Pink once said, “Motives inspire the believer which have no effect upon the unbeliever. Arguments and incentives move the regenerate which do not and cannot affect the unregenerate.”

Scripture is plain that a Christian must live up to what he knows. *(Phil 3:14-16)* Arriving at conclusions in the current environment is a monumental difficulty.

**References for hyperlinks:**

1 Stem Cell-Engineered Windpipe for Cancer Patients  
http://preview.tinyurl.com/28ocp4v

2 Living Donors Online  
http://www.livingdonorsonline.org/liver/liver5.htm

**ORIGINALLY PUBLISHED** 06-30-2014

_____

Added Winter 2019

A further study on The Resurrection and the Sanctity of Life can be found on SistersSite.org  
http://sisterssite.org/biotech/category/Resurrection
Illustrations

- **Human fetus** 10 weeks with amniotic sac
- **Parental Joy** by Karl (Kirill) Lemoch (1841-1910)
- **Infanticidio** (Infanticide) by Antonio García Vega
- **Homme-lièvre** (Man-hare) by Jean-Baptiste Coriolan
- **La Conscience** (d’après Victor Hugo) by François Chifflart
- **Death Has Breathed** by Jože Gorjup (1907–1932)
- **Portrait of Dr. Simarro at the Microscope** by Joaquín Sorolla y Bastida
- **Siyahkal** painting by Bijan Jazani (1938 – 1975)
- **La Resurrezione** (“The Resurrection”) by Pericle Fazzini
- **Still life with Bible** by Vincent van Gogh (October 1885)