“Same Conclusions” Equals “Basic Agreement”?

The two approaches resemble each other at times, at least in their conclusions. Both would admit that one can, for sufficient reason, pursue actions obviously good and not at all basically evil, even though some evil will result as a by-product. One may, for instance, give a needed pain-killer which will also, as a side effect, seriously depress a patient’s kidney function and thus hasten death. Both approaches would admit, moreover, that one may at times have to tolerate another’s doing a vicious thing because one has no reasonable way of preventing it: rape, abortion, slander, etc. Finally, both might agree that a concrete course of action, e.g., a medical procedure, previously rejected as immoral by moralists of an earlier age, does not necessarily conflict with Church teaching.

Thus a significant number of “exceptionless norm” moralists would justify (and other would dispute!) removing, intact, a nonviable fetus whose continued presence in the womb will soon cause the death of its mother — or would justify sterilizing a woman, at least as a last resort, to protect her from impregnation through rape.

“Proportionalist” moralists might very well come to the same conclusion but by a radically different line of reasoning, so different that, in the final analysis, one must say that the “exceptionless norm” moralist and the “proportionalist” moralist were not truly in basic “agreement” at all.

For not only is a concrete decision important, but also the line of reasoning behind it makes a great deal of difference. To use an example from another area of morality and another era — racial justice in the 1930’s — it makes a great deal of difference whether one says:

“Morally, I will not take part in lynching this black man because I know that he is an innocent person.”

or whether one says:

“I will not take part in lynching this black man because I know he is an innocent person and that there are not sufficient reasons in this instance to make an exception to the rule, valid in most cases, that no one should aim to kill an innocent person.”

The first argument appeals to an exceptionless norm; the second, to that kind of basically proportionalist approach officially rejected by the Church. Would it be irrelevant at this point to ask: If you had been a black man living in the 1930’s, which doctrine — the “exceptionless norm” or the “proportionalist” — would you have “felt more comfortable” with?

The “exceptionless norm” approach of the Church has occasionally stagnated in the past, but nonetheless also has steadily advanced over the centuries in clarifying which norms are exceptionless and which are not. The “proportionalist” approach, however, has failed to show why, in practice, even genocide or the torture of a child would in all situations necessarily have to be excluded. Indeed, its lynchpin doctrine is that no such exclusion is possible. Despite the pastoral sensitivity of “proportionalist” moralists, their challenge to think freshly about moral issues, and many correct courses of action which they approve, the Church has given every indication that their approach undermines our efforts to live in Christ Jesus. One thinks of T. S. Eliot’s words in Murder in the Cathedral.

The last temptation is the greatest treason: To do the right deed for the wrong reason.

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“By the Mouths of Children, Babes in Arms . . .”

Part I: “And a Little Child Shall Lead Them”

When the Lord Jesus, standing within the temple precincts in Jerusalem, spoke of little children, babes in arms, shouting their “hosannas,” He must have been referring to Psalm 8:3, and/or to the Book of Wisdom, 10:21. In contemporary America, it also redounds to the praise of the Creator that very tiny babes, voiceless and defenseless, have reminded us of their right to life.
In each of the cases to be mentioned below, there is a “right to life” message, and a specific additional lesson.

Three Babies

In the Baby Jane Doe case (born on Oct. 11, 1983 with multiple birth defects including spina bifida and hydrocephalus), the specific lesson is that parents can and should be presumed to be the best judges of the welfare of their children. After consulting with physicians, nurses, religious advisors and others, the parents decided initially to forego corrective surgery — surgery which would likely prolong her life, but not improve many of her disabling conditions. A pro-life attorney, unrelated to the baby and the family, brought an action in state court seeking the appointment of a guardian for the baby and an order directing the hospital to perform the surgery. As a result, the court ordered that surgery should be performed. This decision was reversed by the appellate court the following day. The decision of the parents that surgery should be performed. This decision was reversed by the hospital to perform the surgery. As a result, the court ordered the appointment of a guardian for the baby and an order directing the baby and the family, brought an action in state court seeking the parents decided initially to forego corrective surgery — the best judges of the welfare of their children. After multiple birth defects including spina bifida and hydrocephalus), “In God's name” to vindicate an infant's right to life. (p. 159). The specific lesson here is that when the facts are known and parental love is found wanting, other responsible agencies must come forward “In God’s name” to vindicate an infant’s right to life.

Then there is the Baby Fae case at the Loma Linda (Cal.) University Medical Center. This charming infant was born in Barstow, Cal., on Oct. 12, 1984, with a very rare and serious condition known as hypoplastic left heart syndrome. She was taken to the Loma Linda Center some 90 miles distant, where Dr. Leonard L. Bailey and his colleagues replaced the misshapen heart of this two-week-old infant with a matched-size heart of a seven-month-old female baboon. This historic surgery took place on Oct. 26, 1984. The specific lesson here is that mankind's God-given dominion over "all the things that move on the earth" (Genesis, 1:28) may yet unlock the secret of how to decrease mankind’s dependence on certain controversial organ-procurement programs (whether from the living or from human cadavers) now in effect in life-saving transplant procedures.

The Theological Issue — Transplants

From Animals to Humankind

With remarkable foresight, Pope Pius XII addressed the need of confronting this potential problem almost thirty years ago. In his allocution to a group of eye specialists on May 14, 1956, he said:

"It cannot be said that every transplantation of tissues that is biologically possible between individuals of different species is morally wrong. But it is still less true to say that any heterogenous transplantation which is biologically possible is not forbidden or is not objectionable. We must distinguish one case from the other and consider what type of tissue or what organ is to be transplanted."

“The transplantation of the sexual glands of an animal to man is to be rejected as immoral. On the contrary, the transplantation of a cornea from a non-human being to a human being would not raise any moral difficulty if it were biologically possible and were warranted. If one declared absolutely that transplantation is morally forbidden on the basis of diversity between species, he would logically have to hold that cellular therapy, which is being practiced more and more frequently, is wrong. Living cells are often taken from a non-human being where they exercise their function” (The Human Body, p. 374).

The Nov. 12, 1984 issue of Newsweek (p. 116) lists many uses of animal tissues for "spare parts" in medical procedures: “catgut” (actually sheep intestines) for surgical sutures, pigskin as a temporary graft for burn victims, patches cut from a cow's pericardium sac for repair of human heart valves, pig heart valves, etc. Since the sexual glands (ovaries, testicles) are primarily generative, it is not difficult to understand Pope Pius XII's prohibition against transplanting them from animals to humans so that animal gametes will not enter into human sexual reproduction. The Nov. 3, 1984 issue of Science News (p. 276) describes a recent 8-hour microsurgical procedure in a St. Louis, Mo., hospital, in which an ovary and a fallopian tube were transplanted successfully from a 28-year-old woman to her twin sister. One expert states (Ibid.) that such endocrine organs usually are not attacked as readily "by the host immune system." Based on such an observation, it is not too far-fetched to speculate on the technical feasibility of transplanting such organs (ovaries, testicles) from animals to humans, — precisely the type of transplantation rejected by Pope Pius XII.

The same Science News article refers also to "several early patients transplanted with chimpanzee or baboon hearts in the United States, South Africa and Britain." The longest reported survivor (before Baby Fae) lived only three and a half days. Experiments in transplanting animal kidneys in humans, however, met with moderate success. Nine patients were given chimpanzee kidneys at Columbia University, New York City, in 1963. In several of these recipients, the chimpanzee kidneys worked well for several months. One of the patients died nine months later of unrelated pneumonia, "but had a fully functioning kidney." A more extended recital of efforts at animal-to-human transplantation and of the difficulties encountered in the process is found in the above-mentioned issue of Newsweek (pp. 114-118).

Genesis 1:28 — Mankind’s Dominion

Over “All Living Things”

Lovers of the animal kingdom may well be apprehensive over the increased demand for animal organs and tissues as substitutes
for failing human organs. They rightly insist that all aspects of breeding, feeding, housing, grooming, hygienic care and, when necessary, terminating the lives of these animals be done in a humane manner. As well, any random killing of such animals without adequate preparatory compatibility-testing would constitute cruel and inhumane treatment.

Considering that animals often are used merely for companionship (almost never out of the house, spayed, etc.) or for financial gain (bull-fighting, cock-fighting, acrobatic “killer whales,” dog racing, etc.), apparently with general-public approval, there should be no objection if a humanely-treated animal is sacrificed to save the life or improve significantly the quality of life of a member of God’s human family. Just as animals can become devoted and loyal to their human masters with all indications of living a fulfilling animal life (for example, a “seeing eye dog” giving his/her eyes and life to a human in need), so it is well within the context of Genesis 1:28, if humanely-treated members of the animal kingdom are sacrificed when necessary for the physical welfare of members of God’s human kingdom who have “dominion over . . . all living things that move on the earth.”

A comprehensive theological evaluation of Dr. Bailey’s stunning medical breakthrough in the Baby Fae case must include answers to questions such as: Were the parents of Baby Fae given a realistic explanation of other reasonable and available alternatives to the baboon-heart implantation? Was the information given to the parents adequate as a basis for a valid “informed consent” option? These questions will be discussed in a subsequent article on the Baby Fae Case.

As of this writing, only one of the distinguished trio of “Babes in Arms” who witnessed to the universality of the right to life are still among the living. Baby Doe of Bloomington, Ind. (1982) was the victim of parental neglect. Baby Jane Doe of New York State (1983) eventually did receive surgical treatment and is at home with her parents. Baby Fae made medical history by surviving for three weeks with an implanted baboon heart. Her gallant struggle ended on Nov. 15, 1984 at 9:00 P.M. In view of the important lessons projected in the fleeting lives of each one of them, it cannot be said that they lived and died in vain.

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