

Jewish Perspectives on Everyday Medical Dilemmas







# Course Rationale

Dr. C. Everett Koop was surgeon-in-chief of Children's Hospital in Philadelphia and the lead surgeon of a distinguished medical team that faced a difficult, if not impossible, decision.

A set of newborn twins was conjoined from the shoulder down to the pelvic region. They shared a single heart. They would both die unless surgically separated, but only one of the babies could have the heart and thus possibly survive. Is such a surgery ethical? Could he sacrifice one baby in order to grant the gift of life to the other? If yes, which twin should he save? Who is qualified to answer these questions?

Dr. Koop told the surgical team: "The ethics and morals involved in this decision are too complex for me. I believe they are too complex for you as well. Therefore, I referred it to a rabbi on the Lower East Side of New York. He is a great scholar, a saintly individual. He knows how to answer such questions. When he tells me, I too will know."

We all want to do what's right. Usually, we intuitively identify the proper and ethical path. Sometimes, however, we encounter scenarios that are multifaceted and ethically complex. Dilemmas that pertain to health, mortality, and medicine are especially challenging, and are exacerbated by the high stakes involved: Life and death often hinge

on the decision. Moreover, with the advent of modern medicine, yesterday's science fiction is today's reality and standard. This incredible blessing, however, is accompanied by the proliferation of many new ethical quandaries.

Are we obliged to prolong life even at the cost of terrible suffering? Should we legalize the sale of organs, such as kidneys, to save the lives of transplant patients? May a woman with a multiple-fetus pregnancy opt for fetal reduction, thus forfeiting the lives of some to possibly save others? When it seems that every available option is morally questionable, how do we decide?

Jewish law draws upon ancient principles and paradigms to answer such questions, and guides us through the various mazes of medical decision-making. The interactive lessons of this course will examine some contemporary medical and health-related dilemmas, compare the approaches of secular law and Jewish law, and shed light on the core differences that underlie the different perspectives.

Participants in this course will discover the value of a perspective that considers the welfare of both body and soul, that balances lofty ideals with practical realities, and that offers much-needed clarity during times of pain and confusion. Moreover, the principles upon which these values are predicated are key to leading a life of serenity and meaning, regardless of one's state of health.



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# **Course Overview**

### Lesson One

An Ounce of Prevention: BRCA, Genetic Testing, and Preventive Measures

We all endeavor to take preventive measures and protect our health, but we often question whether we do enough. How do you draw the line between vigilance and panic?

In recent years, scientists started identifying hereditary gene mutations that are responsible for particular diseases. Certain mutations, called BRCA, are linked with significantly high risk of certain cancers, most notably, breast cancer and ovarian cancer. Women with a BRCA mutation have as high as an 87 percent chance of getting breast cancer and as has as high a 44 percent chance of developing ovarian cancer. To protect against these hazards, several preventive options are available. Surveillance can detect the cancer in its early stages when it is possible to be treated effectively. The drug tamoxifen can be used to reduce the breast cancer risk. Some have opted for a bilateral mastectomy and an oophorectomy.

Sadly, the instances of BRCA mutations are statistically higher in Ashkenazi Jews. This brings us to the following questions: If a woman were BRCA-positive, would any preventive measures be considered obligatory? Would Jewish law oblige women to test and determine if they are BRCA-positive so that they can know if they need to engage in prophylactic measures?

We care for our health because we desire longevity and a better quality of life. Jewish philosophy would add that it is a duty to do so. But how far is one required to go in achieving this end?

This lesson explores Jewish perspectives on preventive medicine and public health. It will raise awareness about an important health matter and may potentially save lives.

#### Lesson Two

End-of-Life Dilemmas: Prolonging Life vs. Prolonging Death

Resuscitate? Do not resuscitate? How does one decide what to inscribe in their living will? The value of life is immeasurable, but is the same true for its increments? Are the medical advances some see as life supporting in fact just prolonging death?

Nowadays, it is common for people to express advance directives about whether they would prefer living at all costs, as traumatic as that may be, or to be left to die in peace. Others appoint a healthcare proxy to act on their behalf, if they are one day unable to express their own wishes. How can one issue advance directives that are in consonance with lewish values?

This lesson discusses the important end-oflife decisions that we need to make today, and offers Jewish perspectives on dying with dignity.



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### **Lesson Three**

## Complications in Pregnancy: Aborting One Life to Save Another

It is becoming more common for women with multiple fetus pregnancies to undergo fetal reduction for financial reasons and other non-health-related concerns. Even after Roe. v. Wade, some question the ethics of such a decision. What would Jewish law say? Is the fetus considered a life?

Couples undergoing fertility treatment are often advised to reduce the number of fetuses in order to save a high-risk pregnancy. If no action is taken, the entire pregnancy may be lost. May we end the life of one or two to save the lives of many? This question is analogous to the classic lifeboat dilemma: Can a few passengers be thrown overboard to save an overloaded boat that will otherwise sink? Is there any difference in this regard between fetuses and born human beings?

This lesson discusses Judaism's view on the status of the fetus, and the ethics of choosing one life over another.

### **Lesson Four**

#### Sanctity in Death: Autopsy and Medical Dissection

Everyone acknowledges that life is sacred. Jewish sources add that there is also sanctity in death. A corpse, therefore, ought to be handled with reverence and interred as soon as reasonably possible.

But a human cadaver can be very valuable to humanity. It can inform us about the cause of death and the nature of disease. It can aid in exonerating the innocent or in convicting the guilty. It prepares the next generation of health professionals, helps scientists judge whether advances in technology are safe, and ensures a high standard of care at our medical institutions.

Many states allow medical schools to use unclaimed cadavers for anatomical dissection. Is this ethical? Would Jewish law allow one to voluntarily donate his or her body to science? Is it ever moral to perform an autopsy over a family's objections? When would Jewish law encourage that a postmortem examination be performed? Is there a difference if the autopsy is limited and minimally invasive?

This lesson will examine how Jewish law balances the dignity of the dead with the needs of society.









## **Lesson Five**

## Confronting the Organ Shortage: Should the Sale of Organs Be Legal?

Doreen Flynn has three daughters who suffer from a blood disorder that requires a bonemarrow transplant. Flynn challenged the National Organ Transplant Act, which forbids compensating an organ or bone marrow donor, and sought to have the right to pay donors for the bone marrow needed for her daughters. The U.S. Court of Appeals for the Ninth Circuit has recently agreed with her claim.

Should the sale of bone marrow be legal? What about the sale of kidneys? Currently, prospects for those in need of organ transplants are grim. For every 100,000 transplants needed each year, only 10,000 are performed. Permitting the sale of organs might significantly increase the number of organs available for transplant, potentially saving many thousands of lives.

But do we want to live in a society in which people are selling body parts? Does that undermine human dignity? Some argue that if a market in organs were to develop, ability to pay would determine who would have access to organs, while economic need would determine who would be motivated to sell theirs.

Should we promote the great lifesaving potential by legalizing the compensation of organ donors? Or should we be wary of its implications regarding human dignity and equity? Is there perhaps a balance or some viable form of regulation that would satisfy our conflicting moral values?

## Lesson Six

No Uterus? No Problem: The Ethics of Uterine Transplants

Would you part with your womb?

Finally, an unprecedented miraculous cure for want-to-be mothers: According to a Turkish hospital, Derya Sert became pregnant after being the first woman to receive a womb from a deceased donor. And Swedish surgeons say they have performed the world's first mother-to-daughter uterine transplant.

Until now, surrogacy has been the only solution for women without a healthy womb. But some women prefer to avoid using surrogates because of the hardship and legal quagmire that is often involved. The uterus transplant, one of the most cuttingedge developments in reproductive medicine, offers a promising alternative.

But every innovation needs to be judged judiciously. Have researchers fully assessed the risk to both mother and baby appropriately? Or are they rushing to be the first to popularize this tremendous breakthrough? Should much-needed funding and expertise be allocated to a procedure that is not lifesaving, and for which a viable alternative exists? Should our communities encourage women to donate and receive wombs?

This lesson addresses fascinating Jewish and ethical concerns surrounding this new advancement, as well as other non-vital-organ transplants and surgical procedures.