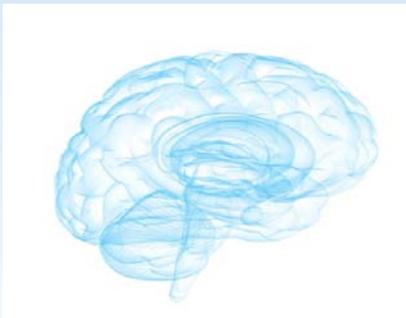




## Does the Catholic Church Have Doubts about Brain Death?

**"The fact remains that the Catholic Church to date has expressed no official doubts about brain death, emphasizing instead that a health care worker can use neurological criteria as the basis for arriving at 'moral certainty' that death has occurred."**



The Catholic Church has long acknowledged the role of the medical professional in declaring death. It is the proper competency of medicine, not theology, to identify reliable signs that death has occurred. The hardening of the body known as *rigor mortis*, for example, is a reliable medical indicator that death has occurred. When the heart permanently stops beating and the lungs permanently stop functioning (cessation of cardio-pulmonary function), medical professionals recognize these signs as another reliable way to assess that death has occurred. The complete and irreversible loss of all brain function (commonly known as "brain death,") is yet another reliable way medical professionals determine that a patient has died.

In an August 2000 address, Pope John Paul II took up the particular question of brain death and concluded:

"The criterion adopted in more recent times for ascertaining the fact of death, namely the complete and irreversible cessation of all brain activity, if rigorously applied, does not seem to conflict with the essential elements of a sound anthropology."

In other words, he affirmed that the Church does not see any fundamental conceptual problems with the idea of brain death. The complete cessation of all brain function (brain death), is also referred to as "neurological criteria" for determining death, to distinguish it from the classic "cardio-pulmonary criteria" used for centuries.

The medical profession initially accepted the notion of brain death not because it was looking to procure organs for transplant, as is sometimes supposed, but because of a new situation that arose from the burgeoning use of ventilators, with some patients becoming permanently "ventilator-dependent." As early as 1959, well before widespread organ transplantation was possible, Drs. Mollaret and Goulon wrote in the *Review of Neurology* about a subgroup of these ventilator-dependent patients who had suffered catastrophic brain injuries. This could result in a definable condition from which recovery was impossible ("a state beyond coma"). Patients in this state had died, even though ventilators could continue to oxygenate their bodies and preserve organs for a limited period of time. Following the publication of a pivotal 1968

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report detailing this kind of situation by a committee at Harvard Medical School, the notion of brain death gained consensus and became widely accepted within both the medical and legal communities.

The Catholic Church likewise acknowledged these medical developments and has never expressed any serious conceptual reservations about brain death in the years following the Harvard report. Today, medical professionals remain in broad agreement that the complete and irreversible cessation of all brain activity serves as a reliable indicator that a person has died. Major medical societies such as the American Medical Association and the American Academy of Neurology have issued official statements affirming this.

Nevertheless, a certain number of Catholics today insist that brain death is not really death. One moral theologian, for example, recently expressed doubts "that ventilator-sustained brain dead bodies are corpses." Several Catholic physicians have raised similar concerns. As long as thorough and accurate medical testing is performed, however, the Church continues to support the determination of death based on neurological criteria. In addition to Pope

John Paul II's address mentioned earlier, a number of other Church documents and declarations affirm this. These include statements from the Pontifical Academy of Life, the Pontifical Council for Healthcare Workers, and the Pontifical Academy for Sciences, among others. In a 2011 article on the Catholic News Agency website, Dr. John Haas argues that the number and common thread of these ecclesiastical statements in recent years indicates that the teaching authority of the Church has "generally resolved" the question of the acceptability of relying on neurological criteria as a means for ascertaining death.

In the face of clear church teaching on this issue, Dr. Haas further observes how it is not responsible for Catholics to generate uncertainty by openly and publicly disputing the suitability of neurological criteria for determining death. Such speculations can "cause confusion in the minds of the faithful and unsettle consciences." If consciences become unsettled on this matter, the practical ramifications can be far-reaching: consent to harvest organs is not given, transplants of such organs do not occur, and lives that could validly be saved by such transplants are in-

stead lost.

The fact remains that the Catholic Church to date has expressed no official doubts about brain death, emphasizing instead that a health care worker can use neurological criteria as the basis for arriving at "moral certainty" that death has occurred. Meanwhile, the Church continues to recognize the generous nature of freely-chosen organ donation, an act Pope John Paul II once called "particularly praiseworthy" and an act which can offer "a chance of health and even of life itself to the sick who sometimes have no other hope."

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