

INTERVIEW

Seifert: "Brain death does not exist: I explain you why"

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After the discovery of the instrumental use of the new definition of "brain death" for organ harvesting and the interviews with doctor Byrne, who explained the history of this new criterion launched at Harvard in '68 along with the nefarious consequences

produced, the known Austrian philosopher Josef Seifert, Benedetto XVI's friend and former member of the Pav, explains the scientific error behind it and why Catholics are not required to endorse this "false death".

Prof. Seifert, you were one of the first within the Catholic Church to raise objections to the criterion of "brain death". Why?

From the first moment on, when I heard of this new definition of death during the Essener Conversations on State and Church, I was convinced that the new definition or the new criteria of death in terms of irreversible dysfunction of the brain were gravely erroneous. My reasons were and are very simple ones that anybody can easily follow:

1. One year after the first successful heart-transplantation, the pragmatic interest in this re-definition of death in order to obtain organs was obvious and unabashedly expressed (in the Report of the Ad Hoc Committee of the Harvard Medical School to Examine the Definition of Brain Death: 1968). The intention to gather organs obviously motivated the Harvard commission to redefine death. The Harvard report did not give one single reason, besides two pragmatic ones, why the "brain dead" patient was dead. There are thus many signs and proofs that the "brain death definitions" were chiefly motivated by usefulness, not by truth. The very fact that the Harvard committee gave only two pragmatic reasons for this redefinition of death makes it deeply suspicious. For the convenience of declaring somebody dead for a utilitarian reason or because of "a need to have his organs" does not make him dead. But there were many more reasons for my doubt:

2. How can one declare "dead" a person whose heart is beating, whose respiration (though not the spontaneous breathing that can be replaced by ventilators that pump air into the lungs) is fully functional in lungs and all body-cells and who shows many other signs of life? How can one declare a "brain dead" mother dead, who carries a baby in her womb and gives birth to the baby nine months after conception? Forcing her disconnection from a ventilator even kills both her and her baby. How is a human body "dead" that has reflexes, can be nourished and absorb fluids, show the "miracle" of metabolism and transformation of food into his own body-substance, can resist diseases by his functioning immune system, keeps a normal body temperature, shows proportional growth (in a chronic brain dead boy TK who was supposedly "dead" for twenty years)? Does it not go against any evidence of life to claim that a person whose body shows countless marks and signs of life, passes through puberty, is pregnant and gives birth to a living child, is dead? When has ever a corpse given life to a baby?

3. A bio-philosophical argument in favor of "brain death" claims that without a functioning brain man is nothing but a collection of disassociated cells and organs. Only

the brain gives unity to the body. How can one attribute to the brain, a relatively late-formed organ preceded during many weeks by the living human organism whose brain it is, the role of central integrator or of the only real life-bearing part of the body? A high degree of integrated human life obviously precedes brain-formation. The brain is the product of this integrated and developing human being, neither its cause nor its single bearer.

4. The term "brain death" is extremely ambiguous and means entirely different things: 1) the death of an organ, 2) The Death of the living person because of a dysfunction of his brain. Besides, also the physical state of the death of the organ is wholly ambiguous: 1a) brain-stem death, 1b) upper brain death (cerebral death), 1c) whole brain death, etc. None of these extremely different concepts as to what constitutes "death" has good arguments in its favor. Moreover, as long as complete confusion reigns regarding which of these "brain deaths" is supposed to be human death, and as long as total confusion and uncertainty exists with respect to the reasons for the respective claim of death, any such unclear definition, confused in content and with respect to the reasons why it is human death, it is completely immoral and violates human rights to allow, on wholly shaky grounds, the extraction of unpaired vital organs and thereby really, or at least potentially, killing a human person.

5. The human person (soul) has a substantial being and cannot be reduced to the human ability to use, in an empirically demonstrable way, his intellect or to be conscious. Therefore many arguments of the "brain death" defenders that argue from the alleged cessation of consciousness, thinking and sensation that a person is dead are based on a wholly wrong materialist or actualistic anthropology that identifies "to be a person" with "acting as a person". Also when we sleep or fall unconscious we are a person, even though we cannot act as a person.

6. The violent reactions of so-called dead patients, when their organs are extracted, analogous to the violent reactions of embryos when they are being aborted, as the movie "the silent cry" documented, prove that it is at least probable that the "brain dead" persons are sentient and that these reactions are not "Lazarus"-effects (besides: Lazarus was living) in a corpse.

Saint John Paul II in a speech delivered during the international congress of the transplantation society, in the year 2000, spoke of "brain death" as a criterion commonly held by the international scientific community to which the Church did not object. Why according to you? Are catholic people obliged to follow it?

Why the Pope delivered this speech I do not know. It may have been that he gave unfounded credit to the members and leaders of the Pontifical Academy of Science, who

had twice, in 1984 unanimously, and in 1989 in a large majority, opted for acceptance of the brain death definitions. (Professor Alan Shewmon, a pediatric neurologist of great fame and maybe the leading medical expert on the question of “brain death”, began to doubt at this meeting the correctness of his 1985 and 1987 whole-sale defense of “brain death”, and I, who was invited by PAV as an expert, strongly opposed it). However, the favorable position of the Pontifical Academy of Science (PAS) in favor of identifying actual human death with “brain death” has absolutely no value, and the PAS that has defended many philosophical, moral theological and other errors, has zero magisterial authority. The Vice-President, and later President, of the Pontifical Academy for Life, Mons. Elio Sgreccia, a man of broad knowledge and much wisdom, had likewise not accepted the many voices (of D. Alan Shewmon, of Prof. Cicero Coimbra, of myself and others) that had criticized this redefinition of death. Thus, he might also have influenced the Pope’s statement. The address of John Paul II to the Address to the Transplantation Society is not properly speaking a Church “document” that obliges to consent, especially not with respect to empirical medical judgments contained in it. Therefore, we are not obliged to accept this discourse of the Holy Pope John Paul II in its entirety. We only have to accept the magisterial statement that we are allowed to extract unpaired vital organs only from certainly dead persons (ex cadavere, as Pope Benedict XVI formulated). However, we neither have to consent to the obviously incorrect statement of John Paul II in this speech that there is a universal consent in the medical community that “brain death” is actual death, nor do we have to agree that it is therefore legitimate to extract vital organs from patients declared “brain dead.” For the first one of these statements simply does not correspond to the fact that there is a considerable (and increasing) number of medical professionals and first class scientists who do NOT agree with brain death definitions. The second one is drawn by the Pope as conclusion from the incorrect claim of this universal medical consent. However, even if there existed a universal consent of the medical community, brain death definitions or criteria do not become true by majority consent. The doctrinal statement to which we are bound to adhere consists only in the necessity to be sure that a person is dead before one extracts unpaired vital organs. With this statement that is a magisterial one, we have to agree for philosophical and, as Catholics, also for religious reasons. The rest are only medical or philosophical statements that persons whose brain does not function are dead, and we have absolutely no obligation to agree with such statements, particularly when we see that they are false. Besides, Pope John Paul II had serious doubts regarding the truth of his address, and therefore asked in 2005 for another meeting of experts in the Pontifical Academy of Science (including myself) and the participants in this session of the Pontifical Academy of Science in a large majority, and with excellent

reasons, rejected the equation “brain death is death”. The texts of this meeting had been ready for print, the proofs of the book corrected, but then this volume was suppressed by PAS, and another meeting called by PAS, in which a majority (with some important voices against it) was in favor of brain death. However, neither clever machinations nor the opinions of majorities matter where truth is at stake. Prof. Shewmon has explained this answer to your question excellently in “You die only once. Why Brain Death is not the Death of the Human Being. A Reply to Nicholas Tonti-Filippini”, *Communio* 39, fall of 2012, pp. 422-494. Likewise, Dr. med. (DM) and Dr. theol. Doyen Nguyen has explained this in her excellent article that has received highest praise: “Pope John Paul II and the Neurological Standard for the Determination of Death: A Critical Analysis of his Address to the Transplantation Society.” *The Linacre Quarterly* 84(2): 155-186, 2017.

It is said that the criterion of life has always been the one of the integrated functions of the body, without which we can only speak of the functioning of certain organs or cells. In short, the body of a person with a beating heart, whose brain and brainstem were totally damaged, would be a mass of biological living material. How do you justify your position in the face of a theory (that of homeostasis and of the integrative unity of functions) espoused by all human physiology and science since Aristotle to judge the presence of life and soul in a body?

Obviously, there is a distinction between the life of the organism as such (or as a whole) and the life in a single hair cell or skin-cell, or liver, preserved in a refrigerator after a deadly accident. But the question is precisely whether the brain is the central integrator and whether all integral life-activities depend on a functioning brain. This is obviously false for the following reasons: 1. Many integrated life-functions (proportionate growth, immune system, respiration in lungs and cells if ventilation is continued, blood flow, maintenance of body temperature, and many others) are observed in the “brain dead” patient. The claim that the brain is the central integrator has been utterly destroyed scientifically by Shewmon and this has been accepted by the American President’s Council on Bioethics and the German Ethical Commissions. 2. The integrated wholeness of the human organism precedes the formation of the brain and cannot suddenly be claimed, after the brain developed from the unified life of an organism, to depend on brain function.

What is the proof that the brain is not the center of integrated vital functions, so in the case of “brain death” the human person can not be said to be dead?

As stated above, it is clearly NOT the case that “brain death” implies the loss of

integrated human life. In cases of “chronic brain death” (one case of over 20 years “living in brain death”) integrated human life can continue for decades. That a “brain dead” patient, if ventilation is withdrawn and his muscles and inhalatory system cannot inhale air on their own, WILL SOON DIE, does not imply that he “IS DEAD”. On the contrary, he can only die soon because he is still alive: corpses do not die. The spiritual human soul is not “located” in the “brain” or in any single part of the body. There is no dogma of the Church whatsoever that teaches that the soul leaves the body of a living human body when the brain does not function. Therefore it is not heterodox to state that the soul lives in a body until man’s natural death. Rather the opposite is heterodox because the Church declared as a dogma that man has a single soul (not three different souls: a vegetative - plant - soul, a sentient animal soul, and a rational soul). Therefore, as long as any integrated vegetative life or sentient life is present in man (both are clearly evidenced in “brain dead” patients) the single human soul that bestows all levels of life on the body, is present.

If not the integrated functions made possible by the brain, what allows a body to be such that it can still incarnate the soul?

The integrated wholeness of human life, as mentioned, does not depend on the function of the brainstem alone. Professor Shewmon has shown in a famous article that we can make two lists of “integrated life functions”: one of them depends on the functioning brain stem; the other one not at all. He has shown that his own earlier defense of brain death definitions was erroneous because it would be scientifically totally arbitrary to claim that if the integrated functions on list 1 are present, the person lives, if only those on list 2, he is dead.

What did Benedict XVI think of organs donation because it is said he agreed with John Paul II's speech, but then he erased the definition of brain death from the drafts of catechism and in his speeches he supported only the ex-cadaver organ donation. Have you ever had the chance to confront him or to know what he think about it?

I have spoken with Pope Benedict about this when he was still Cardinal but he only told me that Professor Spaemann, like myself, tried to convince him since a long time to reject the "brain death definitions" as invalid definitions or criteria for death. I also wrote to him about this after he had become Pope. But he neither told me nor wrote me something clearer than what he said in his famous speech as Pope that (vital, unpaired) organs must only be taken "ex cadavere" (from a corpse). This statement and the facts you mentioned indicate clearly that he was not uncritical with respect to "brain death definitions".

What criteria should be used to ascertain the end of the integrated functions of the body and therefore the death of the person if not the ability of the brain to guarantee the unity of the integrated functions of the body?

I would answer: Only the traditional, millennia old criteria that correspond to ordinary common sense, of the total collapse of all vital functions including heartbeat and respiration. But also to those who defend extraction of vital organs immediately after cardiac arrest from "non-heart-beating patients," I would object: As long as resuscitation is possible, although it is in some cases not medically and morally required, we cannot declare a person dead, as long as we could "revive him". For that long there must still be life and his soul "in him". The argument that he does no longer need his heart in his situation as "non-heart-beating patient", is not convincing. For extracting his heart, one might still kill him and terminate the life that is still in him and could be "resuscitated".

In your opinion would it be permissible, however, after accurate diagnosis of the complete damage of brain and brainstem, to donate voluntarily organs (like the heart) that would end the life of a person in irreversible coma - as a gesture of altruism?

No, because I believe that this would be committing suicide or murder - even though for a noble cause. But even if we love another human person more than ourselves and are willing to die for him or her, like St. Maximilian Kolbe, we are not lords over life and death of man, neither that of another person nor our own. We can take the place of an innocent victim of murder and die so that another person live, like Father Kolbe, only if another person commits murder, but we cannot ourselves demand that someone kills

us. Not to respect this would be to commit suicide or, more precisely, to ask another person (who would have to extract our organs) to become murderer. The good cause and intention do not justify this act.

When is it possible to donate organs if the criterion of brain death is never admissible?

If “cerebral death” is not actual death, then both trafficking and donating vital and unpaired human vital organs extracted from a “brain dead” person is wrong because it means killing him. This does not exclude that we could decree that we are willing to donate paired organs when we will be clearly found to be in a state of a complete and irreversible dysfunction of the brain. For donating these organs does not kill us and we could also donate them during our life. However, I would not recommend this, because sometimes the diagnosis of “brain death” is mistaken and if we in that case wake up without one of our kidneys, both of our eyes, etc. it might be an unpleasant and unintended thing. Besides, if we decree to donate only our paired and non-vital organs, chances are that the hospital will not read our living will well enough, extract also our unpaired vital organ of the heart, and thereby kill us altogether.