

The Case of Terri Schiavo: Mercy or Murder?

Recently our nation has been torn over an ethical question raised over a woman named Terri Schiavo, who suffered damage to her brain in 1990 when her heart stopped briefly due to a supposed chemical imbalance related to an eating disorder. For seven years, the courts have been tied up in a legal dispute over Terri's fate, until recently, when Terri's husband brought her condition to a national level of public interest when he decided to exercise his custody rights over his wife and have her feeding tube removed, so that Terri, being unable to swallow, will starve.

As I write, the order to remove the feeding tube has been carried out, and Terri is eight days without nourishment. She is not expected to survive the weekend. Terri's parents on the other hand have asked that her feeding tube be reinstated in what they call an effort to preserve her life, an appeal that has been defeated numerous times.

The ethical issue raised is whether removing the feeding tube is an act of mercy, wherein her husband says that Terri would not want to live in such an incapacitated state, or an act of murder, wherein a living, yet debilitated woman is being systematically and legally killed.

DEFINING OUR TERMS

To put it in broader terms, the debate is about the sanctity of life in what is commonly called euthanasia. Our English word "euthanasia" comes from two Greek words, *eu* – meaning "well or good," and *thanatos* meaning "death" – a good death.

The euthanasia question is this: is killing ever morally permissible or justifiable, in order to remove a person's suffering. Or to state it more simply, is there a difference between killing someone and letting him or her die?

Euthanasia itself is not a modern day dilemma. It reaches back into the history of our world, to the days of Plato and the Stoics, who favored it in cases of terminal illness and incurable disease. Euthanasia was brought to the forefront several years ago by the emergence of Dr. Jack Kevorkian, or as he was nicknamed, "Dr. Death" for his assisted suicide procedures.

Euthanasia practices differ, depending on a certain number of variables. For instance, some euthanasia is practiced at the voluntary request of the patient who knows he or she is going to die, and asks for the permission to be put to death. Other times, a person may be put to death involuntarily – without his or her permission, but based on the request of a legal guardian. The latter is Terri Schiavo.

Second, euthanasia practices differ depending on the measures that are taken to end a life, and whether they are active or passive. In cases of active euthanasia, certain actions might be taken to purposefully end a life, such as the ingestion of lethal drugs. This differs from passive euthanasia in which certain measures are withheld in order to sustain a life, such as removing a feeding tube. The latter is Terri Schiavo.

Third, euthanasia practices differ depending on who carries out the act, whether the person requesting death or by someone else. The distinction is whether the death is self-inflicted or not. The latter is Terri Schiavo.

Finally, euthanasia practices differ in that some allow a suffering patient, who is *without the possibility of success* in medical intervention, to die naturally. In this case medical help is

sought to meet basic needs but not hinder death which is inevitable. Other forms seek the alleviation of a person's excruciating pain through medical technology in order to accelerate a person's death. Still other forms include the deliberate removal of certain persons who are no longer considered socially useful, including those with severe retardation, hardened criminals, and the like. Some would insist on option 2, while others believe the third is Terri Schiavo, because she does not appear to be in pain.

A clinical definition of brain death will also prove helpful, as suggested by a committee of the Harvard Medical School:

The committee defined brain death – irreversible coma – by four criteria. They are 1) unresponsivity and unresponsivity (no stimuli of any sort evoke any kind of response); 2) no movements or spontaneous breathing for at least an hour; 3) no reflexes, and fixed dilated pupils; 4) flat brain wave (flat EEG) for at least 10 minutes, preferably 20. All four must apply, and they must still be true of the patient 24 hours after first tested (cited in Feinberg, p. 123).

Terri Schiavo is not a candidate for brain deadness, but in contrast to these criteria is quite responsive to stimuli, moves quite frequently, has significant reflexes, all of which indicate significant brain function. She is very much alive, though she is incapacitated.

A BIBLICAL RESPONSE

While the Bible does not specifically address the issue of euthanasia as such, we are given clear principles from the all-sufficient Word of God to govern our thinking on such matters.

Human life is sacred, because men and women are made in God's image.

The Scriptures are clear from the beginning that man is the image bearer of God (Gen. 1:26, 27; 5:1), which means that he or she can function on a spiritual, intellectual, moral, emotional, and social level. God is the Giver and Sustainer of life (Col. 1:16-17), and therefore the reason murder (not killing – such as in war, capital punishment, etc.) is forbidden (Exod. 20:13) is because it is a marring of the image of God in man (Gen. 9:6). Even a person disfigured or debilitated still bears the image of God on himself or herself, however fallen that image might be by the effects of sin.

Christ holds the keys of life and death.

The Scriptures present God Himself as the One who holds the prerogative to give and take life. In addition, the Scripture teaches that God is sovereign over the time of a person's life and death, which is unalterably predetermined and fixed.

Revelation 1:17-18, "Do not be afraid; I am the first and the last, and the living One; and I was dead, and behold, I am alive forevermore, and I have the keys of death and of Hades."

Job 14:5, "Since [man's] days are determined, the number of his months is with You; and his limits You have set so that he cannot pass."

Psalms 139:16, "...in Your book were all written The days that were ordained for me, When as yet there was not one of them."

Ecclesiastes 3:2, "[There is] a time to give birth and a time to die..."

James 4:13-15, "Come now, you who say, 'Today or tomorrow we will go to such and such a city, and spend a year there and engage in business and make a profit.' Yet you do not know what your life will be like tomorrow. You are just a vapor that appears for a little while and then vanishes away. Instead, you ought to say, 'If the Lord wills, we will live and also do this or that.' "

The implication of these verses is that God is the One who possesses the right to give or take life. No one may end a life unless that is what God also has willed. Euthanasia rules out the possibility that God may yet choose to heal, that He may choose to allow doctors to discover a previously unknown cure for a disease in the advancement of technologies. It also fails to account for a doctor's finite and limited understanding, who may yet discover an error in his diagnoses for the otherwise terminal patient. Only God is omniscient.

Add to that the widespread confusion and debate over the uncertainty of the medical profession about chemical imbalances:

Peter Breggin, M.D. (1997), was formerly a teaching fellow at Harvard Medical School and full-time consultant with the National Institute of Mental Health. As author of Brain Disabling Treatments In Psychiatry, he declares that "there are no known biochemical imbalances in the brain of typical psychiatric patients" (p. 5b).

Dr. William Wirshing (1999), a researcher and professor of psychiatry at UCLA, stated to a room full of psychiatrists that "we have been lying to everyone for years concerning the chemical imbalance model." No one in the audience challenged him. In an article approved for continuing education by the American Psychiatric Association, the author states, "We don't know how psychotropic medications really work" (Khan, 1999).

Dr. Ty Colbert, President of the Center for Psychological Alternatives to Biopsychiatry: "Believe it or not, it is freely admitted even within the ranks of psychiatry that no conclusive evidence exists to show that any form of mental illness is biologically caused..."

The medical community has yet to offer any credible evidence that overturns even their own doubts about chemical imbalances, which doctors say are at the root of Terri's condition. This makes their diagnosis guesswork at best. That is not to say something is not wrong with Terri, or that her brain is not injured. Certainly it appears to be, but a great deal of concern exists

still over the accuracy of her diagnosis. Case studies have emerged recently by those who would give testimony about their recovery from such conditions as Terri Schiavo's, and reports that demonstrate how little is really known about a person's mental capacity in these conditions. Hardly the kind of substantial support needed for such a permanent decision as death.

Euthanasia is irreversible and sends a person into eternity.

One must consider in light of the above, that death is final. Though under the strict control of divine sovereignty, death is a permanent reality, until the future resurrection. A person who leaves this world immediately enters into eternity and the consequences of his or her life (Heb. 9:27). If this person is not a believer in Jesus Christ, the relief of suffering that is so eagerly sought does not come but instead the suffering intensifies. To send an unbeliever from this world into eternity is to send them straight to hell. Yet it is the secularized imagination that justifies the thinking that to end a person's earthly suffering happens at death. If that person does not know Christ, their suffering has only just begun and he or she would only wish their torment was at it was before.

Without knowing a person's heart, the best indication we have about Terri is her spiritual advisor, Monsignor Thaddeus Malanowski, a Roman Catholic priest of the Diocese of St. Petersburg. If that is any indication of Terri's theology, then we are likely to conclude she is not a believer, and therefore will not enter the kingdom of heaven, Roman Catholic Theology being a works-based system of meritorious salvation. That conclusion however is ultimately between Terri and the Lord.

In addition, death, we must understand, is an intruder into the original created order and only exists because of sin (Gen. 2:17; Rom. 6:23). Dying itself has no glory. The Bible calls it an enemy to man (1 Cor. 15:26), which will be defeated at the last. We should not revel in death, we should lament because it is an ever present reminder of the dreadful effects of sin. To choose death is to go in the wrong direction.

Christians are the only ones with hope in the face of death (Jn. 11:25-26; 1 Thess. 4:13-18), and actually describe it as gain, because it ushers us from this sin-cursed earth and into the presence of Christ (Phil. 1:21). And yet when discussing his ache for Christ, the apostle Paul spoke of "remaining on in the flesh [as] more necessary" than taking personal steps to hasten it. Ultimately then, it is God who decides, even in the life of a person eager to leave this world and venture into glory of heavenly bliss, when that time is appropriate.

Love seeks the best interest of another at whatever the cost and sacrifice.

Jesus affirmed the sanctity of life in His parable of the Good Samaritan, wherein He described love as overextending oneself in order to care for a person who would otherwise die, were it not for the mercy of intervention.

Luke 10:30-37, "Jesus replied and said, 'A man was going down from Jerusalem to Jericho, and fell among robbers, and they stripped him and beat him, and went away leaving him half dead. And by chance a priest was going down on that road, and when he saw him, he passed by on the other side. Likewise a Levite also, when he came to the place and saw him,

passed by on the other side. But a Samaritan, who was on a journey, came upon him; and when he saw him, he felt compassion, and came to him and bandaged up his wounds, pouring oil and wine on them; and he put him on his own beast, and brought him to an inn and took care of him. On the next day he took out two denarii and gave them to the innkeeper and said, "Take care of him; and whatever more you spend, when I return I will repay you." Which of these three do you think proved to be a neighbor to the man who fell into the robbers' hands?' And he [the lawyer] said, 'The one who showed mercy toward him.' Then Jesus said to him, 'Go and do the same.' "

Jesus commands us to **"go and do the same"** as this Good Samaritan, who found a person half dead, and when others neglected him, he who had no divested interest in the beaten man did whatever he could in the investment of his own security, time, and money to demonstrate love to his neighbor, in fulfillment of the second greatest commandment (Matt. 22:34-40). He could have left him to die, but it was within his power to prevent it and did, with the commendation of Jesus who commands us to do likewise.

Did not Jesus Himself relieve the suffering of people, by raising them from the dead or healing them from near death sicknesses? Was this not, according to the Biblical record, out of His compassion? Did He not grieve over the death of Lazarus, while knowing that He would raise him from the dead, and thereby show how the divine heart aches over sin's consequences in death? We may not have His means, but we do have means. Let us use them in Christlike mercy!

Suffering has tremendous value in the life of a person.

The Bible is filled with references that testify of the value of suffering in the life of a person who turns to God for perseverance. God puts Himself on display in suffering so that He is seen in ways that we would not otherwise look for Him, were it not for the affliction. Consider what the following verses say about what God accomplishes through the suffering He ordains in a life:

Job 42:5, "I have heard of You by the hearing of the ear; But now my eye sees You."

Romans 5:3-5, "And not only this, but we also exult in our tribulations, knowing that tribulation brings about perseverance; and perseverance, proven character; and proven character, hope; and hope does not disappoint, because the love of God has been poured out within our hearts through the Holy Spirit who was given to us."

2 Corinthians 1:3-10, "Blessed be the God and Father of our Lord Jesus Christ, the Father of mercies and God of all comfort, who comforts us in all our affliction so that we will be able to comfort those who are in any affliction with the comfort with which we ourselves are comforted by God. For just as the sufferings of Christ are ours in abundance, so also our comfort is abundant through Christ. But if we are afflicted, it is for your comfort and salvation; or if we are comforted, it is for your comfort, which is effective in the patient enduring of the same sufferings which we also suffer; and our hope for you is firmly grounded, knowing that as you are sharers of our sufferings, so also you are sharers of our

comfort. For we do not want you to be unaware, brethren, of our affliction which came to us in Asia, that we were burdened excessively, beyond our strength, so that we despaired even of life; indeed, we had the sentence of death within ourselves so that we would not trust in ourselves, but in God who raises the dead; who delivered us from so great a peril of death, and will deliver us, He on whom we have set our hope. And He will yet deliver us."

2 Corinthians 4:16-18, "Therefore we do not lose heart, but though our outer man is decaying, yet our inner man is being renewed day by day. For momentary, light affliction is producing for us an eternal weight of glory far beyond all comparison, while we look not at the things which are seen, but at the things which are not seen; for the things which are seen are temporal, but the things which are not seen are eternal."

2 Corinthians 12:7-10, "Because of the surpassing greatness of the revelations, for this reason, to keep me from exalting myself, there was given me a thorn in the flesh, a messenger of Satan to torment me—to keep me from exalting myself! Concerning this I implored the Lord three times that it might leave me. And He has said to me, 'My grace is sufficient for you, for power is perfected in weakness.' Most gladly, therefore, I will rather boast about my weaknesses, so that the power of Christ may dwell in me. Therefore I am well content with weaknesses, with insults, with distresses, with persecutions, with difficulties, for Christ's sake; for when I am weak, then I am strong."

James 1:2-4, "Consider it all joy, my brethren, when you encounter various trials, knowing that the testing of your faith produces endurance. And let endurance have its perfect result, so that you may be perfect and complete, lacking in nothing."

James 1:12, "Blessed is a man who perseveres under trial; for once he has been approved, he will receive the crown of life which the Lord has promised to those who love Him."

Based on the above verses, it is clear that God has obvious purposes in suffering, not only for the victim, but also on those indirectly affected by the affliction (such as those who are related to or care for the impaired person) and therefore should seek to learn the lessons God intends from the suffering more than alleviating it. Certainly the Psalms illustrate that seeking relief from suffering is not bad or sinful in itself, but in fact can be commendably sought, but never in violation of God's Word.

Numbing the pain of a dying person is an act of mercy, when dying is clearly unavoidable.

There are instances in which the Bible would allow and even encourage the relief of a person who is incurable and dying. Solomon's mother, Bathsheba, gave council to young King Solomon when she urged him in:

Proverbs 31:6, "Give strong drink to him who is perishing, and wine to him whose life is bitter."

In that day, the strongest anesthetic to relieve the pain of a dying person was to take the edge off his or her pain until the “natural” happened. Here, under divine inspiration, is the closest Biblical reference to any semblance to euthanasia. There is no mention of any other action except what we would compare to its modern day equivalent of realizing and accepting the inevitable death of a patient and focusing the medical efforts to “make him comfortable” until he or she passes. This is an act of mercy and Biblically commendable.

In such cases as the Bible describes injured men who accelerated their own deaths by enlisting the help of another commendation is not given (cf. the pagan king Abimelech in Judg. 19:50-57; and Israel’s King Saul in 1 Sam. 31 – neither of these men appeared to be true believers). Rather, as in the case of Saul, the man who assisted in his death was executed by David. One might argue that this was owing to his position as the anointed King of Israel, but being the closest Biblical parallel to euthanasia, it certainly is in a negative light. Hardly can someone establish Biblical grounds for such a practice.

The Bible attributes selfish lusts as the motives for taking a person’s life.

James, the half-brother of the Lord Jesus wrote in his epistle about the motives of murder when he said in **James 4:2**, “**You lust and do not have; so you commit murder...**”

According to Holy Writ, committing murder as the Bible defines it, flows from a heart of lust, or evil desire. In the heart of a murderer is the desire to have something so badly that he or she will sin to get it, or sin if he or she does not get it. It is the pursuit of a sinful happiness apart from God.

While the motives of men’s hearts are known only to the Lord (1 Cor. 4:5), any act that results in taking the life of a person not deserving of death raises serious concern about the reason, and whether it is truly to relieve someone of serious pain, or to relieve the burden of care and responsibility that love requires.

CONCLUSION

This is not a question that was a moral dilemma a century ago, when modern technological advances such as feeding tubes were a possibility. Today they are, and sustaining a life is possible.

Murder, is best defined Biblically as intentionally premeditating to take the life of an “innocent” person who is undeserving of capital punishment, and against his or her will, with malicious intent. That is the prohibition given in Exodus 20:13, otherwise known as the Sixth Commandment (see Millard Erickson and Ines Bowers journal article, “Euthanasia + and Christian Ethics” *JETS*, 19:1, Winter 1976, p. 16-17).

In the Terri Schiavo case, a woman who is very much alive is being killed by an intentional, premeditated act against her, without her consent, and without the guilt of anything deserving death. This is four-fifths of the Biblical definition of murder, which is a sin against God and Terri.

We are unsure of the motives for this on the part of her husband, for only God knows this, but we are suspicious of them, given the extensive sacrifices required to sustain Terri's life. The one variable that explicitly declares this to be an act of murder is the true motives in the heart of her husband that underlie his actions, which we do not know.

Do we need to know his motives in order to reject this euthanasia? No! This appears to be adult-abortion, ridding the world of a person who seems, at present, to be socially useless, when it is well within our power to do otherwise. It would be different if Terri were clinically brain-dead, unresponsive to any stimuli, and prolonged in her dying through completely artificial means. It appears that all she needs in order to survive is an alternate method of food.

On a divine level, the Biblical principles weigh heavily on the side of sustaining the life of Terri Schiavo, based on the information given. On a human level, the open ended questions and possibilities weigh heavily on persisting and waiting until the time comes where Terri either recovers through some form of rehab or maybe an imminent cure, or wait until she expires because of some other, more natural and unalterable means.

WHAT IS YOUR ROLE?

Pray! First, pray for her salvation, and for the salvation of all involved. Pray for opportunities to interact with others about this case and to interject the Word of God. Pray for Terri's life to be spared and the tube to be reinstated and that she might recover.

Use this as an opportunity to think through the frailty of life and the certainty of death, to remind you about the purpose of your life, and the need to make every day count, because it could be your last. Talk to your children, if they are mature enough to handle it, about ethics and how to make decisions based on Biblical principles, especially in times where the Bible does not explicitly come right out and speak against it.

Think through the different attributes of God and how they affect not only this scenario, but this entire fallen world, until the day comes when He triumphs over all sin, sickness, and grief, and reigns with perfect justice from His righteous throne, over all the earth. May His kingdom come! May you long for it and live for it.