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## Senior Editor's Preview

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## Senior Editor's Preview

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Welcome to *Bioethics in Faith and Practice*! So far, 2017 has been filled with public debates over end of life issues and healthcare reform. This issue of the journal features an editorial, two guest commentaries, and two full-length peer-reviewed papers.

We begin with our Managing Editor, Dr. Heather Kuruvilla. Her editorial for this issue may strike a familiar chord. On July 28, 2017, 11-month old Charlie Gard passed away in the United Kingdom, after an extended and excruciating public debate over his care. He had suffered from a rare genetic condition, and his parents unsuccessfully fought the healthcare establishment for the right to bring him to the U.S. for a second opinion.

In her editorial, Dr. Kuruvilla discusses similar issues in the lesser-known case of Juliana Snow. This five-year-old girl had an inherited neurodegenerative disorder that left her severely disabled. The parents decided to forgo aggressive treatments, based on the girl's stated wishes not to return to the hospital, but to go to heaven instead. Dr. Kuruvilla questions the ethics of this, saying, "The question of whether minors have the cognitive capability to make their own medical decisions remains a controversial issue, one heavily influenced by cultural and religious tradition."

In his invited commentary, medical student Corbett Hall talks about the new trend towards assisted suicide. He reviews the history of "Dr. Death," Jack Kevorkian. He then covers some of the biblical reasons to object to physician-assisted dying, concluding with comments from the Hippocratic tradition. According to Hall, "Suicide is a tragedy of despair and the triumph of evil."

In our second invited commentary, PharmD student Laura Sjoquist tackles the difficult topic of mental illness and neurological disability. She presents a balanced perspective from God's Word, pointing out that "Stigma is an enemy of recovery, because mental illness is treatable." She offers no pat answers on why our Lord allows some people to be afflicted in these ways, but shares her belief that therapy and medications for such conditions honor God.

PhD candidate Ryan Marquardt deeply considers the issue of presumed consent for organ donation in the first of our full, peer-reviewed papers. He shows how the continued shortage of available organs for transplant has prompted this ethical debate. Our present system is based on *explicit consent*. This simply means that, when a patient is declared brain dead, organ retrieval for transplantation is based on a previous advance directive or on permission by the next of kin.

In the proposal called *presumed consent*, permission to remove transplantable organs is the default, unless the patient opts out in an advance directive. The author reviews why this makes theoretical sense, in that it might increase the supply of available organs. He then goes on to examine the European data to see how this has worked out.

The author then discusses the ethical philosophy of presumed consent, using the perspective of medical principlism and its four cardinal rules: beneficence, non-maleficence, justice and autonomy. He ultimately concludes that presumed consent "would be ill-advised and corrosive to biomedical ethical standards."

The final peer-reviewed paper in this edition of *Bioethics in Faith and Practice* is by philosopher Norman Swazo of North South University in Bangladesh. Dr. Swazo considers the agonizing request by Mr. Tofazzal Hossain, well-known in the public discourse of his country. Mr. Hossain is the father of two sons and a grandson, all suffering with Duchenne muscular dystrophy. His wife is mentally handicapped and he has other family burdens. Because the three children are suffering and he is too poor to provide any medical treatments, Mr. Hossain has asked the government to allow active euthanasia: “[H]is burden, he asserts, exceeds his personal ability to manage.”

After reviewing the case and the public reaction to it, Dr. Swazo points out that a Muslim-majority country such as Bangladesh might suppress any discussion of euthanasia as incompatible with Islamic law. That is why he welcomes the robust conversation that has ensued on this issue. He goes on to provide an in-depth analysis from Kantian ethics. According to Dr. Swazo, such reasoning militates against the practice of euthanasia, even under these dire circumstances.

Though he makes reference to Islamic law, I wish to point out that Dr. Swazo’s primary arguments are non-faith based and strictly secular. As Christian evangelicals, the editorial staff of this journal strongly believe in the sanctity of human life and the immorality of euthanasia for any reason. But Common Grace is at work - it is encouraging to note that Islamic law, Kantian ethics, and evangelical Christianity all reach similar conclusions in this regard.