

ascetic. In Jainism, which is an ethical system par excellence, the highest importance is attached to passionlessness. Jaina tradition teaches not only the art of living but also the art of dying. When a layman, or an ascetic, is faced with death under certain circumstances, the vow of *Sallekhana* is prescribed. Its main objective is to make thin the passions that disturb equanimous state of the soul. *Sallekhana* is also called *Santhara* in Jaina tradition. The term *Sallekhana* is a technical Jaina term which means 'Facing death by a person voluntarily when he is nearing his end and when normal life according to religion is not possible due to old age, incurable disease, severe famine etc., after subjugation of all passions and abandonment of all worldly attachments, by observance of austerities, gradually abstaining from food and water, and by simultaneous meditation on the real nature the self, until the soul parts from the body'. (1)

In the Jaina text it is said, "*Sallekhana* is giving up the body by fasting when there is an unavoidable calamity, in order to observe the discipline of religion." (2)

Let us analyze the full implications of the vow. It is clear that this vow is to be practised when one is too old to be able to live a normal righteous life. So, when a person becomes a burden to society, without any possibility of reciprocating the good, then he should decide to end the life by fasting unto death. One has to face death willingly and die a detached death, which is peaceful and holy. The absence of passions and attachment, besides confessions for one's faults and forgiveness of all offences against oneself, make a person fit for *Sallekhana*. In short, when a person 'embraces voluntary death at the end of his life by observing progressive withdrawal of food and drink and spends his last moments in contemplation, putting aside all worldly attachments, sorrow and fear, such type of death is known as *Sallekhana*. It is called *Samadhi Marana* or sublime death.' It is clear that *Sallekhana* is a well ordered voluntarily chosen death, which is not inspired by any passion whatsoever. *Sallekhana* is considered as an educative vow by a Jaina Acharya. (3) It educates the individual for the exalted path of spirituality. Both a householder and an ascetic can resort to it. It prepares an individual to meet death peacefully and also prospects of his life after death are improved. One who adopts *Sallekhana* is a spiritual aspirant. All the afflictions are conquered by the aspirant and, as a result of mental and spiritual poise, the soul is

purified and elevated. The mind is full of joy. There is no feeling of unhappiness, which is present at the time of ordinary death, and the resulting 'distress' is conspicuous by its absence.

In the Jaina scripture (4), we find a detailed discussion about how should a wise man face death when it is nearing. It is stated that there are two ways of facing death: death with one's will and death against one's will. Death against one's will is that of ignorant men and death with one's will is that of wise men... When death comes at last, the fool trembles in fear and dies, dies the death against his will. Wise man's death is with one's will... full of peace and without injury to any one. It is the death of the virtuous who control themselves and subdue their senses with an undisturbed mind. According to Umaswami, the vow of *Sallekhana* should be adopted most willingly or voluntarily when death is very near. (5) Thus when the body is to perish due to any of the causes mentioned above, a course of planned death is appreciated. It implies courage to face death without fear. When it is felt that one's body is of no further use, the vow of holy death has been suggested in Jaina scriptures. It may be noted that the body is to be protected so long as it is useful for the attainment of the goal. It is made clear that this vow is not meant for those persons who are in good health and are not faced with any sudden cause of death.

Circumstances for Adopting *Sallekhana*

The sets of circumstances when this vow is advised to be taken are as under:

1. Condition of extreme calamity, natural or otherwise
2. Famine
3. Very old age.
4. Terminal illness.

The philosophy underlying this concept is one's body is mortal; hence the ritual of holy death as it is called is to be performed. This kind of 'sacred death' is peculiar to Jainism. The aim is self-realization. The pure self is to be realized and its energy is to be channelised in the direction of the attainment of the highest ideal of liberation. So this kind of death has moral justification. It is said, 'Among the austerities, fasting is the most conspicuous. The Jainas have developed it into a kind of art. They have reached a remarkable proficiency in it... more important is fasting unto death. Jainas have worked out a scientific

analysis of *sallekhana*. (6)

Some times, *sallekhana* is interpreted, though not quite correctly, as death by slow starvation. This vow is taken with the object to accomplish what is known as 'Samadhi Marana', or peaceful passing away, or 'Pandit Marana,' the wise man's demise which is desired by a pious person. Rationale behind it is that one who is born, cannot escape death: he or she must die some day. Those who identify the soul with body, for them, the fear of death is the greatest fear. But those who believe in the immortality of soul and liberation from the round of rebirth as a possibility can face inevitable death heroically without losing their mental equilibrium. The vow of *Sallekhana* is nothing but a course of discipline intended to prepare a person for such ennobling parting.

A comprehensive analysis of *Sallekhana* is found in the Jaina text *Ratnakarandaka sravakacar* by Samantabhadra, "prior to the adoption of the vow one should give up all love, hatred and attachment to possessions, with a pure mind, and obtain forgiveness of one's relations while also forgiving them oneself. One should give up grief, fear, anguish, attachment and keep oneself engaged in meditation. Then he should give up gradually food, then liquid and even water. During the observance of the vow one should not commit any of the transgressions, entertaining a desire to live, or wishing for speedy death, exhibiting fear etc." (7)

***Sallekhana* and Suicide**

This kind of death has been misunderstood sometimes. Nowadays, it has raised many problems, legal and moral. It is said everyone has right to live but not to end life. In this connection perhaps we may agree with a social philosopher when he said, that 'man is born free, however he is everywhere in chain'. A fundamental question whether *Sallekhana* is to be described as a form of suicide, and as such unjustifiable, has been raised by some. Radhakrishnan makes mention of it as a form of suicide. (8) However, a better understanding of the Jaina concept of *Sallekhana* would reveal that it is not a form of suicide. Rather, 'it is a means for self-realization. It is meant to free oneself from the bonds of the body, which are no longer useful. The practice of the self-control in the process is the gain for the soul. As *Sallekhana* is not destruction of life out of passions, it is not motivated by any desire which characterizes suicide. The analysis of the Jaina concept will

demonstrate that *Sallekhana* is not loss for the soul, as it is not an act of suicide. If we examine the situation giving rise to suicide, and intentions and psychology of the persons committing suicide and the other practicing *Sallekhana*, the distinction between the two becomes clear. There is nothing common between the two, except physical death. In the case of suicide, death is brought about by objectionable means, harmful to individual and society.

When a person commits suicide following characteristics are present:

1. Ambivalence, or a desire to die which simultaneously creates a conflict in the mind.
2. A feeling of hopelessness with inability to handle the problem on hand.
3. Physical or psychological feelings of exhaustion, frustration, or both.
4. There is presence of anxiety, tension, depression, anger or guilt.
5. Mental disorder and perverted attitudes.
6. The situation causing agitation seems to be unavoidable.
7. Feeling of fear or any passion leading to loss of interest in life.

In short, in suicide, death is brought about secretly and suddenly by means of an offence. (9) In Jaina text, practices, which may be called suicides, are described - such as "those who use weapons, throw themselves into the fire and water ... are liable to be caught in the wheel of *samsara*". (10) Fasting unto death, if based on force, is against the spirit of non-violence - the basic tenet of Jainism. Jaina religion forbids all kinds of purposeless violence. Consequently, except fasting unto death, all other methods of voluntary chosen death are forbidden in Jainism.

***Sallekhana* and Euthanasia**

Sallekhana is not a sudden death. *Sallekhana* is not suicide. It is also different from euthanasia, which is also a kind of intentional killing. Euthanasia is defined as the act of killing a person painlessly for reasons of merely suffering from an incurable disease. It may have medical grounds. But, as regards intention, there is a difference. *Sallekhana* can be called an act of 'self-offering'. Its basis is fearlessness. Death is not forcibly invited and this

makes it clear that there is fundamental difference between suicide and *Sallekhana*. The situation in both is different. Suicide results from passions but in case of *Sallekhana*, passions are subjugated. The means adopted are also different. As regards results or consequences, in *Sallekhana* there is definitely gain, while in suicide there is loss.

Summary

To Sum up:

The peculiar points to be noted in case of Jain concept of *Sallekhana* are:

1. It is that intense penance which is undertaken by a person at the last moments of his life.

2. The undertaking of the penance at the time of death contains full reviewing of whole past activity with the purpose of weakening the bonds of worldly attractions and one's body so as to have the best form of peaceful and perfect happy ending. At this time, no excitement is felt, no pain is experienced, but under perfect self control, complete ecstasy is enjoyed and one breathes one's last happily under *santhara*. (9)

3. Thus, as is said, *Sallekhana* is voluntary death without feeling pain of any sort.

4. The person controls all his passions and abandons all worldly attachments, observes all austerities, gradually abstains from food and water and lie down quietly, meditating on the real nature of the soul until the soul parts from the body

5. The basic concept underlying it is that man is the architect of his own destiny and he should face death in such a way as to prevent the influx of new *karmas* and liberate the soul from bondage. Penance is capable of burning old *karmas*, reducing them to ashes.

6. "Those who adopt the vow immediately become self-reliant and self composed and they cease to be agitated by personal considerations and suffering, and rise above the longings of the flesh. The soul is lifted... To be able to control one's conduct at the moment of death is the fruit of asceticism. (12) The state of mind of the person who performs *Sallekhana* is free from fear, grief, regret, affection, hatred etc., and he is prepared to embrace death with strength of mind and enthusiasm.

7. There is repentance for the sins committed.

Thus one should acquire mental-spiritual poise before adopting the vow. Finally, remembering the divine enlightened souls he would drop the physical body. (13)

Apparently, this process seems to be a process of inviting death but it is not suicide, though it is true that the person accepting this vow is all the time trying to gradually invite death. The aim is to get conquest over passions to remove attachment, aversion etc. It is his choice when preservation of the body is impossible. Spiritually, there can be no other better way than accepting death voluntarily. Therefore it is a gain in a way. Death is a loss but it is of secondary importance. Observing *Sallekhana* is definitely a gain from the spiritual point of view, particularly in the special situation in which he is put. 'The observance of the vow is a conscious and well planned penance for self realization.' (14). However, if *Sallekhana* is considered as only a ritual or a tradition without noble intention, although there may be external accomplishment, there will be no gain spiritually.

Coming to *Sallekhana* in practice, historically, on the basis of inscriptional evidences, many have been said to attain *Samadhi* by practicing *Sallekhana*. Chandragupta Maurya, it is well known, practised it and attained *Samadhi*. It is significant to note that in 2002, in different states of India, about sixty Jainas are reported to have followed *Santhara*.

To Conclude:

In my view, Jainism approves of *Sallekhana*. It is a step towards self-realization. It is meant to free oneself from the bonds of body and to attain self-absorption, the perfection of the soul by soul.

It is clear that intention behind this vow is not to waste time in fruitless activities for the sake of prolonging the existence of the body, which has to be given up sooner or later. Hence the attachment towards it is given up, with the result that an individual performing *Sallekhana* meets the inevitable death as a conqueror. Not surprisingly, it is said to be a spiritual welcome to death. This is not yielding to death but a way of meeting the challenge of death adequately. (15) It has a religious cause and spiritual value.

It would be appropriate to end the paper by a note made by Justice Tukol-, "Death by *Sallekhana* according to spiritual rules is the victory of the soul over *karmas* and consequential infirmities of the mind

and body which worldly existence might have brought into being. It is an act of fulfillment". (16). Who can say that it is a loss?

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About the Author

Dr. Kokila H.Shah, Hon. Visit. Prof., K.J. Somaiya Centre For Studies in Jainism, Vidyavihar, Mumbai-400077. Resi: B-14, Kakad Niketan, Derasar Lane, Ghatkopar (E.), Mumbai-400077. Ph: (91-22)-25138463., M: 09323079922
Email: shah_kokila@rediffmail.com

Euthanasia: The Hindu Perspective

Namita Nimbalkar

Lecturer of Philosophy and Director of Gandhian Studies Centre in Birla College of Arts,
Science and Commerce, Kalyan, Maharashtra.

Abstract

Modern science with its development process has created many dilemmas for society. Man is faced with the problem of choice. One such is mercy killing or euthanasia. As debate goes on between doctors, lawyers, society, philosophers and governments of the world as to whether euthanasia should be sanctioned or not, the religious traditions of the world can provide a ray of hope in this matter. The Eastern religious traditions, with special reference to Hinduism and Buddhism, are explored for this reason.

Introduction

"I will give no deadly medicine to any one if asked, nor suggest any such counsel"

... The Hippocratic Oath

Death is a defining characteristic of human experience. Yet, while the event of death remains elusively beyond human control, the process of dying has increasingly been brought into the domain of medicine and life-extending technologies. The decision to use these technologies is a moral choice, because it involves a decision about a fundamental human good, the preservation of life. Yet, in some situations, a resort to technology to stave off death comes at the price of compromising another fundamental human value, the quality of that life. Decisions about continuing treatment for the dying, or of allowing death to take place by foregoing or terminating such treatment, or even by physician-assisted suicide or euthanasia, are thus both existentially and ethically agonizing.

The word "euthanasia" comes from the Greek *eu* and *thanatos* and means "happy death" or "good death." Roughly speaking, there are two major views about euthanasia. The traditional view holds that it is always wrong to intentionally kill an innocent human being, but that, given certain circumstances, it is permissible to withhold or withdraw treatment and allow a patient to die. A more recent, radical view, embraced by groups like the Hemlock Society and the Society for the Right to Die, denies that there is a morally significant distinction between passive and active euthanasia that would allow the former and forbid the latter. Accordingly, this view argues that mercy killing, assisted suicide, and the like are permissible.

As individuals and their families face these controversial questions and as many countries consider revising their laws on end-of-life choices, religious traditions and values can offer guidance and insight, if not solutions. Historically, religious communities have sought to appropriate death within the life cycle through rituals of remembrance, and religious teachings have emphasized that death brings meaning to mortality. The process of dying is often portrayed as an invitation to spiritual insight and a key moment in the cultivation of spiritual identity.

The world's great traditions of moral wisdom all begin with a strong predisposition to favour the preservation of life, although the specific reasons for this conviction vary from tradition to tradition.

To die well, say the teachers of eastern religions, one must live well. The views of eastern religious traditions and philosophies have been very influential in global understanding about providing appropriate care to the dying. For example, the pioneering work of the Swiss-born psychiatrist Dr. Elisabeth Kubler-Ross in understanding the experiences of dying patients in Western medical institutions drew directly on understandings of the meaning of "good death" and "stages" in life in Hindu tradition. Buddhist values of compassion, non-violence, and suffering have also influenced the discourse of Western medical ethics. The ethical tension in these two traditions about end-of-life choices is rooted in three main values, *karma*, *liberation* and *ahimsa* (non-violence).

Karma, Ahimsa and Liberation

Karma is the net consequence of good and bad deeds in a person's life, which then determines the nature of the next life. Ongoing accumulation of bad *karma* prevents *moksa*, or liberation from the cycle

of rebirth, which is the ultimate goal of Hinduism. *Ahimsa* is a fundamental principle. Hindu dharma proclaims, “*Ahimsa Paramo Dharma*” or, *Ahimsa* is the highest form of *dharma* (virtue). *Ahimsa* means non-violence, non-injury or non-killing. In all the Hindu paths, and especially, Jain and Buddhist, *Ahimsa* is a paramount virtue. Concept of *ahimsa* extends to all living beings, and therefore, protection of environment, natural habitats and vegetarianism are natural derivatives of the concept. We must not be indifferent to the sufferings of others. One must consider all living beings in the image of one’s own self and thus not commit acts of violence in thought, word or deed against other living creatures. Thus, the practice of euthanasia will breach the teachings of *ahimsa*.

In both Hinduism and Buddhist traditions, all living creatures (humans, animals, plants, etc.) represent manifestations of the laws of *karmic* rebirth. To honour these laws, one must show great respect for the preservation of life and non-injury of sentient beings. Acts destructive of life are morally condemned by the principle of *ahimsa*, which is the conceptual equivalent of the Western principle of the sanctity of life.

This pattern of reasoning—the primacy of spiritual goals of liberation or compassion relative to the preservation of life—also applies to euthanasia through physician injection or administration of a lethal drug. Hindu and Buddhist scholars have found support for this so-called “active” euthanasia in their traditions by reflecting on the meaning of death as a door to liberation, the culmination of life in detachment from the material world. They then go a step further by linking compassion to the norm of self-similitude: “one should act towards others as one would have them act toward oneself”. So euthanasia can be seen as a compassionate act or a “mercy killing” for a dying person striving to the highest purpose of human destiny, liberation.

Hindu Views of Suicide and Euthanasia

The central belief of Hinduism is in *Sanatana Dharma* or Eternal religion. According to Hindu philosophy, *dharma* is essential for accomplishing material and spiritual goals and for the growth of the individual and society. *Dharma* here means both law and religion. It is the guiding principle of life. The Hindus live their lives according to their *dharma*- their moral duties and responsibilities. *Dharma* requires Hindu to take care of the older member of their community or family.

This school of thought, which believes in the *karma* theory, feels that the doctor should not accept a patient’s request for euthanasia as the soul and body will be separated at an unnatural time. The result of it will damage *karma* of both doctor and patient. Suicide is generally prohibited in Hinduism, on the basis that it disrupts the timing of the cycle of death and rebirth and therefore yields bad *karma*. It also has dire consequences for the soul’s spiritual progress. Killing in the form of euthanasia, murder, suicide interferes with the killed soul’s progress towards liberation. It also brings bad *karma* to the killer, because of the violation of the principle of non-violence. When the soul is reincarnated in another physical body, it will suffer as it did before because the same *karma* is still present. Same argument suggests that keeping a person artificially alive on life-support machines is also a bad thing to do.

In Hinduism, the ideal death is a conscious death, and this means that palliative treatment will be a problem if they reduce mental alertness. The state of mind that allows a person to choose euthanasia may affect the process of reincarnation, since one’s final thought are relevant to the process.

The other school of thought puts forth the Autonomy Argument, which believes that to help end painful life of a person the doctor is performing a good deed and so fulfilling his moral obligations. Such actions are morally permissible. One should be free to do as one chooses.

As a rule, both Hinduism and Buddhism oppose suicide as an act of destroying life. Suicide puts an individual’s spiritual clock in reverse. However, a distinction is made in both traditions between self-regarding (or self-destructive) reasons and other-regarding (or compassionate) motives for seeking death. Instead of achieving the ultimate spiritual goal of liberation, a person who acts in this way will remain trapped in the ongoing *karmic* cycle of life-death-rebirth. Those who assist in this suicide may also be subject to *karmic* punishment, for they have violated the principle of *ahimsa*.

However, a very different perspective emerges when individuals seek death for spiritual motives, of which there are two kinds. The first revolves around compassion; concern for the welfare of others, as one who is dying can be seen as a sign of spiritual enlightenment. Therefore, a person can decide to forego treatment to avoid imposing a heavy burden of care giving on family or friends. He or she may

also stop treatment to relieve loved ones of the emotional or economic distress of prolonged dying.

The spiritual goal of liberation can also be seen as an ethical reason for seeking or hastening death. When physical suffering impedes self-control and lucidity, it is permissible to shorten life. Pain or lethargy might cloud the awareness and consciousness at death that both Hindus and Buddhists believe is necessary to ensure a favourable rebirth. Extreme suffering might also cause someone to be so attached to their material life (bodily condition) that they cannot pursue the ultimate spiritual goal of liberation from the material world.

Prayopavesa

One exception to the Hindu prohibition of suicide is the practice of *prayopavesa*, or fasting to death. *Prayopavesa* is not regarded as suicide because it is natural and non-violent, and is acceptable only for spiritually advanced people under specified circumstances. It is used when it is the right time for this life to end- when this body has served its purpose and become a burden. Unlike suicide, *Prayopavesa* is a gradual process, giving ample time for the patient and his community to prepare for the person's demise. The decision needs to be publicly declared and the action should be committed under community regulations.

The difference between suicide and *Prayopavesa* is that while suicide is often associated with feelings of frustrations, depressions or anger, *Prayopavesa* is associated with feelings of serenity. *Prayopavesa* is only for those people who are fulfilled, who have no desire or ambition left and no responsibility remaining in this life.

BBC Religion & Ethics provides the following example of *prayopavesa*: Satguru Sivaya Subramuniaswami, a Hindu leader born in California, took his own life by *prayopavesa* in November 2001. After finding that he had untreatable intestinal cancer, the Satguru meditated for several days and then announced that he would accept pain-killing treatment only and would undertake *prayopavesa* - taking water, but no food. He died on the 32nd day of his self-imposed fast.

Concluding Remarks

Given the complex history of suicide in Indian thought and the various considerations outlined above, not all Hindus agree on whether euthanasia should

be permitted. In the end, there are two Hindu views of euthanasia:

From one perspective, a person who helps other end a painful life and thereby reduce suffering is doing a good deed and will gain good *karma*. From the other perspective, euthanasia interrupts the timing of the cycle of rebirth and both the doctor and patient will take on bad *karma* as a result.

A moral problem arises with euthanasia, however, if the administered medication renders the patient unconscious or unable to comprehend his descent toward death. The patient is unaware precisely at the moment when he or she should be most sensitive and receptive to spiritual teaching and meaning. For these reasons, other modes of bringing about death are preferable morally and religiously.

Similarly, Freedom of Will is an important postulate of moral philosophy. An individual can be held responsible for his actions only if it is performed without any compulsion. The concept right, wrong, good, bad, reward and punishment pale into insignificance, if the postulate Freedom of Will is not taken into consideration. As per Free Will, we can go in for euthanasia, but it is wrong for us to do so. The Free Will believes that every individual is a creation of God and this imposes certain limits on us. Our lives are not only for us to do with as we deem fit. To kill ourselves, or to get someone else to do it for us, is to deny God, and to deny God's right over our lives, and His right to choose the length of our lives, and the way our lives end. We have no right to die as it undermines other people's right to live.

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About the Author

Namita Nimbalkar is a lecturer of Philosophy and Director of Gandhian Studies Centre in Birla College of Arts, Science and Commerce, Kalyan, Maharashtra. She is also pursuing research on Gandhian Thought under the guidance of Dr Shakuntala Singh, Principal of K.G.Joshi and N.G.Bedekar College of Arts and Commerce, Thane.

IN VITRO FERTILIZATION

Kiranmayi Vemuri

Gayatri Vidya Parishad Degree College, Visakhapatnam, Andhra University, Visakhapatnam.

E-mail Id: <onlyme_19kv@hotmail.com >

Introduction

In vitro fertilization is a technique in which egg cells are fertilized outside the woman's body. IVF, as it is also called, is a major treatment for infertility where other treatments for achieving conception have failed.

The process involves hormonally controlling the ovulatory process, removing ova from the woman's ovaries and letting the sperm fertilize them in a fluid medium. It should be noted that this entire process is conducted in vitro, and hence the name. The fertilized egg (zygote) is then transferred to the patient's uterus with the intent to establish a successful pregnancy. Babies that are the result of IVF are called "Test tube babies."

The technique for IVF was specifically developed for humans in the UK. The world's first so-called "test tube baby" was Louise Brown who was born on 25 July 1978, amid intense controversy over the safety and morality of the procedure.

Procedure of IVF

Unlike in vivo fertilization, in vitro Fertilization requires the intervention of a medical team. After a total case study of the couple concerned is done, the team decides whether they are a fit for the procedure or not.

If selected, fertility medications are administered to the female on the third day of menstruation to stimulate her ovarian follicles to produce as many ova as possible. This is necessary because a single ovum, or pre-embryo as it is also called, has little chances for survival. Ova are retrieved after 24 to 36 hours by special stimulation techniques such as ultrasonographically guided aspiration or laparoscopy. Efforts are made to obtain as many eggs as possible.

The harvested ova are inseminated by washing them with semen provided by the male partner. The sperm and egg are incubated together for about 18 hours by which time fertilization should have taken

place. The fertilized egg is passed on to a special growth medium and left for about 48 hours until the egg reaches the 6-8-cell stage.

After reaching the 6-8-cell stage, the embryos judged to be the best are transferred to the patient's uterus through a thin plastic catheter, which goes through her vagina and cervix. Often, several embryos are passed into the uterus to increase chances of implantation and pregnancy. This is the main reason for the high frequency of multiple births among IVF patients.

Religious Opinions on IVF

The fact that IVF techniques have been developed and have a certain success rate does not make them morally acceptable. The ends do not justify the means. Theologians all over the world differ sharply regarding the morality of IVF procedures.

- To the Catholic Church, adoption and the use of fertility drugs is acceptable. But IVF and artificial insemination are strictly prohibited, as procreation without sexual union is considered unnatural. The Church has been quite vocal about its views on this topic as we have seen time and again.
- In Judaism, donor insemination is forbidden and the child is considered to be the offspring of the biological father. Artificial insemination and IVF are accepted using the husband's sperm when there is a need to heal the ailment of infertility.
- Islam does not permit the use of donor sperm.
- Hinduism and Buddhism are generally very tolerant of the range of reproductive procedures available, including the use of donated reproductive tissues. However, artificial conception is still considered taboo by most followers of these two religions.

Ethics of IVF

An ethical shadow has been cast over this whole process from its outset. The new reproductive procedures have spawned a number of ethical

concerns. These are controversial subjects, which have attracted wide media glare and public debate. Artificial conception raises the problem of a number of myriad concerns—both legal and religious.

One question that has been raised is — Is pregnancy God's will and not being able to have biological children not? Do childless couples really have the right to bypass the natural methods of conception and have children by artificial means? No living mortal has the right to insult the Creator by questioning His decisions and judgments.

Another serious issue to be raised is the interests of the potential child.

According to the “Human Fertilization and Embryology Act” (1991, USA), “Centres considering treatment of IVF to a couple must take into account the welfare of any child who may be born”. These welfare factors are cited as important reasons for withholding fertility treatment. However, these factors are almost never taken into proper consideration.

A child is not a right, but a gift, the supreme gift of matrimony. To make the child or any human person the object of a right is to reduce the person to the level of an object to be possessed. And yet many people today believe that they have a right to destroy a baby, and a right to have a baby. And a right to produce one in a laboratory if they cannot do so on their own. And a right to destroy the baby so produced if it begins to develop abnormally. Is this morally acceptable?

Also, most of the moralists who advocate against IVF do so primarily because in IVF the child-to-be is treated as a product of manufacture—as an operational objective to be achieved by the application of technical means. This is incompatible with the nature of marriage and respect for the dignity of a child as a person.

One of the major drawbacks of this process is the high number of embryos destroyed. If life can be considered to start at conception, then destruction of an embryo is tantamount to taking a life. The whole process of IVF facilitates the idea that embryos are just commodities to be used and later thrown away.

Whatever the metaphysical status of the embryo, the point to be considered is that ultimately the embryo represents a human life. Now we are creating embryos, discarding them, even fighting lawsuits over them. All this may be legal, but is it ethical?

Adoption Vs. Assisted Conception

A parallel is often drawn between adoption and assisted conception with the underlying implication that couples seeking fertility treatments should prove their fitness as potential parents.

In the case of adoption the child already exists. Hence, the question being asked is—among all the couples that would like to adopt a child, which would make the most suitable parents for this child? The criteria for adoption will inevitably be determined by supply and demand.

The situation for a couple seeking help with conception is totally different. If we focus on the interests of the potential child the question that needs to be asked is— are the interests of this potential child better served if he or she is born to these parents, or if he or she never exists at all? The possibility of “this” potential child being born to any other (possibly better) parents does not arise. This, crucially, is where the analogy with adoption breaks down.

The intrinsic worth of an individual's life cannot readily be quantified, least of all when that life has not yet started. However, the level of parenting would have to be very low for it to be preferable not to exist at all, rather than exist as a child of those parents. Society's reluctance to step in and take a child into care except under the direst circumstances of appalling parenting confirms this.

Thus, instead of an analogy existing between adoption and assisted conception, we see a gross breakdown of relations. But here, we can see yet another question. Can't adoption be a feasible option for childless couples? Must they really turn to In Vitro Fertilization? There are so many children in this world suffering for the want of a little care and affection. When sterile couples have the chance to perform this act and be blessed by God, shouldn't they perform it with a full heart instead of moaning over the lack of a biological child? A child is a child—whether biological or adopted.

Conclusion

There will always be two views at looking at IVF. At one end of the spectrum, will be people who feel that this technology allows couples to manipulate Nature to produce children and will object to it. At the other end will be people who believe that this technology is a triumph of man's ingenuity, which can be used to overcome Nature's constraints. It will

never be possible to reconcile these viewpoints - since these are based on deeply held personal beliefs.

Since it may not be possible to have a consensus on this issue, this decision should not be left to moralists, or philosophers - or the government, or the doctors. Instead, the decision should be left to each

individual couple, which provides the reproductive apparatus to create the baby.

One must always remember that there are no rights and wrongs to the issue. One must always follow one's conscience.

Stem Cell Research

M. Pavani

*Under graduate student, Gayatri Vidya Parishad Degree College, Visakhapatnam, Andhra University,
Visakhapatnam. E-Mail: < krishnapavani_2012@hotmail.com >*

Synopsis

Despite ongoing success with adult stem cell research, recent months have seen an enormous debate raging over the issue. Some researchers have offered imaginative new ways to obtain embryonic stem cells.

According to the Parthenote Proposal, a chemical trigger can cause an egg to begin dividing and organizing. Eggs would have to be obtained from women before the final maturation process when the eggs have a full DNA complement. On reaching the blastocyst stage, the parthenote would be broken apart and its stem cells harvested.

According to the Morula Proposal RGI, scientists held that they would take an early embryo that had developed to about the eight-cell stage (called the morula) and remove a single cell. They would then attempt to coax that cell to replicate into an embryonic stem cell line. The embryo (less than one cell) could then be transferred to a womb.

According to the Organ Transport Proposal, arrested development is often used to denote embryos that are believed will never develop further. Landry and Lucker hope to identify arrested development embryos whose stem cells are functional, obtain the stem cells (using the standard method of breaking the embryos apart) and develop stem cell lines for research.

According to the ANT Proposal using the cloning method, scientists would create an embryo or embryo-like entity that lacks a developmental gene. A developmental gene is turned off in the nucleus about to be transferred. Using the normal cloning process, the changed nucleus is then inserted into an enucleated egg, stimulated to divide, and stem cells are harvested when the resulting embryo or entity reaches the blastocyst stage.

All these methods may be unique in character and may play a great role in taking embryonic stem cell research forward. But the question to be answered here is — Is all this ethical?

Cloning

Amrutha Bhupathiraju

Gayatri Vidya Parishad, B. Sc. Micro Biology, Vishakhapatnam, Andhra Pradesh, India.

Synopsis

Ethics of human cloning has become a great issue in the past few years. People on both sides give many reasons to clone or not to clone. This is an attempt to explore the pros and cons of human cloning and to provide enough information of both.

Therapeutic cloning has had a greater impact on human health than the development of antibiotics. The benefits of this new field of treatment must not be thrown away because some people cannot see the difference between this and the abhorrent risks to potential offspring of a reproductive cloning, which should of course see an immediate, complete world wide ban. I believe that this type of technology will be something like the technology that created the nuclear bomb. Cloning is a controversial technology and the idea of cloning human beings is largely condemned by the world wide scientific community. Some commentators believe that human cloning could one day become a reality, because our increasing acceptance of genetic technologies may desensitize us to the ethical dilemmas:

- Renew activity of damaged cells by growing new cells and replacing them.

- The capability to create humans with identical genetic make up to act as organ donors.
- Sterile couples will be able to have offspring which will have either the mother's or father's genetic pattern.
- Other issues like Infertility, IVF technology, Organ transplants, and Bringing back the dead.
- The possibility of compromising individualities. Loss of genetic variations.
- A "black market" of fetuses may arise from desirable donors that will want to be able to clone themselves i.e movie stars, athletes and others.
- Unknown psychosocial harms with impact on the family and society.
- Loss of autonomy infringes upon the concept of uniqueness and individual autonomy.

Cloning tissues and organs falls under a different category than cloning human beings. I think it would be advantageous to science and medicine to clone tissues and organs.

Organ Transplantation

Shruthi Alluri

Gayatri Vidya Parishad, Vishakhapatnam, Andhra Pradesh, India.

Synopsis

Transplantation of human organs and tissues, which saves many lives and restores essential functions for many otherwise untreatable patients, both in developing and developed countries, has been a topic for ethical scrutiny and healthcare policy making for more than 30 years. The international trade in human organs is on the increase fuelled by growing demand and as well as unscrupulous traffickers. This rising trend has prompted a serious reappraisal of current legislation. WHO has called for more protection for the most vulnerable people who might be tempted to sell their organs for a very little price. As the success of organ transplantation steadily increases, the gap between the supply and demand for organs continues to widen sharply. 40% of patients in India die on waiting lists as a result of chronic shortage of organs. International criminal organizations have identified this lucrative “gap” and put pressure on people in extreme poverty particularly to resort to sell their organs.

This situation raises a number of ethical questions: should the poor provide for the health of the rich? Should the price of alleviating poverty be human health? Should poverty compromise human dignity and health?

Trafficking in organs – like trafficking in human beings or drugs – is demand driven. Combating this type of crime should not remain the sole responsibility of so-called “donor countries” like India. Recent trends in some western European countries towards less restrictive laws, which would allow greater scope for unrelated living donation and hence for abuse, are of serious concern.

Worldwide, the issue of organ trafficking is not so new. In the 1980’s, experts began to notice what was to become known as “transplant tourism” when prosperous Asians began traveling to India and other parts of south east Asia to receive organs from poor donors. Since then, other routes have opened up, such as to Brazil and the Philippines. Allegations are made against China of commercial use of organs from executed prisoners.

Organs sale continues in India despite new laws, which makes the practice illegal in most regions. Organ trafficking, like most criminal activities, is difficult to prove. But it should not be left to the media alone to investigate. Member states have a common responsibility to deal openly with this problem nationally, but also through multilateral co-operation at the international level – bringing together Ministries of Health, Interior and Justice.

Technological Development and Ethical Dilemmas faced by Modern World

Maria Norma Menezes

*Dr. Maria Norma Menezes, Reader in Philosophy, Govt. College of Arts, Science & Commerce,
Sanquelim – Goa. Res: House No.227, Praca de Rachol, Salcete – Goa. Ph.: 2776212*

Synopsis

The paper attempts to throw light on the ethical issues arising out of the developments in technology for example in Reproductive technology, with the capacity of man to redesign the entire human race. And his capability to tinker with human heredity and manipulate the genes to create altogether new versions of man.

It makes an attempt to tackle issues like Eugenics, Cloning, Surrogacy, Organ transplantation and various ethical questions asked with reference to these developments. It discusses IVF and its implications leading to marriages that will be genetically doomed.

The paper highlights man's faith in Science and Technology as a solution to all his problems. But this tremendous faith is lost and he gets a shock seeing that science and technology has not been able to do what he expected them to do. That is the reason he feels he is trapped in complex problems. The so called scientifically and technologically punctuated modern world is terribly sick with problems of suicide, Racial Discrimination, Euthanasia, Abortion, Clinical trials of human beings, loss of values etc. It stresses the need for introspection on the above issues and the need for enhancing the importance of values that are lost in modern world.

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