



## FROM BIRTH TO DEATH AND BENCH TO CLINIC

# THE HASTINGS CENTER BIOETHICS BRIEFING BOOK

for Journalists, Policymakers, and Campaigns

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### INTRODUCTION

## Why Bioethics Matters Today— A Journalist's Perspective

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# Why Bioethics Matters Today— A Journalist's Perspective

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We've had the "It's the economy, stupid," election, the values voter election, the national security election. We've watched our national conversation pivot around issues that land squarely on the kitchen table and challenge us to weigh what matters most. But it's easy to imagine that the twenty-first century conversation will include one for which we are ill-prepared, and yet somehow includes all the others: the challenge of exploration, and how we draw the maps and pave the roads into territory where we have never traveled before.

The history of medicine is a story of values that taper and swell as the challenges change. The human body itself was a wilderness in the centuries when piety precluded dissection, since it involved desecration of God's image—and might interfere with physical resurrection. Even when autopsies became legal, they were limited to the criminal and the poor—which was a bonanza for grave robbers supplying the medical schools. Nor are these antique qualms. Blood transfusions were still controversial through World War II. The notion of a heart transplant was horrifying to many people: this was no mere pump, but the seat of the soul. Even after Christiaan Barnard's successful operation in 1967, Malcolm Muggeridge called the surgery "the sort of thing the Nazis went in for," and the new president of the American College of Cardiology likened it to "sending a man to the moon without any hope of bringing him back, just to beat the Russians," reported the *New York Times*.

So something changes as time passes and the radical becomes routine. The idea of a "test tube baby" that alarmed so many people a generation ago became the salvation to millions of once child-

less couples. But something else is changing as well as our tools become more powerful, and that is the speed with which we have to process our progress. Each new breakthrough—the decoding of the human genome, the promise of stem cell research, the reengineering of agriculture, the challenge of cloning—are all coming toward us more quickly than our moral machinery can handle.

This was clear during the last midterm election, when the question of funding for embryonic stem cell research proved decisive in a number of contests—with voters commonly relying on sound bites for information. But reducing a complex scientific and ethical debate to a 30-second spot all but guarantees misunderstanding. Any patient or family faced with the ravages of Parkinson or Alzheimer disease or paralysis would be forgiven for believing that cures are just around the corner, if only researchers were unleashed to do their work with full federal funding and blessing. Hastings Center president Tom Murray recalled for me the time he appeared alongside Christopher Reeve to testify before a Senate committee on stem cell research. "Reeve said something to the effect that 'I am confident that stem cell research is going to cure me and allow me to get out of this chair,'" Murray recounted. "I was sitting at the table and I was heartbroken. He looked terribly frail. And I knew, and I was pretty sure that he knew, that if cures were going to come, it was going to take many years. And that his particular injury to the spinal cord was probably not going to be one of the first things they were going to be able to fix. So I was heartbroken by the spectacle."

Reeve's goal, like that of so many other patients and their advocates, was to keep up the pressure

and insure that every avenue of research was being pursued. But this poses a challenge not just to patients and politicians and scientists, but to every citizen as well.

Scientists don't like to tiptoe; they want to gallop. This is natural and is why regulations are useful in the first place—especially on the biotech frontier, where all kinds of morally complicated temptations lie. Balancing risks and rewards is a medical challenge; redefining what we mean by being human is a moral one. Figuring out where to draw the lines is, increasingly, a political one. And so a whole new kind of conversation is going to have to occur.

Many of the hard questions arise at intersections, not just between science and ethics but encompassing economics, politics, and faith. A national discussion about what should and should not be permissible when it comes to making babies

or curing disease or growing food, requires a common language and honest brokers to guide the discussion and keep it fair and factual. This is where bioethicists play a fateful role—not just as conveners but as educators, laying out the terms of debate, culling the data, stripping the issue bare of superstition or ideology or agenda and inviting us all to walk around the challenges before us, to view them from all angles.

We are all about to go back to school; the lessons are likely to be hard and confusing. So we all owe a debt to the scholars and scientists and ethicists who have been quietly working through these issues for years and can help us find our way. *From Birth to Death and Bench to Clinic: The Hastings Center Bioethics Briefing Book for Journalists, Policymakers, and Campaigns* is an invaluable text for obtaining our new degree.