

## GERIATRIC GENOCIDE

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An indication of western culture's maverick-styled independence is its infatuation with manipulating the details surrounding death. End of life decisions are currently a forensically fought for and emotionally charged issue demanding a biblical response. The Christian voice need not be a reactive retort, but ought to be a profitable product of prayer and synthesis of the scriptures in addressing this dilemma. The title, "Geriatric Genocide" zeroes in on the thoughts and motives affecting our communities across the nation and around the world. The dimension of medical bioethics termed euthanasia is often shrouded with political motivations in selectively killing the "unwanted." Although this article concentrates primarily on end of life issues concerning the elderly, application may be made as well to persons with terminal illnesses or disabilities.

### **Coming to Terms**

Since certain terms create accurate communication, it is imperative to identify some basic definitions. Euthanasia has been translated from the Greek to literally mean a good death, or death without pain or suffering. There are two types of euthanasia being practiced today. Active euthanasia, or "mercy killing," is defined as "the intentional use of medical technology to induce or hasten death, with or without the patient's consent." The other form is passive euthanasia, also termed "letting die." This definition incorporates "the withholding or withdrawal of medical means, and allowing the terminally ill to die as a consequence of the disease process." The Christian view ought to be found in judicial compassion, just shy of the latter view.

The Uniform Determination of Death Act (UDDA) of 1991 defines death as (a) the irreversible cessation of circulatory and respiratory functions and, (b) irreversible cessation of all functions of the entire brain, including the brain stem. This criteria ought to be strictly adhered to for the benefit of the physician, hospital or home-care staff, and the patient.

The Hippocratic Oath, sounded forth from medical schools for hundreds of years, has recently been challenged. It states in part,

I will use treatment to help the sick according to my ability and judgment, but will never use it to injure or wrong them. I will not give poison to anyone though asked to do so, nor will I suggest such a plan.

Physicians who once adhered to these principles to restore life, have pushed the boundaries to include aiding a patient's desire to die. The current deterioration of this once sacred pledge is the result of the Kevorkian debacle.

Poorly chosen colloquial expressions further cloud this subject. Terms such as "death with dignity," "right to die," and "quality of life" are common examples of the attempt to be autonomous within the society. The Christian should see these as rebellion in the face of God's sovereignty. "Death with dignity," for example, involves an individual's idea about when to die. Their desire to be a god unto themselves empowers them with the belief that they alone are capable of deciding when their life should end. As far as the term "right to die" is concerned, the scriptures say that death is inevitable. Everyone is bound for the grave. Since "it is appointed for man to die once," according to Hebrews 9:27, no one needs a "right to die." And in regards to the "quality of life," the question needing to be asked is what defines this "quality," and who is to determine the criteria for this "quality"? What may seem suitable for one family member may not be medically stable across the board. Behind each of these terms lies a subtle hidden agenda promoting active euthanasia. Actively seeking the end of one's life is not only dangerous, it is plainly wrong in the eyes of God. Solomon reminds us of the balances in life in Ecclesiastes 3:1-2: "To everything there is a season, a time for every purpose under heaven: A time to be born, and a time to die." Euthanasia has no place in the Church.

### **Basic Principles**

In guarding against the thrust of terminating treatment or hastening death, three biblical principles may be used in reference to geriatric genocide. They can be found under the protective umbrella of the sanctity of human life. They are (I) The Sixth Commandment, (II) The Image of God, and (III) The Lord of Life. These condensed points can be found in *Biblical Healing for Modern Medicine* by Dr. Franklin Payne.

The sixth commandment, "Thou shall not murder," is at the core of understanding the significance of the sanctity of life. The Larger Catechism expounds this in sharp contrast to the secular responses of the day. Questions 135 and 136 define both the duties required and the sins forbidden in accordance with the sixth commandment in very practical terminology. Duties bind the Christian to

preserve the life of ourselves and others by resisting all thoughts and purposes, subduing all passions, temptations, and practices, which tend to the unjust taking away the life of any,... comforting and succoring the distressed, and protecting and defending the innocent.

The forbidden acts found in the catechism are,

all taking away the life of ourselves, or others, except in case of public justice, lawful war, or necessary defense; the neglecting or withdrawing the lawful and necessary means of preservation of life.

The Church has the resources spelled out in response to these two questions, and the responsibility to be actively involved in the care of its elderly members. They are to be treated in a manner similar to, and consistent with the value God has given to human life for the length of that life. Pastors, elders, and even common parishioners need to be involved in developing a practical plan in the care of the elderly in their last days.

Every person, no matter the circumstance surrounding the conception, is a precious and unique creation made in the image of God. "So God created man in His own image; in the image of God He created him; male and female He created them" (Genesis 1:27). This truth is also echoed in the New Testament in I Corinthians 11:7, "since he is the image and glory of God," and in James 3:9, "who have been made in the similitude of God." The word *image* speaks not of physical attributes like hands and a face, but addresses the likeness of God's character.

Just as God has multiple attributes, He chose to create man with similar dimensions paralleling His own. We see this from several points. God is Spirit, and He gave man a spiritual nature, as seen in James 2:26, "For as the body without the spirit is dead..." God is holy, and man has a sense of failure in meeting a holy standard according to Romans 2:15, "who show the work of the law written in their hearts, their conscience also bearing witness, and between themselves their thoughts accusing or else excusing them." God is love, and I John 4:19 plainly states that "We love Him because He first loved us." God is sovereign, and has empowered man with dominion over the natural world explicitly given in the book of Genesis. These attributes demonstrate the image of the Creator, and serve as a reminder to treat the elderly with respect because they, too, were once made in the likeness of God.

All of life's aspects are in the hands of the Creator, and each life may only be taken at His direction, with His discretion, and in His time. God alone is the Lord of Life. It is He who breathed into the nostrils of man, making him a living being. Man having both a physical and spiritual dimension, needs to see himself under the authority of his Creator. His altitude ought to reflect what the psalmist in Psalm 139:13-16 so beautifully states in praising God for fearfully and wonderfully forming him in his mother's womb. The Lordship of God is found elsewhere in scripture as in I Corinthians 6:20, "For you have been bought at a price; therefore glorify God in your body and in your spirit, which are God's," and in Romans 14:8, "Therefore, whether we live or die, we are the Lord's." Death is often viewed as a technological failure in the medical community, but the Christian can know that the Lord of Life is in control at all times. This is reassuring in seeking an opportunity to comfort and encourage the frail and failing.

In defining the two aspects of death found in the scriptures, spiritual death is the consequence of sin as mandated by God in the beginning. Spiritual death is eternal separation from God. It began in the garden when Adam and Eve ate the forbidden fruit, and has been handed down throughout all the generations. God, in His great grace, has provided the perfect cure for spiritual death through His Son, Jesus Christ, as evidenced in Ephesians 2:11, "And He made you alive, who were dead in trespasses and sins."

There is no concrete definition in scripture for physical death, but the general view seems to be that death comes when signs of life are absent, primarily the cessation of man's breath. "And they struck all the people who were in it with the sword, utterly destroying them. There

was none left breathing” (Joshua 11:11). Psalm 104:29 says, “You take away their breath, they die and return to their dust.” Many saints are remembered throughout scripture in their death. It is seen as a natural and unavoidable part of life. When combating the sinful theorems of the secular position of euthanasia, a fundamental understanding of these simple truths should shine forth.

### ***Suffering and Sanctification***

The physician’s arsenal is packed and ready for use. Medicine has become a big business, and caring for some patients costs hospitals and insurance companies money. Active euthanasia would offer an easy solution in snuffing out the “undesirable,” the “unfit,” or the “unwanted” as cost effective. Their claim might be that an early death is in the interest of all concerned, i.e., the hospital could accept someone more “worth while,” the insurance companies would have less paperwork to handle and be richer, and the family wouldn’t have to watch their loved one suffer.

Suffering, however, is a given part of each life. It should not be a valid criterion for which to seek death. Paul says in Romans 8:18, “For I consider the sufferings of this present time not worthy to be compared with the glory which shall be revealed in us.” Suffering is a means of sanctification, and it becomes the responsibility of the church body to minister to those that suffer. Comforting others requires time and self-sacrifice. It focuses on esteeming others as more important, and observing the Golden Rule of doing unto others. 1 Peter 4:7 is a reminder to be hospitable to others without complaint, and verse 19 of the same chapter says, “Therefore let those who suffer according to the will of God commit their souls to Him in doing good, as to a faithful Creator.”

### ***Showing Godly Compassion***

In ministering to the sick and dying, and setting aside all thoughts of hastening their death, some principles must be kept in mind. Being merciful as the Good Samaritan was merciful to the wounded man he found along the roadside, demonstrates God’s mercy (Luke 10:25-37). God is a merciful God, “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 tribulation, that we may be able to comfort those who are in any trouble, with the comfort with which we ourselves are comforted by God” (2 Corinthians 1:3-4). Efforts must be made to keep the aged and infirmed as comfortable as possible, and minimize their pain and/or suffering. Medical treatment that is not invasive, intrusive, or excessive ought to be sought out and given at all cost.

Another practical means of showing compassion is to use words of truth and kindness. Proverbs says that, “the tongue of the wise promotes health” (Proverbs 12:18), and “Anxiety in the heart of man causes depression, but a word makes it glad” (Proverbs 12:25). Proverbs 16:25 is a familiar passage; it reads, “Pleasant words are like a honeycomb, sweetness to the soul and health to the bones.” Words, and how they are used can be a much needed distraction from ailments, and offer great comfort and encouragement to those who are suffering. Reciting the

truths of scripture such as the providence and sovereignty of God, and His great compassion can be very reassuring to someone in the face of terminal disease or death.

Although prayer is mentioned lastly in caring for the elderly, it is certainly not the least important. James says, “The effectual fervent prayer of a righteous man availeth much” (James 5:16). Petitions made on behalf of the sick increase our faith. There is security and assurance for the dying when they know they are being prayed for. Praying with and for those in need also demonstrates kindness and care.

## **Conclusion**

Since medicine as a cure for death ultimately fails, the Christian ought to be equipped with practical recommendations to help sustain the long term care of the dying according to biblical standards. The aspects of health care that either “do everything” or “do nothing” should be addressed before reactionary decisions are made based upon emotions rather than thorough and thoughtful discussions, preferably with well-informed pastors, elders, and medical personnel.

Geriatric genocide is currently being legislated into the physician’s arsenal by foreign and state governments. The Church as well as individuals, needs to be prepared to give an account of the truths contained in scripture to retaliate the infernal thinking of modern medicine in light of euthanasia coining under the guise of autonomy and civil liberty. Death is inevitable, but if the final stages of life are approached within a biblical, working theology of practicing true religion, and observing the sanctity of human life, the foot soldiers of Christ will certainly be marching in the right direction.

“Precious in the sight of the Lord is the death of His saints” (Psalm 116:15).

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## **Recommended Readings**

*Healing and the Scriptures*, by Dr. Martin Lloyd-Jones (physician turned pastor)

*Making Biblical Decisions*, by Franklin Payne, Jr., M. D. (cofounder, *Journal of Biblical Ethics in Medicine*, Assoc. Professor at the Medical College of Georgia)

*Medical Ethics*, by John Frame (Professor at Westminster Theological Seminary in California)

*Principles of Conduct*, by John Murray (Professor at Westminster Theological Seminary, Philadelphia)

*The Christian View of Man*, by J. Gresham Machen (founder, Westminster Theological Seminary)

*The New Medicine*, by Nigel M.de S. Cameron (leads post-graduate program at Trinity Evangelical Divinity School)