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**WHAT KIND OF BIOETHICS DO WE NEED?
CONCLUSIONS FROM THE DEBATE CONDUCTED
IN POLAND AS REGARDS TO EXPERIMENTS
ON EMBRYONIC STEM CELLS****

1

Ethical problems and dilemmas imposed by developments in medicine, and especially of medical genetics, have raised the question the of possibility of finding rational solutions in value conflicts and the role that could be played by ethics. If ethics is to help medicine in overcoming practical moral problems it should provide a theoretical basis to allow the analysis and solution of these issues. This is of particular importance in the most popular assumption that bioethical discussions should precede possible legal or strictly legal solutions. Taking into account the methodological problems that modern ethics has to face, bioethics appears to be not only a field of considerable practical importance, but also of vital theoretical significance. From the philosophical point of view, meta-ethical issues are of particular interest, and are undertaken in all kinds of bioethical discussions concerning not only the possibilities of justifying normative judgments, but also the method of selecting and analysing moral issues in medicine.

When I was selecting the problem of experiments made on embryonic stem cells as a topic for considerations, I set three goals for myself. First of all, to characterise the discussions held in Poland on this issue – the essence of the dispute and arguments used within. Secondly, to analyse the form of conducting of such a discussion from the point of view of models of practicing bioethics as distinguished in literature. Thirdly, to present for this

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example more generalised philosophical and methodological reflections concerning ways of solving problems in the scope of bioethics and the role of bioethics. I hope my speech to be treated as a preface to discussions on the question posed in the title, and namely – what kind of bioethics do we need?

I am going to analyse the first of those issues by referring to the social discussion accessible in the Internet¹ concerning the standpoint of the Polish government on the issue of experiments made on embryonic stem cells. In Poland no such experiments are being carried out and so this issue has not yet been regulated. Owing to Poland's accession to the European Union the Polish government is nevertheless obligated to present its standpoint in this issue.² The debate *Stem Cells – Life for a Life* was initiated by the Minister of Science and Informatisation in December 2003. Scientists, politicians, representatives of the Catholic Church and priests of different religions have taken part in five meetings.

Experiments on embryonic stem cells have a great therapeutic potential. Stem cells can be multiplied and developed so that they can form cells of various tissues, e.g. neuron forming cells or muscle forming cells. Scientists are of the opinion that such experiments can allow the application of stem cells to repair or reconstruct dysfunctional organs or tissues in the future. This would facilitate working out therapies for diseases of the circulatory system, Parkinsons, Alzheimers, leukaemia, diabetes among others.

The draft presented for discussions (in conformity to propositions of the European Union) allows the possibility of conducting and financing experiments on human embryonic stem cells on the condition that their purpose should be saving of human life or protecting a human being from consequences of serious diseases. The same criterion should also be applied in utilisation of stem cells in medicine for diagnostic and therapeutic purposes.

This research must conform to the following conditions: first of all, only cells or cell lines coming from a documented source may be used; secondly,

¹ Information about the debate dedicated to the application of stem cells in scientific research is accessible on the Internet page of the Ministry of Science and Informatisation at the address: <http://www.mnii.gov.pl/komorkimacierzyste/index.html>. This page also shows other documents directly connected with this issue.

² During a session held on 26th November 2003 the Council of Ministers formulated its standpoint concerning the utilisation of embryonic stem cells for scientific research, which stipulated that a representative of Poland participating in the EU Council session “would speak for assisting studies on stem cells of assumed tissue differentiation. In future this direction for research may led to application of those cells in repairing or reconstruction of dysfunctional organs or tissues. On the other hand, as regards utilisation in medicine of other types of stem cells for diagnostic and therapeutic purposes, the Polish representative would speak for the necessity of further meritoric discussions”.

human embryos used to obtain stem cells or for creation of cell lines are surplus embryos (produced as a result of medical in vitro fertilisation to initiate pregnancy, but discarded if they are not to be used for reaching the assumed goal); thirdly, embryo donors have expressed written consent of their own free will to this particular usage of those embryos; fourthly, embryo donors are not to expect any material or financial profits.³

Also emphasised is the necessity of conducting intense research on the utilisation of other type of stem cells – somatic cells (differentiated into particular tissue type, obtained from adults) and cells from cord blood.⁴

The procedure of taking samples of stem cells from embryos causes the loss of possibilities for further development. Consequently, the debate is whether it is feasible to justify morally destroying of living human extracorporeal zygotes with the intention of saving prolonging the life of patients with incurable diseases in the future. In such a way it refers to the issue of moral status of zygote, embryo and foetus which had been subject of discussions in bioethics. It also concerns the freedom of conducting scientific studies, the value of research and responsibility of scientists.

Two different ethical standpoints are confronted in the discussions on those issues. The first considers the execution of such experiments as violation of fundamental principle of protecting the value of human life, which should be protected right from the very beginning. According to the second standpoint – experiments may be considered to be morally permissible on similar principles according to which justified are transplantations from a deceased donor – saving one life at the cost of one which cannot be saved. Surplus embryos have no chance for further development and are consequently destroyed.

Opponents of experiments done on embryos have also drawn attention to the fact that:

– such experiments are in conflict with the Constitution⁵ and with the Code of Medical Ethics⁶;

³ Debate on application of stem cells in scientific research, <http://www.mnii.gov.pl/komorkimacierzyste/index.html>.

⁴ The Polish Scientific Research Committee was for intense assisting in research on stem cells differentiated into particular tissues as such experiments may lead to applying such cells in repairing or reconstruction of dysfunctional organs or tissues. It also called for meritoric discussion on the utilisation of embryonic stem cells in medicine for diagnostic and therapeutic purposes. See standpoint of Scientific Research Committee *W sprawie badań nad komórkami macierzystymi i wykorzystaniem ich w medycynie* [On Studies of Stem Cells and their Application in Medicine] approved during a session of the Committee on 18th September 2003.

⁵ Articles 38 and 39 of the Constitution of the Polish Republic speak of legal protection of human life and prohibition of submitting it to scientific research with voluntarily granted informed consent.

⁶ Article 24 item b of the Medical Ethics Code contains a prohibition of conducting medical experiments on a human being in embryonic stadium.

- initiation of tests on a human being should be preceded by successful research on animal stem cells (responsibility borne by researcher);
- they should be preceded by introduction of legal regulations and control institutions.

Remaining arguments of research advocates have referred first of all:

- to freedom of scientific research guaranteed by the Constitution;⁷
- to moral obligation of a physician to seek new therapies that would save lives of ill patients;
- for the good of future generations which could make use of acquired knowledge;
- to possibilities of strict regulating access to stem cells that could prevent abuse.

The debate organiser was of the opinion that possibilities of reaching a compromise on the issue of making use of stem cells for scientific research could be sought in three different ways. First of all – in an insufficiently explicit definition for the concept of ‘human life’, which allows putting into question classifying a foetus a few days old to this category. Secondly – in the opinion that life of a child or an adult person is more valuable than the life of a frozen surplus foetus. Thirdly – in universal social acceptance of new medical technologies (for example transplantations, assisted procreation), which initially aroused objections. However, in my opinion the first two assumptions could be put into question, and the analogy between transplantation of organs and transplantation of embryonic stem cells arouses serious objections.

The debate that is being held in the ministry has not helped work out explicit conclusions, but – in the organiser’s opinion – constituted a milestone in the process of their preparation. On the ministry’s Internet page one can find out that as a result of the held discussion an assurance was gained that “if consent is granted to the utilisation of embryo stem cells for research studies, persons opposing the fact would not change their standpoint, but would respect the government’s decision”.⁸

The discussion concerning studies made on embryos should be of an ethical character. Yet an analysis of this discussion shows that of basic importance proved to be pragmatic arguments. The Polish standpoint has no binding importance for other countries which are already conducting or intend to conduct such research. Scientific research in member states of the EU are financed from common funds, also those from Poland. And so if we are financing such studies, we should also have the possibility of utilising

⁷ Article 73 of the Constitution of the Polish Republic assures freedom in conducting scientific research and publishing the obtained results.

⁸ *Stem Cells – Life for a Life?* Conclusions from a debate, <http://www.mnii.gov.pl/komorkimacierzyste/index.html>.

their results. However, the question is whether we would have the right to making use of those studies if we do not grant our consent to their implementation. During the debate the same question was frequently asked, namely: what should we say to the mother of sick child whose life we could have saved if we had agreed to such experiments? Also rather characteristic was the standpoint of physicians, who emphasised that although opinions of ethicists and clergymen should be respected, it is physicians who could take decisions on issues concerning medical therapies, as they are the ones who in everyday practice keep rescuing human life.

I have the impression that this dispute clearly indicated the limitation of generally accepted bioethical paradigm. The so-called 'regulation ethics' are considered to be such a paradigm, which occupies a moderate standpoint between complete rejection of new technical possibilities in medicine and their thoughtless acceptance [Callahan 2]. This is due to the fact that it turned out the necessity of taking decisions under pressure of pragmatic arguments was not favourable to working out an effective method for solving moral problems. What I have in mind here is a method allowing reaching an agreement based on rational premises, objective data and generally acceptable values and principles of conduct.

2

In bioethical literature one may find a lot of varied approaches to moral problems in medicine. Works on this issue are not only written by physicians and ethicists, but also by philosophers, lawyers, cultural anthropologists and biologists. Bioethics is considered as an interdisciplinary field and methodologically differentiated. Four fields of deliberations are distinguished in bioethical considerations: theoretical bioethics, clinical ethics, regulatory and policy bioethics and cultural bioethics [Callahan 1, pp. 247–256]. As the goal of clinical ethics is working out a method for taking decisions in individual, controversial medical cases, we may exclude it from our further deliberations.

The field of studies that are characteristic for cultural bioethics is limited to comprehending the impact of historical, cultural and social conditions on forming of a system of values assumed by the society and solving of bioethical problems (for example the conflict between autonomy and paternalism). I am convinced that in issues of experiments on embryos drawing attention to the wider cultural aspect is of particular importance. This is due to the fact that respect for the life of a human being is the basic axiological assumption of our cultural region.

The purpose of regulatory bioethics is to reach a compromise on the level of practical principles for conduct, delimitation of rules that may be accepted by all, despite possible differences in axiological and ethical standpoints. I have doubts as to whether in the issue of experiments conducted on embryos such a compromise is at all possible. The problem is that we are not only faced with having to choose between the life of embryos and the life of incurable ill patients. The answer that we are facing is much more general in character – and namely whether implementation of generally acceptable medical targets can justify our violating the basis of our culture. I will return to the above issues in the last part of this paper.

For bioethics considered as an ethical discipline, of primary importance is of course theoretical bioethics, the task of which is seeking general philosophical and ethical bases for solving of moral problems in biology and medicine. Yet the difficulty is that we do not have at our disposal a single generally accepted ethical theory which could be used for overcoming moral medical problems. Conflicting ethical theories originate from different premises and assume different criteria for moral appraisal. Depending on the fact which of those theories we want to apply in overcoming moral problems we may reach other moral standpoints, at times quite differing ones. This may be seen on the example of the dispute for euthanasia or assisted procreation. The situation is similar in the case of research on embryo stem cells.

Nevertheless the mere stating of divergences in ethical standpoints related to the problem of experiments on zygotes is not all that this discussion is about. The main task of bioethics should not be constituted by unfeasible striving for reaching unanimity, but rather finding an answer to the question of what substantial issues related to valuation should be taken into account to be able to create a basis for national and responsible decision. The ability of perceiving the world simultaneously from a few perspectives and appearance of conflicts between different values indicates the complexity of ethical issues [Nagel]. This also means giving up postulating the justness of the determined ethical theory [Hołówka, pp. XI–XXXIII] and forces to seek good reasons in favour of one's standpoint.

In the above mentioned discussion an assumption was made that one of vital arguments is the lack of a precise definition for the concept of a human being. I think that this does not merely concern criteria of humanity and criteria of a person, but first of all the moral status of a zygote. Literature on this issue is extensive and presentation of main standpoints in dispute on this topic would be far more than this paper. Yet one should bear in mind that associating the moral status with the level of an individual's development does not necessarily lead to considering a zygote merely as a biological material that does not require any protection. I disagree with the opinion

[Łukowska, p. 35] that objections to therapeutic cloning are expressed by persons who assume the same anthropological and axiological standpoint.

The second of the arguments concerned the issue of appraisal of life values on its various stages. Two main standpoints clash in discussions on this topic. In conformity to the first one the life of every human being has an internal value. According to the second one an individual's life value is determined by the possibility of leading his individual life and conscious wish of continuing it. Objections had been raised in literature to both of them [Przyłuska-Fiszer]. One should bear in mind that the conviction about a special value of conscious individual life of a human being may be associated with respect for symbolical value of human life. The problem of experiments carried out on embryos must additionally be perceived as a conflict between respecting human life and progress of science, and not as a conflict between the life of a child and the life of an embryo.

The next argument refers to social acceptance of new medical technologies, which aroused objections in the phase of their introduction. Nevertheless, even if experiments on embryos obtain social acceptance, this would not be a sufficient argument in favour of their justification. Referring to the example of procreation is not correct in this situation. The purpose of assisted procreation is to treat infertility and having the long awaited child. It may be expected that the development of medical technologies would allow the elimination of surplus embryos, and legal regulations would for example facilitate prenatal adoption. Scientific research executed on embryos go in the opposite direction. They are aimed at working out a method of treatment that would assume utilisation of therapeutic cloning as routine medical process. The most important problem in transplantology is, as is generally known, immune reaction of rejecting an implant. Such a reaction can be avoided by using an autologic implant in relation to the recipient [Zaremba, p. 82]. Making use of a new method would be possible on the condition that a cell line of stem cells bred of an embryo through cloning, and containing the same genetic material as the patient. Moral doubts are then aroused not only by the initial phase of experiments in this scope, but the mere concept of treating diseased persons by making use of embryo stem cells.

The presently presented research plan does not presume the possibility of creating embryos. However, the same method of argumentation, which allows experiments on extracorporeal zygotes owing to their presumed importance for preparation of new treatment methods could be used for therapeutic cloning. The question "What can we say to a mother of a sick child, whose life could be saved if we would have allowed conducting experiments on embryonic stem cells?" could then be reformulated in the following way: "What could we say to the mother of a sick child, whose

life could be saved if we allow therapeutic cloning and application of a new treatment method?”. The pressure exerted by researchers on obtaining consent to experiments on the existing surplus embryos would in the future be expanded by the right of creating new embryos. Limitations of research material to already existing embryos was one of the reasons for which the research plan of experiments on embryos, considered by some countries to be overly restrictive, has not gained approval in the European Union.

Advocates of experiments insist that therapeutic cloning results in the same moral problems as transplantology medicine and may be regulated in the same way. In that way they forget that the basic criterion justifying transplantation after brain death of the donor is his expressing consent for giving away his organs while he is still alive. As regards transplants from a living donor particular importance is moreover gained by the criterion of doing no harm. Principles of conduct assumed in transplantology do not justify depriving one person of life to save the life of others.

Consequently it seems that an analyses of all the factors in the compromise tends to disincline to continuing experiments on embryos rather than having them legalised. It is also worthy of taking into account that lack of consent to such research could also lead to intensified tests on stem cells coming from a different source.

3

The debate concerning experiments on embryo stem cells inclines to drawing a conclusion about imperfection of tools we have at our disposal for overcoming practical moral problems and about the necessity of analysing the basic assumptions on which ethical deliberations in bioethics are based. The most important and influential study, which undertakes in bioethical literature the issue of medical ethics is *Principles of Biomedical Ethics* [Beauchamp, Childress]. One of its assets is explicit explanation of the value system, on which bioethical deliberations should be based (respect for autonomy, nonmaleficence, beneficence, justice). In my opinion the model of medical ethics proposed by the authors constitutes a good basis for presenting and analysing moral medical problems, but not for their unambiguous solution. However, it is being very frequently applied in regulatory bioethics in determining principles we should use when we introduce in practice a particular method of prophylactics, treatment or diagnostics, as well as in determination of legal regulations. Such a way of applying bioethics is certainly needed, and even indispensable, especially in those cases where a need arises to assure that proposed treatment methods fulfilled

criteria vital for medical ethics and were in conformity to binding legal regulations (for example transplantation therapy). Nevertheless, it is certainly not sufficient in a situation in which the basic question concerns the justification of undertaking some medical procedure or a type of scientific research. In such a case a question certainly arises as to what ethical basis do we have to take such decisions and what should we based them on.

Bioethics considered as an instrument for achieving unequivocal solutions and formulating propositions for legal solutions ceases to be a philosophical deliberation on problems resulting from the development in science and medical practice. It loses the status of a scientific discipline practiced in conformity to principles of rational discourse and starts to be subject to social, economic and ideological influences.

The perspective of the possibility of applying embryonic stem cells in medical therapy is favourable to posing philosophic questions exceeding by far the issue 'are such experiments permissible?'. The most important ones include the question concerning goals of medicine and values it should be subjected to, as well as a question for limits of morally permissible methods of prolonging and rescuing of human life. Yet I think that of particular importance is the question for the way in which this new form of therapy can affect the way of comprehending the value of human life, on the conviction about the unique and exceptional character of the life of every human being, and what changes in our culture and in the hierarchy of values approved by the society it would cause.

I am convinced that making an evaluation of therapeutic cloning dependent on the utilitarian character of this technique for implementation of assumed medical target, does not take into account a wider social, ethical and cultural aspect of executing experiments on human beings in their initial phase of existence. That is why an endeavour at seeking an auxiliary way to making an analysis and perhaps also solving conflicts of values that tend to appear should be undertaken from a wider cultural perspective. Perhaps a chance to reach an agreement is a change in the model of practiced bioethics, the ability free oneself from certain schemas that had been shaped during the past forty years? Maybe it would be better to go back to granting an answer to the questions posed by ethics in ancient times: How should one live to be considered an honest person, worthy of respect and happiness? Which values should be particularly appreciated in our culture? Which principles should be used by the society and which values should be protected to be able to maintain the basis of a particular culture? I do not know whether this aspect of discussions would be able to cope better with the situation of an existing conflict in values, but it Certainly would allow a wider perspective for describing and comprehending those dilemmas of values as are posed to us by contemporary science.

Some authors draw attention to the fact that in a situation of rapid technological development “human conscience loses its orientation” [Wolniewicz, pp. 155–166]. Acceptance of genetic engineering or embryonic engineering is indeed a choice between the ‘ethos of facilitation’ or the ‘ethos of limit’. The ‘ethos of facilitation’ means the acceptance of everything that facilitates the life of a human being, minimalises his suffering and prolongs his life. The ‘ethos of limits’ means being aware of the fact that there are some limits that cannot be crossed even if that would mean minimalising the suffering and would increase satisfaction and happiness of a human being [Hłowiecki, pp. 161–168].

In deliberations related to this issue contained are many factors, the most important ones of which concern: first of all, the fear of modern man of dying, expressed by a lack of acceptance of man’s finiteness and posing unfeasible targets to medicine; secondly, influence exerted by technology on forming of an utilitarian relation to human body in medicine; thirdly, insufficient language of morality and ethics to making an analysis of cultural revolution taking place in front of our eyes.

The fear of death and lack of psychological consent to the inevitability of death cause that the goal of medicine is being presented as a fight with diseases and the fight with death. Death ceased to be treated as an inevitable natural end of a human being’s life and has become a manifestation of a failure of medicine, a result of negligence of physicians or malpractice. It leads to an ever increasing fear, and the fear of dying along with ascribing an increasing value to all methods of prolonging of human life leads to unlimited acceptance of biotechnology, which taints a human being by a mirage of immortality [Grabowski, pp. 193–202; Wolniewicz, pp. 155–166; Musiał, pp. 167–180]. This creates a basis to posing questions about the essence of our culture, about the essence of man’s nature, the sense of death and the sense of suffering. In the opinion of some philosophers a cultural acceptance of man’s finiteness requires rejecting ‘the technological method of practicing medicine including its morally dangerous utopia of a world without diseases, suffering and death’ created in the second half of the 19th century [Szewczyk, pp. 141–154].

4

In bioethical literature the creation of a ‘bioethical movement’ is connected not only with the first heart transplantation and formulation of the so-called Harvard definition of brain death. Of importance was also publishing information concerning conducting medical experiments without consent

of studied persons, as well as regarding the application of non-medical (social) criteria of access to the programme of dialyses.⁹

An inspiration for bioethics was noticing possible conflicts in values which are associated with the application of new medical technologies and, as was written by A. R. Jonsen, defence of individuals against violation of their rights by medical institutions that have at their disposal constantly expanding possibilities [Jonsen]. And although such an interpretation does not take into account other factor essential for the development of bioethics, its echo is clearly noticeable in the title of an European bioethical convention – and namely Convention on Human Rights and Duties of the Human Being with Regard to the Application of Biology and Medicine. Bioethics introduced to medicine and medical ethics values, which find full acceptance in our culture, and which were not taken into account in a sufficient way in traditional medical ethics, such as for example dignity, respect for moral autonomy of a man, justness, truthfulness, privacy. Philosophical criticism of a model of a human being traditionally assumed in medicine led to forming of a holistic model, which emphasises apart from biological and psychical factors also the import of emotional, social, spiritual and axiological factors. I am of the opinion that those are rational advantages of bioethical reflections within the hitherto binding paradigm.

However, I am convinced that moral problems related to the development of genetic technology and experiments on embryos cannot be solved within regulatory bioethics. The discussion on this issue allows also the observation of a certain paradox related to the development in bioethics. Its task was supposed to have been the defence of values appreciated within a culture, which could possibly go into conflict with medical technology and criticism of biomedical model of a human being. Nevertheless, the ‘regulatory ethics’ could possibly lead to making experiments on embryos and therapeutic cloning legal. In such a way it would violate the majority of principle for conducting experiments that had been worked out since the time of the Nurnberg Code (criterion of autonomy, nonmaleficence) and would lead to resurrection in medicine of reductionistic and biological model of a human being. Of course this leads to understandable anxiety, which cannot be alleviated by information concerning European bioethical standards related to the prohibition of cloning of human beings [Jasudowicz, pp. 213–225], as they only concern

⁹ I have in mind an article written by H. Beecher entitled *Ethics and Clinical Research*, and an article published in 1962 in the weekly called *Live* entitled *They Decide Who Lives, Who Dies* dedicated to the ethical committee in Seattle, the task of which was implementing on non-medical basis a selection of patients for an implemented programme of dialysis [see Jonsen].

reproductional cloning. Although the Bioethical Convention prohibits in article 18 creating of embryos for scientific purposes, nevertheless it makes the issue of experiments on embryos in vitro dependent on legal regulations binding in a given country [EK].

One could say in a metaphoric way that the story of bioethics has completed a circle. We are now once again in the point where it all started and we should now again start to think what kind of bioethics we need. Or in other words, in what way should we defend values that are substantial to our culture against regulatory bioethics?

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Jakiej bioetyki potrzebujemy? Wnioski z toczonej w Polsce dyskusji na temat eksperymentów na zarodkowych komórkach macierzystych

Zadaniem artykułu jest analiza wniosków, płynących z debaty na temat eksperymentów na zarodkowych komórkach macierzystych, dla refleksji bioetycznej. Autorka postawiła sobie trzy cele. Po pierwsze, scharakteryzowanie toczonej w Polsce dyskusji na temat moralnej dopuszczalności prowadzenia eksperymentów na zarodkowych komórkach macierzystych – istoty tego sporu i wysuwanych w nim argumentów. Po drugie, zanalizowanie formy prowadzenia tej dyskusji z punktu widzenia wyróżnionych w literaturze przedmiotu modeli uprawiania bioetyki. Po trzecie, przedstawienie na tym przykładzie pewnych ogólniejszych refleksji filozoficznych i metodologicznych, dotyczących sposobu rozważania problemów bioetycznych i roli bioetyki. W konkluzji Autorka stwierdza, że „bioetyka regulacji”, traktowana obecnie jako paradygmat refleksji bioetycznej, nie dysponuje odpowiednimi narzędziami do rozstrzygnięcia pytań etycznych i filozoficznych, wykraczających poza kwestię oceny użyteczności danej techniki dla realizacji postawionego celu medycznego i powinna zostać uzupełniona o „bioetykę kulturową”. Zwraca także uwagę na paradoks związany z rozwojem bioetyki, której powstanie wiązano z koniecznością obrony cenionych w danej kulturze wartości przed technologią medyczną. Akceptacja eksperymentów na zarodkowych komórkach macierzystych jest równoznaczna ze złamaniem wypracowanych dotąd zasad prowadzenia badań na człowieku i zmusza do zadania pytania, w jaki sposób powinniśmy bronić istotnych dla naszej kultury wartości przed „bioetyką regulacji”.