

PROCEEDINGS OF BIOETHICS SEMINAR/COURSE ORGANIZED BY CENTRE FOR BIOETHICS AND CULTURE (CBEC) AT KARACHI, PAKISTAN

Jawaid SA

Centre for Bioethics and Culture (CBEC) at Sindh Institute of Urology and Transplantation (SIUT) organized a five days seminar/course on Bioethics from April 4-9th 2005. The theme of the seminar and interactive course was "Foundations of Moral Thought: From the Greeks to Contemporary Bioethics." It was formally inaugurated by Prof Atta ur Rehman Chairman of Higher Education Commission on April 4th. The faculty included Prof. Abdulaziz Sachedina and Prof. J. D. Moreno from USA, Dr. M. Haytham Al-Khayat from WHO EMRO, Prof. Manzoor Ahmad, Mr. Jawaid Ghamadi, Prof. Farhat Moazam and Dr. Aamir Jafarey from Pakistan. The seminar in the morning was open to every one, hence it attracted a large number of physicians and others interested while forty participants were selected for the intensive course which included physicians, nurses, lawyers, representatives from the Pharma industry, hospital administrators and Journalists.

INAUGURAL SESSION

In his inaugural speech **Prof. Attaur Rehman** Chairman Higher Education Commission said that it was no more true that necessity is the mother of invention. We need people who have the strength to dream and then get them realized. Higher Education Commission is establishing linkage with Universities overseas. We have already established links with fifty de-

partments and universities in Britain funded by the government. Enough funding is available for exchange of personnel and joint supervision of research while funds are also available for mega linkages. We have established digitalized library in Pakistan which has access to 17,000 journals from all over the world. Sixty universities have been linked with fiber to enable delivery of nationwide lectures. Use of satellite is now possible for interactive lectures at distant places. We have a fragmented society by having different education systems. We need to uphold merit. That is why now we have established a fund with one billion rupees so that students who cannot afford to get education in universities and other higher education institutions could be provided funding. All admissions will be on merit and it will help integrate the society, he added.

Prof. Abdulaziz Sachedina a renowned religious scholar from USA in his keynote address emphasized the importance of establishing links between religion and medicine. We must get the public involved in serious discussions. At present we are not at all involved in the dialogue and the Muslim World, he said, was on the receiving end. Bioethics is not at all secular but totally religious.

Prof. Abdulaziz Sachedina further pointed out that human capacity to know rightness and wrongness of an act is prior revelation and this is which makes Islam so special. Human resources are capable of resolving ethical dilemmas because of God given knowledge. Man has a sense of security because of the role of faith in God. God is the ultimate healer whereas medical professionals are God's agents. In

Correspondence

Shaukat Ali Jawaid
e-mail: shaukat@pulsepakistan.com

Islam 9/10 of the issues are of *Moamalat* which relate to others in the community whereas only one tenth is of *Idbadat*. Religion, Prof. Abdulaziz Sachedina opined was much more than mere rituals. It involves meeting professional and inter professional responsibilities and responsiveness.

Speaking about the religious basis of moral actions Prof. Abdulaziz Sachedina said that professional ethics are part of inter human relationship There was believe in God and right things. We need to generate our own literature. We need to learn our ethics from Quran and not from Greeks. Western education system does not pay attention to Islamic ethics. We need to read Quran more intellectually but unfortunately at present we only read it for the dead. History of Islamic Medicine, Islamic laws and bioethics are not included in our medical education system. *IJMA* is the product of the community based on the agreement of its scholars. Speaking about the major rules for social ethics Prof. Abdulaziz Sachedina mentioned seeking public good. Necessity at times, he stated, over rides prohibition just like treating patients of the opposite sex. Islamic bioethics is based on principles of no harm and no harassment, protection against distress, necessity to avert probable harm. It calls for creating balance between individual and community. Medicine, he opined was thriving in the Islamic history and so was the religion. It is important that religion keeps pace with technology but it was not happening at the moment. For example in case of Down's Syndrome Kant believes that fetus should be aborted but all do not agree. The religion being taught from the pulpits, he opined, was not doing its job. We have the freedom to develop links in the Arab World so that we can take up issues which are ethically sensitive. Quran always wanted people to think and not close their minds. Our Fuqhas need to be trained. We need the support of Muftis and Fuqhas to whom the community listens and believes. It is important that centers of Islamic Learning are located at Karachi University and Punjab University in Pakistan.

Earlier **Prof. Farhat Moazam** Chairperson of CBEC in her speech said that this seminar and intensive course was the first academic activity by CBEC which was established last year. Bioethics is a multidisciplinary field and it has rapidly spread from the West to the developing world. Most of the bioethics institutions are located in industrialized countries. We have a dedicated faculty to explore the Muslim values. Efforts of various individuals interested in medical ethics are commendable but it needed national push. Now a National Bioethics Committee has also been formed. CBEC will help establish linkage with other institutions which are relevant to our needs and the region. She also quoted a *Hadees* which stated that "*Acquire wisdom wherever it might be. The ink from the pen of scholar will be compared with the blood of martyrs and it will be found superior*".

Prof. Adeebul Hassan Rizvi the noted kidney transplant surgeon who founded SIUT also addressed the gathering and gave reasons for the establishment of CBEC at SIUT which had become necessary to take ethical decisions to problems which they encounter every day.

FIRST DAY

Prof. Manzoor Ahmad a well known social scientist and philosopher from Pakistan was the guest speaker on the first day. In the first part of his presentation he talked about Western Moral Thought- The Greek Origin. He pointed out that one has to find a rationale and justification for certain actions. To write is easy but to understand it is extremely difficult. Virtue is knowledge. It is also important to keep one's head on one's shoulders. Prof. Manzoor Ahmad was of the view that as a result of the recent American thrashing, the Muslim World will learn some lesson.

These days in Pakistan we hear a lot about moderation and enlightenment but moderation by an Army Man, a Philosopher and a Politician, Prof. Manzoor Ahmad stated will be different. Kant, he said, was the father of enlightenment in Europe. By nature I am an optimist in the morning and pessimist in the

evening. What it is and what you want to do is decided by moral laws. Replying to a question as to how long we will keep on experimenting in health sector, Prof. Manzoor Ahmad said that since we are experimenting without knowledge and planning, we are not getting the desired results. Nothing is good except goodwill and exception is always followed by objection, he remarked.

Second part of his presentation was on Western Moral Thought- the Contemporary Era. In the afternoon in the interactive session, discussion on "Justice in a Life Boat: An exercise in Philosophy and Ethics" provided an opportunity for lot of mental exercise wherein the justification and rational of different viewpoints by the participants were discussed at length.

SECOND DAY

Prof. Farhat Moazam summed up the earlier days presentation. She pointed out that it was the Greeks who laid the foundations of moral thought. Ethics came from the moral thought. How do we determine what is right and what is wrong is based on virtue and vice? The Greeks were the first rationalist. At the end of the 6th Century Prophet Mohammad (PBUH) brought Islam. By the 7th century Islam had spread all over outside the Arab World. It then came in contact with other civilizations like Greece and Persian. Lot of thinking in those days was influenced by this contact between different civilizations and we witnessed golden age of Islam. In times of turmoil, human beings started thinking to find out a solution. It gave birth to some thinkers. Islam provided another source of knowledge. That is the time when we had great Muslim philosophers, Sufis, Saints, Physicians and Theologists. Later another source of Morality and Ethics was added and all this was based on Holy Quran and Sunnah. Then the question arose how to bring about a balance between all these. Islam certainly had a lot to offer as regards issues concerning morality.

Prof. Abdulaziz Sachedina talked about moral reasoning in Islam, Brain death and Is-

lamic Bioethics. He was of the view that to explore moral reasoning, we have to find justification for our decisions. It has its basis on rightness and wrong. He also talked about problems of human reasoning. In Islam the message giver is not a liar but he is trustworthy. No body saw God speaking to humanity but we believe it by revelation. Science challenges claims of revelation. Prophet as Messenger of God spoke to people. However, not all the issues are covered in revelation. It is not *muffasal* but provides general guidelines. Quran is briefer example of case studies. One should read Quran to derive universal principles.

Society Prof. Sachedina said is growing and changing. No society remains the same. Day to day changes take place and one has to evaluate the changes taking place. We are influenced by the books we read and discourse we hear. This is transformation of thought process. That is what Prophets do. God sends teachers as Prophets. Speaking about the process of thinking Prof. Sachedina opined that we are currently at the crossroads of history in our life. We must have confidence in our own actions. We need new understanding of revelations. Human beings are thinking animals. We look at *Shariah* to tell us. Prophets used to decide on cases. Quran and *Sunnah* are inter-related. For example details about offering prayers are not mentioned in Quran. There is no difference in message and the messenger. Theology is extremely important for us but unfortunately theology is grounded in the Muslim *Ummah*. In Quran solutions, Prof. Sachedina stated, are specific and not universal. In this thought process the decisions are based on moral reasoning.

Talking about Islamic Ethics, Prof. Abdulaziz Sachedina said that it is a separate discipline. It has two dominant positions. In Theistic subjectivism, rightness and wrongness are determined by God's commands. For example it is God's command that you must respect the parents as they are your benefactors. In the rationalist objectivism, right and wrong are objective moral categories that any reasonable person can apprehend. Islamic principles and

rules serve as bridge between reason and revelation. The divine command ethics require the principles to be anchored in sacred texts because without revelatory justification no ethical deliberations can produce solutions. All ethical decisions, Prof. Sachedina remarked are based on moral reasoning. The role played by practical reasoning in moral dilemma are curtailed or allowed depending upon evaluation of reason. In practical decisions, provisional conclusions are made about a case and all ethical decisions are open to revision. No *Fatwa* is final because our knowledge about medicine is limited. Since our information is not complete about a medical case, that is why any decision is going to be provisional. He particularly laid emphasis on the fact that in biomedical ethics, no *Fatwa* is final and jurists are still being studied. However *Shariah* is final but ethics can be revised. In Islam there is a possibility of revision based on further research and information on cases. There is no need to prolong the illness if cure is not possible.

Prof. Abdulaziz Sachedina further pointed out that we need to do our homework. Islam offers the most realistic legal system. There is an attempt to curtail reason as if Islam is enemy to reason. Just take the case of IVF clinics. These clinics are mushrooming in the Muslim World. The problems are connected with its permission. The process would require resorting to procedures that are considered forbidden in the Law. There are other technicalities connected with the artificial insemination. Child is considered a sign of successful marriage. It is a stigma for women who fail to get pregnant. *Shariah* requires that male patient should be seen and examined by male doctor and female patient to be examined by female doctor. Artificial insemination is not accepted by *Shariah*. Abortion is redefined as occurring only after fertilized egg has lodged in uterus. Rape was a part of weaponry by Serbs in Kosovo. Women had to undergo lot of psychological trauma. Psychological damage is just like physical damage. Speaking about *Ijtihad* in IVF, Prof. Abdulaziz Sachedina referred to the most important principle that is applied in

such cases which is the principle of priorities in order to prioritize circumstances that lead to achieve a certain goal. It requires careful analysis of risk and benefit to community. These common principles mean that there is no harm and no harassment. It is the right of an individual and group to reject harm and to avoid harassment. Woman's healthcare and in issues of guardianship; decisions are based on behalf of women. She must have a right to determine what is right and what is wrong. He also talked about the age of maturity in *Shariah* and its implications for individual consent, biological and intellectual maturity.

Relationship of Fiqah and Shariah

Mr. Jawaid Ghamadi a noted religious scholar from Pakistan was the next speaker who talked about the relationship between *Shariah* and *Fiqah*. In *Shariah* one has to believe in God and his Prophets and the Day of Judgment. Rest of the things keeps on changing. In *Shariah* certain basic principles where mind cannot decide or where there is a danger of some mishap has been made while all other issues have been left to intellect. In *Shariah* principles have been decided which are needed for the rest of the life. These principles are precise, comprehensive knowledge and suggestions about life. It covers *Ibadat* and relationship between man and women. In economics six principles are part of *Shariah*. Then punishment for certain crimes has been determined. In short only in those areas principles were given where there was no basis and man could make a blunder. In those issues where *Shariah* is silent, *Fiqah* is used making use of intellect.

Mr. Jawaid Ghamadi opined that we must not forget the fact that human beings can make mistake. The problems with the Muslim world are that soon after *Shariah*, we had large number of *Fuqhas* who were in hundreds. Some of them were outstanding *Fuqhas*. If the Muslim world had democratic culture, we would not have had any problems. *Shariah* and *Fiqah* are to different things. While *Shariah* is Final, *Fiqah*

is open to interpretation. In *Ijtihad* one can also think over it. It is extremely important to keep *Shariah* separate from *Fiqh*. The later is decisions made by human beings who can make mistakes and these decisions can be changed. This does not mean any disrespect to *Fuqhas*. They were all human beings. If we do not accept that, we will not find a way out and we will not be able to convince our new generations. As Muslims we must have open mind and listen to others. In this way we may accept something which we do not like, he added.

Islamic discourse on Brain Death

Prof. Abdulaziz Sachedina's next presentation was on Islamic discourse on brain death. The conventional definition of death, he stated, means cessation of cardiopulmonary functions, heartbeat and pulse. However the problem which Islamic discourse inherited is that with the developments in modern medicine, science can keep heartbeat and pulse functional with the help of ventilator. This necessitated finding new ways of engaging modern scientific traditions. He then referred to the Academy of Islamic Jurisprudence (AIJ) which is located in Makkah and functions under the auspices of Organization of Islamic Conference. It issues an annual publication that contains research by individual jurists and experts. It includes scholars of all thoughts since it has representations of scholars from Iran and Lebanon as well. The AIJ after careful deliberations has unanimously resolved that brain-stem death is another form of death. Whenever one solicits a legal opinion from a jurist, it is known as *Istifta*. The non-binding legal response from a jurist is known as *FATWA*. It is binding on those who accept that *Fiqh*.

Then the question arises who has the authority to define death- a medical practitioner or a jurist? Muslim medical experts rely on traditional arguments regarding the soul and where is the soul located? They define death the moment the soul parts from the body. Another problem arose when the Muslims were receiving organs but were not donating organs. Ac-

cording to Imam Ghazali the meaning of death is only a change of state. He believes that the soul survives after its separation from the body either in a state of suffering or comfort. This means that soul survives the body after death. In Islam human body is instrument of the soul. When we strike our hand, it is actually the soul that strikes. When the soul parts, the body is no longer under its command. But if the soul is captured, the eyes follow it. Therefore the living are advised to close the staring eyes of the dead. Talking about the tests to determine soul's departure Prof. Sachedina referred to physiological features that indicate the soul's departure i.e. cessation of breathing, limpness of the feet, looseness of the wrists and coldness of the body. If any of these conditions cannot be verified due to shock then the jurists delayed the determination of death until there is a change in the body's odor. According to another noted religious scholar Yasin from Jordan, human soul and its presence and absence remains linked to brain. Functions of heart are located in the brain. It is the function of brain to make conscious decisions. After cessation of conscious decision making stops, brain death occurs and soul departs, he maintains. Prof. Abdulaziz Sachedina was of the view that we need to understand theology carefully. Locus of soul is brain and not the heart and blood system.

Speaking about the brain death criteria Prof. Abdulaziz Sachedina remarked that retrieval of organs is a very touchy subject for the relatives and community. That is why it is not accepted. They consider it mutilation of dead body in the presence of vital signs. It may result in abuse of it and the people most affected will be the poor in the society. At present there are no conclusions as regards brain death. We still do not have enough knowledge whether brain death can be accepted as one of the criteria for death.

During the discussion **Prof. Adeebul Hassan Rizvi** pointed out that government must protect the citizens. We must empower the patients. Healthcare professionals take decisions on their behalf. From medical point of view the

criteria of brain death is well established and accepted. The only problem is how to stop commercialism and its abuse.

Sources of Islamic Moral Thought

In the afternoon session **Prof. Abdulaziz Sachedina** talked about human reason vs. Revelation, the sources of Islamic Moral Thought. He was of the view that Islamic Bioethics generates some confidence in what we are doing. It is important that one defines the terminology very carefully. Speaking about legal and moral reasoning he said that legal reasoning is test oriented which is derived from Quran and *Hadees* whereas moral reasoning is dependent on circumstances, experiences and how one should deal with a particular situation. Human reasoning is capable of resolving ethical dilemmas because of God given capacity to understand divine purposes in life. He then talked about the human capacity to know rightness and wrongness of an act prior to revelation because of innate moral cognition. Human cognition is dependent on experience as a constant and reliable guide in moral reasoning.

Justice is non-existent in Pakistan. He was of the view that it is important to institutionalize justice so that it is not abused by an individual. Prof. Abdulaziz Sachedina opined that we cannot accept the four principles of bioethics as advocated by the West. These principles are American; even Europe has problems with these principles. As Muslims we have more problems with these principles. Prof. Abdulaziz Sachedina felt that we need our own principles relevant to our culture and religion. It is important that one's right should not disturb others rights. No harm and no harassment is the heart of principles of Islamic Biomedical ethics. If these principles are followed, it will result in justice. Members of the medical profession, he said, need basic information and exposure in Islamic Bioethics to take necessary decisions. Knowing Islam alone is not enough because it does not help take correct decisions. These new principles of biomedical ethics which I have proposed, he said, are guidelines.

I am open to dialogue on these principles with Jews, Christians and may be after ten years down the line we are able to come up with some suggestions and proposals. He emphasized the fact that we need legal system to support these medical ethics and State needs to regulate that. We need Urdu idioms to convey proper things in native language. Hence it is important that we must coin our own terminology. It was the disagreement over political leadership which gave birth to Shia school of law. As compared to Sunnis, *Shias* still believe in *Ijtihad* which is a form of collective obligation of all Muslims. Currently the Muslim *Ummah* is facing a sense of insecurity. We are fearful of thinking and anything new of which we do not know the meanings. Physicians, he stated, have a tunnel vision. Scientists by nature are most close minded when it comes to religion. We are constantly fighting about misconception about ourselves and about Islam. It is our responsibility to improve our image. As such it is important that we must change ourselves. If we do that God will change the conditions. He laid emphasis that we must read books carefully. We do not read Quran as it is desired to be read. We must try to understand it, he added.

THIRD DAY

In the morning session of third day of the course "*Bioethics Links*" a publication of CBEC was formally launched. It was pointed out that it will cover Bioethics, Islam and Social Sciences. Each issue will have a theme and it will report on what is going on in Bioethics overseas. It was also announced that proceedings of this bioethics course will be published in a book form.

Giving an overview of the last three days of the course **Prof. Farhat Moazam** said that the Muslim era and ethics were updated by Prof. Sachedina and Mr. Jawaid Ghamadi. There was great deal of Islamic in Islam and people used to discuss various issues. The Western origin of medical ethics and the four principles are drawn from reasons alone. Prof. Sachedina

gave new Islamic Principles. He emphasized that we must turn to our own sources. Various important issues were also clarified as to what is *Shariah* and what is *Fiqah*. *Shariah* is an eternal law which is God's law which cannot be changed. *Fiqah* is human reasoning which used to make laws and rules. Since these rules and principles are man made, these cannot be eternal. It clarified many things. *Shariah* gives some broad principles. Absolute rules are a few where human being can take decisions. These few rules are eternal. It was also clarified that eternal and man made rules are different and they should not be confused.

Islamic Values and Approaches

Dr. M. Haytham Al Khayat's presentation was on Islamic Values and Approaches. Religion, he said, is the source of values. He pointed that Caliph Hazrat Umar allowed payment of *Zakat* to Christian lepers living near Damascus from *Taif* treasury. In those days healthcare was considered a right of a man. Provision of healthcare was considered the State responsibility as long as he remained a citizen of a Muslim State. Medicine got a rightful place in Islam. The first *Mohtisab* which was appointed for Medina by Caliph Umar was a lady whose duties included looking after the market affairs. The second *Mohtisab* appointed by Caliph Umar for *Makkah* was also a lady. In those days hardly any book appeared which did not have a topic on ethics. We are now reverting to ethics because of advances made during the last two decades. The West has included some Christian ideas and traditions in ethics. This has weakened the relationship between the patient and the physician. Physicians with materialistic outlook forgot the fact that they were dealing with human beings with the result that now patients have become cases.

Speaking about extracting organ from the living he asked can we compel some body to donate organs? Can we sell and trade in organs; can we undertake research without consent? These are some of the issues. What is our position on artificial and assisted insemination?

Can we allow mercy killing and can we turn off the life support apparatuses when life cannot be improved? Should we prolong the life? What should be our attitude towards AIDS patient? Should we inform the patient's spouse of AIDS patient? Can we give AIDS patient some rights without giving these rights to other patients? These are some of the endless issues. We have to discover values to serve as guidelines in such situations. He quoted Prophet Mohammad (PBUH) saying that "*Your body and self, spouse has a right over you. Your child has a right over you. Give to each what is their right*"?

Dr. Al Khayat was of the view that persecution is worse than killing and denial of freedom is greater than crime. Freedom is more important than life itself in Islam. Patients have right to receive all details about their disease, they have a right to secrecy and treatment details. Quran demands justice and beneficence. It says that maintain equality in health resources and do justice. Mother and Father should do no harm to the children and similarly none of them should get harm because of children. It is important that all Muslims should acquire knowledge and there is a need for cultural ethics.

Shariah, Ikhlāq and its relationship

Mr. Jawaid Ghamadi discussed in detail the relationship of *Shariah* and *Ikhlāq* and said that Islam is another name of *Ikhlāq*. If we look towards ourselves and our surroundings and then find answers to questions in our mind, what we are, from where have we come and what is our destination? The answer lies in *Eman* or Belief. What is the basis of right and wrong, what is the basis of *Ikhlāq*? Then he clarified that we must remember there are certain issues on which no discussion is allowed. For example God orders to adopt justice and do *Adal*, give the right to all of them. Here *Adal* is used in a very broad based way. It means *Adal* with self, with family, with community, with State and the community and world at large, we have to do *Adal*. The difference

between *Adal* and *Ahsaan* is that in the later, one gives extra to others and accepts less for himself. *Adal* and *Ahsaan* means that give right to all relatives and maintain the family tradition.

Continuing Mr. Jawaid Ghamadi pointed out that there are three basic things in Islam. These are not good and one is supposed to save oneself from these by keeping away. These are do not disclose your sex life and secrets. Keep away from *Munkar*, dishonesty, falsehood and usurping others rights. Keep away from other's "*Jan, Mall and Abroo*". Hostile attitude towards these are not good. The divine part of *Eman* and *Ikhlaq* validated these attitudes. These remind you all that you have forgotten. The Prophets were sent by God to remind people and that is what the Prophets did. Speaking about prevention rules for *Ikhlaq* Mr. Jawaid Ghamadi said that these rules are made to punish criminals and prevent crime. *Shariah* are those rules which are made by God and these are very few rules. These are the areas where decisions made by human beings could harm others. On the other hand *Fiqah* is our right to make rules. Prophets came to help how to make rules when man could not find a way. *Shariah* are the rules made by God and they cannot be changed under any circumstances whereas *Fiqah* are man made rules which are open to interpretation, he concluded.

Women and their role in Islam

In the second session on the third day **Dr. M. Haytham Al-Khayat** talked about Women and their role in Islam. He pointed out that the final message from God Almighty came in Arabic and one might ask what type of Arabic is that? Since Prophets speak the language of their own people hence Quran made it easy for them to understand as Quraish and other neighbours all spoke Arabic. He was of the view that sayings of the leaders including the religious scholars should be accepted and followed if they follow Quran and *Sunnah*. The leaders are supposed to follow sound Islamic practices. If they are not in line with the com-

mands of Prophet (PBUH) they should be considered null and void.

Speaking about women empowerment in Islam Dr. Haytham Al-Khayat said that it gives complete and genuine equality between man and women. There is equality in their creation. Islam gives equal responsibility to both. In Islam there are equal responsibilities to man and women to create order in the society. They are equal in marital status. Women can retain their Surname after marriage. While wife can give charity from husband's share, this right is not given to husband. To ensure justice their share is fixed. In four cases women inherits less, in four cases women inherits more and in ten cases this inheritance is equal. Women can adopt any profession. In those days Women were nurses attending patients in battles. They should be given equal wages for the same work. Islam requires that every man and women should acquire knowledge because Islam wishes to remove illiteracy from men and women. No marriage is valid without the consent of both man and the women. Prophet used to mend his shoes, patch up robes, attend to milk his sheep and sew clothes. He did every thing and every homework. Women should get proper healthcare, proper nutrition and any work which impairs her health should not be allowed. Islam says that man shall take full care of women and there is no specification of Father, Husband and Son. They must take care of their needs and ensure women's psychological and mental well being. Women used to control the markets where people like Hazrat Ali, Hazrat Usman and others used to work. Islam says do not adopt careless attitude. In some bounties women are favoured and in some men are more favoured. All cultures, he said, are based on three pillars i.e. language, religion and traditions and the later is stronger than religion. However, newcomers to Islam started introducing their traditions and practices into *Shariah* without any mention about Quran and *Sunnah* and at times it was against Quran and *Sunnah*. Since women are not given right to vote and contest elections in some Muslim countries, this is one of the reasons for back-

wardness of Muslims today. Women are supposed to do collective and community duties.

In the afternoon there was an interactive session with **Mr. Jawaid Ghamadi**. He pointed out that there are many things which need to be changed. The first and foremost is that *Shariah* and *Fiqah* should be separated. There are not too many questions so that *Shariah* does not become too much. There were few questions which were answered. In Holy Quran ten different rules are given and these are permanent rules. How the problem of *Hijab* arose is discussed in different *Surahs* in Holy Quran. Islam says that privacy of homes should remain, that is why it is said that seek permission before entering somebody's home. It also says that heart should be clean and clear when men and women are together. Islam says that one should keep the eyes downward. Avoid keen observation of body organs of others. It is also clearly stated that *Sharmgahs* should be kept hidden. Sexual matters should not be discussed and made public. Women have been specially ordered to keep their breasts hidden and fully covered and when they have done some make-up; they should not come in front of men. There are certain etiquettes to keep the hearts clean when male and female work together. Islam says that do not interfere in privacy. There were attempts to scandalize the family life of the Prophet, hence a special message was sent for the wives of Prophet Muhammad (PBUH) They were told that either they should leave the Prophet and live ordinary life but if they wish to live with the Prophet, they have to follow certain regulations i.e. they will have to live inside the home and no one will enter the Prophet's house without permission.

Later on these traditions started to have their impact. Now Muslim rulers are not accepted in *Shariah* and they are not interested in *Fiqah*. Education system for the religious leaders is very poor. Majority of these religious leaders are not scholarly. Religious education needs to be changed. They should be taught better interpretation of *Shariah*, *Hadees* and *Sunnah* but what is happening is that these religious lead-

ers being trained in the *Madrassah* just recite few problems. Very few of them are real religious scholars. What is happening in Saudi Arabia and Iran? What is happening in Afghanistan through the courtesy of ISI? These *Maulanas* do not have proper religious background. In Saudi Arabia, there are Kings and in Iran the religious leader is just like Pope. We do not try to educate. The Women Ombudsmen appointed by Caliph Hazrat Umar used to look after business affairs. They had limited role and they were not real Ombudsmen. When asked why witness of two women is needed Mr. Jawaid Ghamadi said that an incident can be a witness. That is circumstantial evidence and in circumstantial evidence, one cannot tell lie. In documentation, make male witness why ask the women. Speaking about Jihad he said that Islam says non-combatants should not be killed. Since we are not independent, we look for possible solutions and cannot get justice. He was of the view that we the Muslims have suffered because of unrealistic attitude and the Muslims lost government on merit.

Mr. Jawaid Ghamadi was asked if his views are accepted and one should not even protest at something which is wrong, then the whole philosophy of Ethics becomes questionable. We may not be in a position to fight the enemy which is much stronger but we should not surrender either. He was also reminded of the sacrifice of Hazrat Imam Hussain who gave his life for upholding the truth and justice in *Karbala*. That is why it is said that "*Islam Zinda Hota hai Her Karbala Kay Badd*" However his views that Islam has suffered a lot since *Karbala*, Hazrat Imam Hassan and many other companions of the Prophet had made an agreement with Yazeed, and so should have been done by Hazrat Imam Hussain did not satisfy many among the participants. It looked as if he had too liberal views on Jihad. Like many others I myself believe that Jihad is allowed against *Zulum* howsoever powerful the opponent may be but how this Jihad is to be continued is debatable and it could be in many ways. May be I and many others like me could not understand what Mr. Jawaid Ghamadi

wanted to say or he could not explain himself better. This subject remained inconclusive till the end of the session.

Organ Transplantation

Speaking about organ transplantation **Mr. Jawed Ghamadi** said that initially the religious scholars were against organ transplantation. The reason put forward was that the body belongs to God. Other objection was that it will result in mutilation of the body. It was said that this is why Islam says that the dead should be buried. The religious scholars were of the view that if organ transplantation was allowed, nothing will be left for burial. In fact that was weak reasoning against organ transplantation. However, it is essential that poverty should be eliminated first so that the poor is not forced to sell his body organs if organ donation is approved. As per Islamic teachings, soul is infused in the body after one hundred twenty days. Hence, if abortion is allowed after 120 days, it is considered murder. Save her and keep him alive but if you cannot save, do not prolong the life. In Islam brain death is not considered death. Islam says that treat only those who can be treated and those who cannot be treated, should be left to God Almighty. Islam says that if it is harmful to you, do not give or donate an organ. However, if it is not harmful one can donate organs. It is important that people should be educated so that they can question all aspects of an issue and then take a decision, Mr. Jawed Ghamadi remarked.

FORTH DAY

Fourth day of the course started with preamble by **Prof. Farhat Moazam**. She pointed out that Mr. Jawed Ghamadi in his presentations said that people know what is wrong, bad and good as it has been told by God Almighty. And when people get astray Prophets are sent to remind us of all that. He also talked about basic moralities including *Adal*. Giving more to others and keeping less for oneself is known as *Ahsaan*. Vices which should be

avoided include discussion about sexual affairs, dishonesty to others. *Jaan and Maal* of others should be protected.

Principles of Islamic Medical Ethics proposed by Prof. Sachedina

Prof. Abdulaziz Sachedina in his presentation had stated that human relationship is at the center of all socio-economic issues. Individual autonomy is secondary to relationship with one's family and community. Virtues like justice and temperance are central to moral development and ethics are integral to religious practices in all areas of interpersonal relations. He discussed in detail the interpersonal justice and fairness, allocation of resources and economic decisions when it is needed the most. Individual autonomy in Islam, he opined, does not become primary as in Western Bioethics. The principles of Islamic Medical Ethics which he suggested included public interest (*maslaha*), necessity, no harm and no harassment, protection against distress and constriction and necessity to avert probable harm. In these principles, necessity over-rides forbidden Act. No harm and no harassment is the heart of principles of Islamic Medical Ethics. In these principles Justice and Informed consent is not discussed but they are covered in No Harm and No Harassment. I have no arrogance. I may be wrong and I am willing to accept errors and mistakes. I am open to a dialogue, Prof. Sachedina had remarked.

History of Scandals and Protectionism

Prof. Jonathan Moreno talked about history of scandals and protectionism. He was of the view that sometimes in likelihood of the procedure surgeons have to exaggerate the chances of success. If patient is defiant, success is seldom possible. Quoting a 14th century physician he said that one should follow God's rules except in case of emergency situation. Talking about ethics in human experimentation he referred to the scandal about syphilis experiment in 1890s. This resulted in new rules for experi-

ments in humans. He also mentioned about the Yellow Fever experiments in soldiers in Cuba and signed consent Form to participate in the experiments. In those days Italian physicians did some experiments in Brazil and US physicians were saving themselves from public anger. Self-experiment by physicians was also quite common in those days. He also referred to the research scandals involving children in research, hypothermia experiments by Military doctors on frozen bodies. The famous Nuremberg trial resulted in the Nuremberg Code of 1947. During the Nuremberg trial lawyers of Nazi doctors made successful arguments. As per the first principle of the code, voluntary consent of human subjects is essential for research. In those days Americans were doing research on Malaria in prisons. White House allowed these experiments because they were to invade Japan next year where Malaria was a big problem. In November 1945 three prisoners were injected plotium for which they selected seventeen cancer patients for this experiment. Human radiation experiments were allowed by US government. Syphilis experiment in African Americans proved to be a medical atomic bomb in USA. This was followed by formation of various Think Tanks and establishment of Hasting Center and other centers. Karen cases and right to die gave birth to Ethics Committee. A survey conducted in 1979 showed that 90% of physicians favoured telling the patients that they were suffering from cancer. It is no more seen as a death sentence. He also talked about mistrust in administration and medical institutions, physician assisted deaths and death machines. The physician who used to practice this is now in Jail, he added.

Prof. Jonathan Moreno's next presentation was on Brave New World, Ethics and Genetics. He also referred to the *Theocons*, Genome project, cloning and problems in development of new sciences. He pointed out that it has been discovered that there are four thousand genetic diseases which afflict human being. It may be possible to find out which altered gene cause disease and based on this, drug specific to the

disease can be developed. He also disclosed that in the Year 2001 Decode filed for patent of 350 Genes. Medical institutions, insurance companies and government institutions would like to know the genetic make up of human beings before they employ them.

He then talked about the Pharmacogenetics, the HAP map project. In future, he said, we might see people going to pharmacy with their genome chips for medication. A lot of this may be exaggerated as regards gene therapy. Speaking about the success of gene therapy Prof. Moreno pointed out that some may think that it is better to have leukemia than autoimmune disorder. It is difficult to do gene transfer therapy. It requires millions of dollars to develop a new drug. It takes almost twelve years to bring a drug on the market and one drug is found useful out of thousands tested in animal studies which are promising enough to market it. In the days to come cost of developing a new drug will increase further. Opening the Genetic code, he felt; will open a Pandora's Box.

Dr. Amir Jafary from Centre for Bioethics and Culture (CBEC) talked about informed consent which is a routine in healthcare facilities. He narrated his personal experience when he made some mistakes during training as resident. He then referred to western training of physicians at home and abroad while we have to deal with *Desi* patients with *Desi* values. He highlighted the salient features of the study they conducted on informed consent wherein paediatric patients and emergency cases were excluded. He was of the view that it is essential to bring patients into decision making process. Physicians as opposed to surgeons, he said, are comfortable in withholding diagnosis to reduce distress helping in being evasive unless patient asks directly. Referring to the apprehensions often expressed he said that doctor's job is to reassure and comfort the patient rather than frighten them. It is also said that we will scare the patient away by telling them the truth. Then there are financial implications by losing patient. Getting informed consent requires time and patience which is not

possible in a busy clinic. Moreover there are other problems. Female patient may like to involve her husband. Then there are language barriers. However, when physicians spend more time, it results in more satisfaction. In the survey, a must tell check list was added to the specifications. The study showed that the oncologist was hundred percent sure that he had told enough before starting chemotherapy.

His recommendations were that give the family formal role in informed consent. A check list should be added to the informed consent Form. For better information process, video can be used. It is the moral duty of physicians to inform patient. Doctors are expected to perform the balancing act to tell with compassion. He was of the view that there is a need to expand this study and have a re-look at the informed consent Form from various perspectives.

During the discussion it was suggested that informed consent should be taken by physicians and surgeons rather than nurses and technicians as they know and can explain the complications. Usually the patients are not told the details of consent Form.

Dominant ethical theories

In the afternoon session **Prof. Jonathan Moreno** discussed some dominant ethical theories and four principles of bioethics besides alternate approaches to bioethics. Discussing the philosophy of moral theory, he stated that it should be precise and clear, it should have no contradictions, it should be comprehensive, there is enough insight to explain justification to explore, it should be able to surprise us and it should be practical. The utilitarian approach is maximize happiness and minimizes sufferings. It does focus on doing good. Utilitarian theory, he stated, came from the English philosophers but some say they did not adequately describe the human rights. While it is still not clear whether people have a right to healthcare in USA, in Europe it is settled and it is the duty of the government to provide a minimum of healthcare to its population. Then there are positive and negative rights. The patient may

say to the doctor, do not touch me, I do not want operation, leave me alone, it is my right. Then right to healthcare is a positive right which requires resources. Another argument put forward is that when developed countries do research in developing countries, they owe something to that community. Doctor has to be a virtuous person and there is no substitute to character.

Rawls was an Anglo American philosopher who was interested in inequalities. Rational approach to allocation of resources, issues like equity and fairness, justice and fairness were all discussed in detail. It was pointed out that the worst off should get most of the resources and there should be minimum healthcare for everybody.

In the interactive session in the evening it was stated that developments in medical technology gave birth to bioethics. There was a time when the doctors were on peak as regards their prestige. In 1960s and 70s there was more medical progress and doctors prestige came down in the West. People insisted to know. In the past doctors were known as good diagnosticians and good prognosticians. Now doctors can intervene to change the course of treatment. These days' doctors are engineers and technicians rather than Priests. Medicine has progressed but the prestige of doctors has come down. Deep pockets lead to more law suits. It is said that these days only 10% of malpractice cases are litigated while 90% go un-noticed. Non-existence of medical protection society in Pakistan was also discussed. It was felt that whether these malpractice suits improve medical care is debatable. Other issues which came under discussion were can virtue be taught? It was suggested that internal mechanism of moral development should be discussed in detail. The concept of Triage in case of trauma, categorization of injured patients was discussed in detail and it was felt that proper Triage is never practiced because Generals always get priority over Soldiers. In the modified Triage model it is said that since Generals will win war hence they are the one who can and should benefit most.

Competence of Ethics Committees and Drug Trials also came under discussion. It was stated that it will take some time for Ethics Committees in developing countries to take decisions. People are afraid that they will get bad reputation. Because of lack of expertise, not many pharmaceutical companies are going into research in Pakistan as they would like to. Companies are worried as research involves lot of expenditures and without ethical clearance you cannot undertake research. Now many US companies are going to China because conducting research in China costs just 10% as compared to United States. Then there is no problem of litigations in China. A drug trial which will cost thirty million dollars in United States will cost just three million dollar in China. Bioethics can make a real difference. It was also pointed out that HIV was not reportable in USA for many years as long as there was no therapy for its treatment. The situation has now changed for the last few years since we have effective therapy and it is less of a stigma.

FIFTH DAY

The last day of the course started with video films wherein two well known American Social Scientists **Prof. Rene Fox** and **Judith Swazey** talked about examining American Bioethics- its problems and prospects. In the first movie it was stated that bioethics is concerned more with technical and ethical issues. It was news for most of the course participants when these social scientists disclosed that 45 million US citizens have no health insurance. Many Americans are under insured as regards health insurance. Not only that it was surprising to note that 35% of population in the world's wealthiest nation lives below the poverty line. Hence it is the moral responsibility of US Bioethicists, Global Health and Human Rights representatives to take note of this. Education and training in bioethics needs to be changed and thoughtful re-consideration including Doctorate and Ph.D programmes. It was further stated that philosophy should have a pivotal

place in bioethics. It is a multidisciplinary field which requires training. It requires long term planning to develop bioethics. They also pointed out that there are ideological and political differences among US Bioethics on various issues. Bioethics it was explained was just not bioethics.

An Ethics Consultation in Pakistan

This was followed by an excellent presentation by **Prof. Farhat Moazam** who described the story of Mr. Ahmad who was admitted to a tertiary healthcare facility in Pakistan. His management involved a clash of scientific knowledge of physicians and religious beliefs of the family. There was also a clash of two cultures i.e. medical knowledge and culture of patient and family. Pakistan is a Muslim country and it has several sub-cultures related to ethnicity, provinces, level of education and socio economic status. Medical culture, she said, is modeled by traditions of science and reason; a specialized way of thinking, seeing and speaking with biology as its centre. In medical culture there is a narrow focus on pathophysiology as a primary cause of pain and suffering in illness. The place of intervention is body and disease rather than the sick person.

In United States healthcare ethics and consultation is mandatory for all hospitals and role of Ethicists is only of a facilitator. In this case wherein an ethical consultation was sought, the patient was hospitalized four months ago and he had two surgical procedures to stabilize cervical spine. He was a quadriplegic and kept on ventilator. The family wanted that he may be taken off the ventilator and they would like to take him home. They also brought a *Fatwa* from religious scholars that ventilator should be discontinued. It was a large middle class family. When we were consulted, Prof. Farhat Moazam said, we looked at the patient's medical record. The patient had developed weakness of legs and everything in his medical records had been properly documented. He had dislocation of cervical spine for which he

was operated twice. The family had made an initial deposit of fifty five thousand rupees. He remained in the ICU for three weeks but since he did not improve after two operations, he was transferred to a step down unit. He was stable with intravenous lines and nasogastric tube for feeding. Describing the patient condition Prof. Farhat Moazam said that he was agitated but mentally he was alert. He was a saner, educated intelligent man hostile of doctors whom he considered as agents of the hospital. Once surgery was over, every body lost interest. Often the patient had no medication. Suction was an *Azab*. His brother who was taking care of him said that he will sign the papers and take him home. We asked his brother, let us talk about it and we assured him that we will not hurt his brother. After this promise, he started trusting us. After a few meetings he started talking. We were told that the patient's mother gets bouts of depression. The mother was not told about the two surgical procedures which her son had. She often cries and wants to see his son. The father cannot see the son and the married sister was not willing to take the patient home. She felt that the family should not talk to doctors in the city and patient should be allowed to die in peace. The brother who was taking care of the patient in the meantime lost his job. The hospital bill was over seven lac and to settle that the family sold their car and the land. By now the family was in serious financial crisis. The rest of the bill was paid by the hospital.

Speaking about the religious issues involved, it was stated that one should not take life. Some felt let him die. The brother said that he had talked to two religious scholars and they said taking him off the ventilator is OK. However, medical ethics demand that the life should be saved. If it is costly for the family, it may be an additional reason for discontinuing the ventilator. In the bioethics world, this patient Prof. Farhat Moazam stated is not terminally ill. He is a patient and is suffering. Quality of life is an issue and we should try to minimize his pain and suffering. There are many ethical issues which are involved. The religious *Fatwa*

was discussed in this ethics group. It was pointed out that if discontinuation of ventilator was justified on moral religious grounds, in this case who will switch off the ventilator? Eventually we decided that what we can do is that when his oxygen level falls, we will not resuscitate him. Since doctors are told that never give up hope and fight to the end, one of the interns refused saying how he can put off the ventilator? Eventually the patient had hypoxia spell, had cardiac arrest and died.

Prof. Farhat Moazam concluded that one must engage in realities of the local world. Culture, religion, bioethics and available resources are also very important. Patient is the first responsibility and some one must be a patient's advocate and we have to find a balance between all these.

The presentation was followed by lively discussion. It was pointed out that patients used to die in the past and they die even today. The only difference is that now they die more documented and death has been made much more expensive. In this particular case the family had to sell their Car and land, brother lost his job and the whole family faced serious financial crisis taking care of this patient since treatment was very expensive. Prof. Farhat Moazam said that doctor's job is to save life and do whatever they can without losing hope till the end.

In the afternoon session in the interactive discussion it was stated that US bioethics has effects on development of bioethics in other countries of the world. US bioethics is now less cultural, parochial and myopic. Bioethics in France started in 1980. They call it biomedical ethics. They are more concerned with artificial, assisted re-production and parental screening.

CONCLUDING SESSION

Speaking in the concluding session **Prof. Farhat Moazam** said that this bioethics course will increase interest in bioethics and search for Muslim values. It will also serve as useful linkage between scientists, physicians and Islamic scholars. There is a lack of organizational

efforts and we in Pakistan do not have a national programme for capacity building of faculty. Hence we always rely on overseas experts in this field. We intend to start a Diploma and Degree course in Bioethics in collaboration with University of Karachi. Efforts will also be made to make CBEC an international centre of bioethics in Pakistan, she remarked.

The five days spent during the Bioethics Course proved to be a great learning experience. It was for the first time that one could understand the difference between *Shariah* and *Fiqah* and learn quite a few things about Islam as a religion. Presentations and deliberations during the course helped clear many misconceptions. The speakers did full justice to the topics selected for them while the interactive sessions during the afternoon were quite absorbing, interesting and stimulating. Apart from the contents of the course and presentations which were not only interesting but also relevant, another thing which was exceptional in this course was the excellent time management which is no less than a miracle in Pakistan. The secretarial help, assistance, the au-

diovisual arrangements were superb for which credit goes to the organizers who put up such a wonderful show. At the end of the course, one felt as if we have been living in a different world all these five days. The issues of ethics, morality, rational approach and justifications for all our actions and decisions usually do not get so much importance in our day to day life and all this has its reflections in our behaviour as a society.

We as Muslims are often told to accept everything which the leaders, religious scholars say without discussion and giving it a serious thought. While *Shariah* is something which cannot be changed or altered, *Fiqah* is open to interpretation and discussion. Most of us usually do not know the difference between the two. This five days course, the first of its kind and the first academic activity by the recently established CBEC at SIUT as such was an important milestone in this respect. The organizers had invited eminent scholars who helped clarify many important issues concerning bioethics and moral values.