

Death Journal #4: Fuzziness

In my personal opinion, Brody is one of the most intelligent and clear-thinking authors we have read thus far. In this response will primarily focus on his idea of “fuzzy logic.” As Brody says, this is central to his argument. Our world is not simply divided into black and white – something that is often stated but too rarely applied. In contrast to some of my previous responses I shall here attempt to defend and strengthen the position of the author.

The central premise of Brody’s position is that death is not an event but a process. While this does run counter to intuition, that in no way renders the premise invalid. In fact the common view of death as an event is most likely flawed. Why is this? The process of human decay begins long before actual death (however defined). At first aging is growth, but sometime later in life (the exact age does not matter here) the aging process becomes one of decay. Perhaps the process of death starts at birth, or at the beginning of decay. At some point in this process of decay, we refer to the human organism as dead. While this view seems ridiculous at first glance, the fact that there is such trouble determining the exact moment of death shows us that treating death as a process may be the only reasonable view.

A more defensible position would be one that confines the process of death to a period much nearer to the end of life. The boundaries of this process – when someone leaves the world of the fully living, and when they enter the world of the fully dead – are now the objects in question, and the basis of the most dangerous objection to Brody’s position. This objection is as follows, in question form: When do we say that someone stops fully living? When they begin aging (as above)? When they can no longer live without technological assistance? What about someone with a pacemaker, or any other form of assisted biological functioning? These

questions are not easy to answer, but I think they *are* answerable. It is reasonable to claim that the second terminus of the dying process – when someone is fully dead – is not an important issue. After someone’s heart has stopped beating and they are a biologically defined corpse, there are few reasonable arguments that categorize them as alive.

The issue, then, as the example objection above illustrates, is with the initial terminus. It may be that many of the issues previously dealt with in terms of the definition of death as an event have merely been shifted, and are now issues to be dealt with in terms of the event of *stopping fully living* (as opposed to dying). Where this the case Brody would have failed to provide a satisfactory definition of death, since he would not have resolved the major issues at hand. I argue, however, that this objection is invalid.

Once again we must return to Brody’s “fuzzy logic.” Instead of trying to define the exact boundary between life and less-than-life, we must settle for agreeing that *we don’t know*. There is not *always* an answer. More important than deciding whether or not someone with minor brain damage has started dying is deciding whether or not someone in a PermVS state can be removed from life support. While there may be no way to establish the boundary between life and less-than-life for all cases, there are conditions that we can definitively say constitute less-than-life. For example, the classic example of complete loss of higher brain function – even taking into account Brody’s point about the continuation of hormonal regulation, we could say that when all higher brain function has irrevocably ceased, the organism is no longer fully alive.

This is, of course, exactly what Brody suggests. His position is that when someone loses higher brain function it is moral to remove them from life support. One might still raise the objection – what constitutes complete loss of higher brain function? If someone has lost most of their higher brain functioning but still has the ability to mutter the word “basketball” at random

intervals through some coincidental firing of remnant neurons, what do we do? I would once again advocate a return to the idea of fuzziness. In such situations, we *just don't know*. We don't know enough about the brain to judge in cases where it is not clear that all higher brain function has ceased. Moreover we *certainly* don't have enough moral consensus to decide in the definitive for any given fuzzy case. Is this a cop-out? I think not. It is merely acknowledging that no matter how hard we try, no definition will cover every instance. There will always, *always* be times where the final decision comes down to the doctors and the patient's relatives. This is simply a fact of human life, and attempting to escape it by ever more complicated and unlikely moral guidelines is not beneficial to anyone.