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WATCH TOWER EMBRACES NEW BLOODLESS MEDICINE

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The Watch Tower Bible and Tract Society of Pennsylvania, which governs more than 98,000 congregations of Jehovah's Witnesses worldwide, recently reaffirmed its ban on blood transfusions, despite growing pressure from Witnesses, former Witnesses, and lawyers to allow the procedure. A Watch Tower letter, dated January 3, 2006, urged its 6.6 million members to seek alternatives to transfusions from the emerging field of "bloodless medicine." The five-page letter was sent to congregations less than a month after Florida attorney Kerry Louderback-Wood opened up a new avenue of suing the Watch Tower in an article she wrote for Baylor University's *Journal of Church and State*.

Blood Money. Louderback-Wood's article, "Jehovah's Witnesses, Blood Transfusions, and the Tort of Misrepresentation," argues that the Watch Tower can be held financially liable for the deaths of Witnesses who refused transfusions. The basis for the lawsuits is that the Watch Tower has bolstered its no-blood stance by misrepresenting historical, scientific, and medical facts in its main resource on its blood policies, a pamphlet titled *How Can Blood Save Your Life?* (available online at www.watchtower.org).

Past lawsuits failed because the Watch Tower's ban is based on a religious belief—that the Bible prohibits eating blood. (The Watch Tower teaches that receiving a transfusion is the same as eating blood.) Louderback-Wood, a former Witness, argues that the appeal to religious freedom can be sidestepped if the organization is sued for twisting facts, including exaggerating the risks of transfusions while downplaying the risks of bloodless medicine.

Bloodless Medicine. Bloodless surgeries—performed without the use of transfusions— are featured glowingly in a video all Witnesses were required to watch during the week of January 30. Witnesses were then quizzed on the video and instructed to listen as the letter was read aloud at one of their five weekly meetings, the "Service Meeting." The letter said that "Hospital Liaison Committees," made up of appointed elders, could help them find bloodless programs.

Bloodless programs use procedures such as *erythropoietin therapy*, which produces red blood cells, and *blood salvage*, which recycles a patient's lost blood. Such procedures are allowed by the Watch Tower because they don't involve accepting blood from another person or the storage of a Witness's own blood. (The Watch Tower forbids a Witness from storing his or her own blood for a later transfusion. The blood salvage procedure avoids this by immediately reinserting a patient's lost blood back into his or her body.) The Web site NoBlood.org lists more than 100 bloodless programs, mostly in the United States.

The American medical community has welcomed the programs. For example, the *Journal of Healthcare Management*, published by the American College of Healthcare Executives, encouraged every hospital to consider adding a bloodless program. Some health insurance providers cover bloodless treatments for Witnesses, such as Aetna, which covers erythropoietin. In May 2005, a Witness teenager from Canada won a high-profile court battle to receive bloodless chemotherapy in the United States.

Bloodless medicine was started in the 1980s primarily to offer Witnesses an alternative treatment. Today it is requested by many non-Witnesses, according to Dr. Aryeh Shander, the executive medical director of a leading bloodless program—the New Jersey Institute for the Advancement of Bloodless Medicine and Surgery Program at Englewood Hospital. Shander told the Christian Research Journal that bloodless

medicine will become the norm because blood is costly and can transmit diseases. "Most people would shy away from blood transfusions, if given the option," he said.

Almost any surgery can be performed without blood transfusion: liver, heart, and even brain surgery. Bloodless surgeries also often have better outcomes than other surgeries, according to Dr. Nicolas Jabbour, a director of the bloodless program at the University of Southern California's Keck School of Medicine and author of *Transfusion-Free Medicine and Surgery*.

Blood Sacrifice. Bloodless surgeries aren't always successful, however, when a patient has massive blood loss, according to medical experts. "Sometimes, the patient will absolutely need blood to survive," Jabbour told the Journal.

This was the case with Louderback-Wood's mother, a severely anemic Witness who died in 2004 after refusing a transfusion. "She had a hero's funeral. She died as a good Witness," said Louderback-Wood, who spoke with the Journal.

Erythropoietin couldn't help her mother because it takes weeks to work. Her mother's death caused Louderback-Wood to investigate the medical "facts" in the Watch Tower pamphlet, such as the claim that erythropoietin works "very quickly." "One [claim] after another came to be half truths," she said.

Louderback-Wood also was surprised to learn that her mother could have accepted hemoglobin, a component of red blood cells. She said most Witnesses and doctors don't know that the Watch Tower has changed its total ban on blood and, in the early 1980s, began allowing Witnesses to accept fractions of the main components of blood (red blood cells, white blood cells, platelets, and plasma). Though these policy shifts were published in *Watchtower* magazine, the main publication of the Watch Tower, Louderback-Wood said the statements made in the magazine—along with statements made in the Watch Tower pamphlet—have been too few, ambiguous and contradictory—leaving many Witnesses confused as to which, if any, fractions are allowed.

Because of this, Louderback-Wood argues that the Watch Tower has failed to adequately disclose it policy changes regarding life-saving treatments, providing further grounds for lawsuits. She believes the Watch Tower obscures its policies because it doesn't want to appear to be vacillating. "It's smoke and mirrors," she said.

The recent letter further "muddies the waters," she said, where it asks, "Can any doctor or hospital give complete assurance that blood or blood fractions will not be used in treatment of a minor?" This question implies that blood fractions aren't allowed, she said.

The Watch Tower did not return a JOURNAL call regarding the letter.

Blood Feud. A growing number of Witnesses oppose the ban. The Associated Jehovah's Witnesses for Reform on Blood (AJWRB), founded in 1997, has thousands of members from more than 25 countries, who remain anonymous for fear of being "disfellowshiped" by the Watch Tower. They include elders, doctors, and members of Hospital Liaison Committees, according to the group's founder, a former elder and current Witness who goes by the pseudonym "Lee Elder." He told the Journal that his grandmother died prematurely from refusing a transfusion.

Elder said that the Watch Tower falsely claims that having a transfusion is the same as eating blood, a "fact" the Watch Tower supports with quotes from doctors who lived hundreds of years ago. "That's just bad science," he said.

Another falsehood, Elder said, is that transfusions are always bad medicine, with a high risk of transmitting viruses, such as HIV. To support this claim, the Watch Tower pamphlet—referring to a study from the 1960s—states, "Each year thousands die as a result of transfusions; multitudes more get very sick and face long-term consequences." According to the *Journal of the American Medical Association* (February 26, 2003), however, the risk of serious infection from transfusions is so low in developed countries—due to blood screening tests—it's almost immeasurable.

AJWRB members believe, with Louderback-Wood, that the Watch Tower has tried to hide changes to its blood policies, so they seek to publicize the changes on their Web site (www.ajwrb.org). In fact, it was at this site that Louderback-Wood learned that her mother could have received hemoglobin.

The pressure from the AJWRB may be having an effect. For example, Elder applauds the Watch Tower for recent clarifications of its blood policies, including a June 15, 2004, article in *Watchtower* magazine that explicitly lists which blood fractions are allowed. The Watch Tower also changed the latest "advance medical directive" that all Witnesses sign and file with their doctors, which explains their wish to refuse a transfusion in case of a medical emergency. The new directive provides a box that allows Witnesses to check if they will accept blood fractions.

Elder believes, however, that the Watch Tower hasn't gone far enough. He maintains that its continued ban on whole blood and whole blood components is arbitrary since Witnesses can now accept all the fractions of blood components, which, when added up, equal whole blood. Obtaining these fractions ironically requires blood to be donated by other people and stored. Furthermore, isolating the fractions requires the use of much more blood than if Witnesses accepted whole blood in the first place, according to Elder.

He believes it's possible that the Watch Tower's motive for keeping the ban may not be theological, but financial. It may fear that if it changes its policy, then it could be sued for past Witness deaths.

He also said that bloodless medicine hasn't eliminated the need for reform. That's because access to these life-saving therapies isn't available in less-developed nations, where the majority of Witnesses now live. "That's a strange irony the Watch Tower will be hard pressed to justify," Elder said.

— Holly Pivec