Iran's Experience on Religious Bioethics

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Iran's Experience on Religious Bioethics: an Overview

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Historical Overview

During the golden age of Iranian-Islamic medicine, the most famous Iranian physicians, such as Avicenna (981–1037 AD), Razi (865–925 AD) and Ahwazi (932–994 AD) devoted some chapters of their medical textbooks to a number of instructions about the doctor-patient relationship, which nowadays is considered a major topic of bioethics. They tried to answer questions such as how should a good Muslim physician act? (Larijani and Zahedi, 2006a; Azizi, 2000; Tajbakhsh, 2003) Centuries before, in ancient Iran and before Islam, religious ethical instructions concerning medical ethics were collected in the *Vendidad*, part of *Avesta*, the holy book of Zoroastrianism, which was Iran's formal religion before Islam (Razi, 2006).

Today, the main sources of moral teachings in the Iranian tradition are Islamic teachings as the primary source, philosophical works rooted in ancient Greek and ancient Iranian traditions, and *Tasavvof* or Sufism, which was Islamic in origin, but was somewhat influenced by Christian and Buddhist schools of thought.

During the first few centuries of Islamic history, philosophical books were translated from Greek and Pahlawi (the Iranian language before Islam) to Arabic and Persian (the Iranian language after Islam continuing to the present), which greatly influenced moral thought in the Islamic world, especially in Iran. In this period, prominent Iranian philosophers (Tabatabai, 1994) tried to found an Islamic moral philosophy based on the teachings of Aristotle and compatible with Islamic teachings; among them were Miskawayh (932–1030), Farabi (872–951), Avicenna and Nasireddin Tousi (1201–1273). Over the following centuries, however, the prominence of *Tasavvof* suppressed this philosophical movement. Some of the great Sufi scholars, most prominent of them Ghazzali

(1058–1111), criticised Islamic philosophers arguing that their philosophy was contrary to Islamic teachings (Zarrin Koub, 2000; for information about ethical teachings of sufist scholars, see Aksoy and Tenik, 2002). These criticisms were very successful and since then, Aristotelian philosophy lost its influence on the intellectual life of Muslim societies.

Birth and Development of a Major Branch of Islamic Bioethics

Though Iran is an Islamic country, there are some great differences between the main theological and jurisprudential schools in Iran and most of the other parts of the Islamic world. To understand the nature of these differences, in addition to the aforementioned influences from different traditions, one should be aware of the differences between the two major branches of Islam: Shiite and Sunni.

Shiite and Sunni each have their own schools of jurisprudence, theology and ethics. While the majority of the Muslims (about 90%) in the world are Sunnis, the majority of Iranians (again, about 90%), are Shiites. Shiite Muslims, like other Muslims, follow the *Qur'an* and the teachings of the prophet *Muhammad*. Nevertheless, in contrast to other Muslims, they believe that the prophet's family (*Ahl al-Bait*), including a certain chain of his descendants known as *Imams*, have special spiritual rule over the community.

Furthermore, there are two main theological schools in the Islamic tradition: *Ash'ariyyah* and *Mu'tazilah*. From the theological point of view, Shiite's theoretical framework is similar to *Mu'tazilah*'s (Motahari, 1981; Aramesh, 2007a). According to *Ash'ariyyah* thought, there is no such thing as intrinsic and essential moral goodness and badness, because reason and its products cannot stand on their own feet in a way that they have not epistemic justification at all. Rather, they should be taken into account in the light of scripture and the prophetic tradition in order to grasp their own epistemological value (Aramesh, 2007a). According to the Mu'tazilah perspective, however, moral goodness and badness can be revealed by reason on its own. Hence, bioethical judgements can be made based on reasoning rather than purely resorting to the Holy Scripture or jurisprudential deliberations.

Nonetheless, after the suppression of Aristotelian philosophy among Iranian scholars, as described above, the role of reason was limited to finding the exact meaning of the scripture. Today, however, a movement to return to Mu'tazilite perspective with its leaning towards relying on reason has been proposed by some famous Shiite and Sunni scholars (Fanayi, 2005; Vasfi, 2008).

Since the Islamic revolution of 1979 in Iran, the laws and regulations regarding bioethics — as well as all other laws — have been based on Shiite

jurisprudence (*Figh*) (Aramesh, 2007b). An emphasis on scientific progress is a main characteristic of the Shiite school of thought which has led to an acceptance of emerging technologies with minimal resistance among Shiite religious authorities. This is partly because of their concern about maintaining competition in science with other countries. Also, as governors of the Islamic republic, they have been obliged to find practical solutions for problems related to health, so they need such technologies. Therefore, a kind of flexibility is the main feature of Shiite jurisprudence in dealing with bioethical issues. This flexibility has even brought about ethical concerns, such as the stem cell and cloning debates.

Traditionally, Shiite jurisprudence has four main sources. The first, and most important one, is the Holy Qur'an, the primary source of Islamic law. The second is *Sunnah*, which is what the prophet and 12 Imams said, did, or agreed to. The third, *Ijma*, is a consensus of Islamic authorities, and the fourth source is *Aghl*, which is reason or intellect. *Sunnah* and the ceses of *Ijma* are recorded in the related books which are available for scholars. *Aghl* is just the common reason and should be used in the light of the Holy Scripture.

Shiite jurisprudence has an old and great tradition of answering believers' questions about every practical detail related to their birth, life and death. Bioethical questions are not excluded. According to Shiite religious authorities and most believers, almost all bioethical issues and questions are considered jurisprudential in nature (Aramesh, 2007b). Accordingly, most Iranian authorities in the Islamic parliament and the Ministry of Health and Medical Education (MOHME) still regard bioethical subjects such as organ transplantation, euthanasia, abortion and stem cell research as jurisprudential. Therefore, they seek answers in the jurisprudential decrees (*Fatwas*) of religious authorities. Such *Fatwas* are often issued in response to specific questions posed by believers. The authorities often seek the consultation and explanation of the subject by specialists who consider them reliable. So, physicians, policy makers or others dealing with bioethical issues can formulate their bioethical concerns as definite questions and provide detailed explanations of the subject in order to obtain their desired *Fatwas*. These *Fatwas* are then often used as the basis for legislative action by the Iranian Islamic parliament.

One should notice that in the Shiite tradition, in contrast to Sunni tradition, there is not a single Grand mufti, but numerous religious authorities (Grand Ayatollahs or *Maraje' e Taghlid*) who exist at the same time and a believer can choose one of them as his reference (*Marja'*) for obtaining religious *Fatwas*. The result is a practice which may be allowed by some authorities and permitted by the parliament through legislation, but may be forbidden for another group of believers who have chosen another religious authority as their *Marja'*.

Accordingly, the officially accepted theoretical job of bioethicists in Iran can be explained as follows: to find, explore and explain bioethical issues by formulating detailed questions and seeking answers from the religious authorities. Bioethicists also take part in compiling codes, guidelines and regulations based on religious decrees to the extent permitted by them. In addition, bioethicists participate in discussions among religious scholars, lawyers, scientists, physicians and policy makers about subjects related to bioethics, with the purpose of promoting ethical norms, regulations and behaviours. In this way, they can even criticise the opinions of religious scholars and ask them to revise their theories as far as it is allowed by the Holy Scriptures. Through these discussions, gradual changes in formal interpretations of Holy Scriptures can be effected.

Institutions

Religious and government authorities believe that the contemporary bioethics and medical ethics that exist in western countries are not appropriate for a Muslim society like Iran because they do not reflect Muslim values. Many of the fundamental values and principles of western bioethics are not accepted among mainstream Muslim scholars and authorities. Therefore, they argue that a local and Islamic bioethics should be founded in Iranian universities or seminaries (religious schools). Accordingly, a great deal of attention has been paid to bioethics in Iran in recent years (Larijani and Zahedi, 2006b, 2007) with many educational and research centres established in the major universities and seminaries of the main cities in Iran. In addition, the need to establish ethical review bodies, like Research Ethics Committees, urges Iranian scholars to know more about the modern bioethical issues. Therefore, studying secular bioethics and conducting comparative studies go side by side in these academic and religious centres.

These academic centres, which deal with bioethical issues, can be divided into three main groups: national or local societies, committees or other institutions; academic centres located in universities; and religious centres located in religious schools or institutions. Some examples of the most influential ones are listed below.

National or Local Societies, Committees or Other Institutions

The Iranian Society of Ethics in Science and Technology, the National Committee of Ethics in Biomedical Researches, National Committees of Ethics in Science and Technology, and Bioethics in the Iranian National Commission of UNESCO are among the first group. These institutions are influential among certain

professionals and scholars but still do not have a significant influence on public debates. However, since the rules, regulations, and practice in Iran regarding bioethical issues are primarily based on the *Fatwas* and opinions of religious authorities and are not the result of public or secular debate, being influential in public debates and opinions is not crucial for such institutions. Their level of activity is also variable. Their main activities include organising seminars or lectures or study groups, publishing bulletins or journals, and negotiation or correspondence with governmental or other influential persons and bodies. An NGO, the Iranian Institute of Medical Ethics (MAPA), was founded in 2006, with the aim of promoting professional independence of medicine in Iran. This institute has not as yet been very influential, which could partly be the result of limited resources and lack of governmental support.

Academic Centres Located in Universities

Founded in 1993, the Medical Ethics and History of Medicine Research Center (MEHR) is the leading academic centre promoting medical ethics in Iran. This centre was originally founded in the MOHME as an office but joined the Tehran University of Medical Sciences (TUMS) as a research centre. TUMS is the largest and most important medical university in Iran. The founder and current president of the MEHR, Professor Bagher Larijani, had a significant role in the development of this centre and recognition of its role in policy making and education by health authorities and Islamic scholars. In addition to being a famous medical practitioner, researcher and policy maker, Professor Larijani is the son of a Shiite religious authority. Thus, he belongs to a deeply religious family. Some immediate members of his family have key positions in the Islamic government. Given this strong scientific, religious and political background, Islamic and political authorities in Iran have great confidence in him and trust his activities in the field of medical ethics. As a consequence, MEHR was successful in introducing ethical discussions in the scientific and religious communities and showing its necessity as a basis for policy making regarding healthcare and research issues (Aramesh, 2007b).

Another academic centre promoting bioethics is the Research Centre of Ethics and Law in Medicine. This centre is hosted at Shahid Beheshti Medical University (SBMU). Located in Tehran, SBMU is the second most important medical university in Iran.

Religious Centres Located in Religious Schools or Institutions

Although there is no centre in religious schools and seminaries devoted entirely to bioethics, there are many research centres, departments and other institutions

promoting bioethical issues in the seminaries of Ghom, Tehran, Mashhad and their related institutions, which include research centres, study groups, publishing institutions and other similar bodies. The bioethical topics being discussed by Shiite scholars in these seminaries primarily cover jurisprudential issues.

In addition, numerous congresses and seminars (e.g. The Second International Congress of Medical Ethics in Iran, held in Tehran, 16–18th April 2008) have been held and PhD, Master of Science, and Master of Public Health (MPH) courses of medical ethics have been founded in at least three Iranian medical universities (e.g. MPH course in Tehran University of Medical Sciences and PhD courses in Tehran, Shahid Beheshti and Shiraz Universities of Medical Sciences). In addition, some specific journals (e.g. *Journal of Medical Ethics and History of Medicine*) are being published in the academia. Many other academic and public journals have devoted portions of their publications to bioethical debates.

Public awareness of ethical issues is growing. Additionally, healthcare professionals and policy makers will become better educated and knowledgeable about the issues. As a consequence, ethics committees will be established in many hospitals, starting in renowned university hospitals, to assist in the resolution of clinical problems and discourses that may arise.

Current Issues

Several bioethical topics have been discussed among scholars, professionals and authorities, and have even given rise to public debates in recent years that have, in some instances, resulted in ratifying the related legislations by the Islamic parliament. The most prominent examples are as follows:

Abortion

The Iranian parliament ratified the Therapeutic Abortion Act in 2005 and the Guardian Council approved it after vigorous debate (Larijani and Zahedi, 2006c). This approval was based on a principle of Islamic jurisprudence known as La Haraj, which argues that no unbearable difficulty should be imposed on a Muslim person (Sachedina, 2006; Atighetchi, 2007). So, if a pregnancy, or its results, are considered unbearable for the parents, they can abort the pregnancy. Of course, this is true before the ensoulment takes place, which, based on the Shiite jurisprudence, is after the first four months of pregnancy (Aramesh, 2006a, 2007c). This Act permits therapeutic abortion on the recommendation of three gynaecological experts and confirmation by the Legal Medicine Organization. It allows for therapeutic abortion with the mother's consent during the first four months of pregnancy in the event of severe foetal malformation

or retardation or threat to the mother's life (Larijani and Zahedi, 2006c). The MOHME has prepared a draft of the executive bylaw of the Therapeutic Abortion. It defined 51 foetal and maternal disorders that would justify the decision to abort (Larijani and Zahedi, 2006b). The MOHME has not been able to complete and publish this executive bylaw mostly due to controversies existing among scholars and authorities in this arena. Some scholars argue that the right of the father in making the decision of abortion is denied. Others are concerned with the possible uncontrolled prevalence of abortion based on this bylaw. Consequently, legal abortions are being performed based on the Therapeutic Abortion Act, without any executive bylaw, along with a black market of illegal abortions which serves those who seek abortion but cannot legitimise their requests using that law.

Stem Cell Research and Cloning

Debates concerning stem cell research and cloning exemplify the approach of Iranian religious scholars to new emerging bioethical issues. The Iranian Parliament has not yet passed any Act dealing specifically with stem cell research or cloning. Therefore, apart from the specific guidelines discussed above, no governmental ruling exists for such researches in Iran. As a result, current Iranian activities in these fields are regulated, based on *Fatwas* issued by religious authorities. Most of these religious authorities do not consider cloning (at least therapeutic cloning) as forbidden (*Hiram*). Apart from human reproductive cloning, stem cell research and cloning are considered permissible by most Iranian clergy. Even reproductive cloning is permitted by some religious authorities. This approach is partly because Islamic scholars have a strong desire to present Islam as a pro-science religion. They criticised the resistance of the Catholic Church against new scientific theories during the medieval ages and consider this pro-science attitude a testament to the superiority of Islam. Apparently, they sometimes confuse acceptance of new scientific facts with having excessive ethical tolerance. At any rate, the logical and flexibility of Islamic scholars allowed embryonic stem cell research to flourish in Iran. Consequently, Iran became the tenth country in the world to produce cultures and freeze embryonic human stem cell lines (Aramesh and Dabbagh, 20007).

Live Unrelated Kidney Transplantation

The Iranian model of kidney transplantation was the subject of extensive ethical discussions among scholars in the past two decades. Collaboration among physicians and religious authorities paved the way in 1988 for the formal development

of the Iranian organ transplantation programme (Larijani *et al.*, 2004). In that year, a large number of patients with end stage renal disease needed renal transplants and made up a long waiting list to travel abroad, with governmental support, for kidney transplantations. The financial burden, along with the shortage of dialysis facilities, which resulted in some patients dying during the war (1980–8), urged health authorities to find a solution. The *Fatwas* of religious authorities prepared for the establishment of a compensated, living-unrelated donor renal transplantation programme, which was named the Iranian model of kidney transplantation. Consequently, the number of renal transplantations that were performed in Iran increased speedily and by 1999, the renal transplant waiting list was eliminated (Ghoda and Savaj, 2006). The existence of direct financial relations between kidney donors and recipients is the major ethical Achilles' heel of this programme (Baheri, 2006; Zargooshi, 2001; for a comprehensive critical review, see: Griffin, 2007). Even though most Shiite authorities do not regard the selling of organ parts right for Muslims, compensation, apparently, is accepted. In any case, under the umbrella of the Iranian Model of Kidney Transplantation, a total of 19,609 renal transplantations were performed by the end of 2005 (3,421 from living-related donors, 15,365 from living-unrelated donors, and 823 from deceased donors) (Ghoda and Savaj, 2006). Ethical concerns about the commercialisation of human organs are being conveyed by ethicists, including researchers of the MEHR, to Iranian religious and health authorities. Using organs of deceased or brain-dead persons has been discussed as a solution. Religious authorities permitted such practice and consequently, in 2000, the parliament approved the Organ Transplantation and Brain Death Act (Larijani and Zahedi, 2007), allowing the use of organs from deceased or brain-dead persons with the consent of their relatives.

Research Ethics

The MEHR played a key policy making role in the development of Iran's General and Specific National Ethical Guidelines for Biomedical Research. Development of these guidelines was the result of a number of joint projects conducted from 1990 through 2005 by MEHR and other research centres with the support of the MOHME (Larijani and Zahedi, 2006b; for more details concerning the six specific guidelines, see also: Motevasseli *et al.*, 2006; Ghafourifard *et al.*, 2006; Shidfar *et al.*, 2006; Feizzade *et al.*, 2006; and Mobasher *et al.*, 2008). This project is a noteworthy example of collaboration among scientists, ethicists, and religious scholars in contemporary Iran. Following

the publication of some reports implying a lack of ethical observance in clinical researches in medical universities, this project was conducted with the main purpose of developing guidelines for the protection of human and animal subjects of biomedical researches. These guidelines encompass a general code and six specific guidelines containing explicit recommendations for ethical conduct of clinical research trials, research involving minors, genetic research, gamete and embryo research, transplantation research, and research involving animals. Primary drafts were developed by the scientific staff and research fellows of the MEHR and later reviewed by legal and jurisprudential scholars. A final review was made by the members of the Policy Making Council of the MOHME. Finally, the resulting guidelines were approved by the Minister, and forwarded to universities and research centres for implementation as professional regulations (Larijani and Zahedi, 2007).

The Remaining Obstacles

There are, of course, some significant obstacles remaining. The relation between jurisprudence and bioethics has not been completely clarified. There is some resistance against the official relation described above, from both sides. Some conservative Islamic scholars do not consider there to be any distinct place for bioethics. They argue that all bioethical subjects should be answered by, and in the context of, Shiite jurisprudence. Some bioethicists and healthcare professionals, on the other hand, prefer the secular model which deals with such subjects based on reason by itself without paying any attention to religion.

Although the education of medical ethics, at least in major medical universities, has been improved, the practices of many professors and old physicians, which are being conveyed to medical students and residents during clinical training, are deeply paternalistic. Many of them consider medical ethics a fantasy that belongs only to developed countries.

Other shortcomings in the present rules and regulations are not deniable, but the future is promising and there are convincing reasons for believing in a better future along with more improvements in the field of bioethics in Iran.

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