

CHRISTIANS AND THE NEW TECHNOLOGIES

Laurence J Naismith considers what the Bible tells us about humanity and how it should affect how we interact with new medical technologies.



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‘**W**

ould you trust a robot surgeon powered by algorithms?’¹

This was the title of an article in the Daily Telegraph.

Although it initially sounds exciting, one is brought back down to earth again by the quote in the subsequent article from a surgeon who comments, ‘*Current machine learning and AI systems have a long way to go before they can be trained to make that human judgement of where to cut and where not to cut*’. Nevertheless, he did add, ‘*Can they be taught to do that? Yes, but that’s not ready for prime time yet*’.¹

It is not uncommon to come across news items about introducing and applying new technologies to advance medicine. Some will still recall the worldwide astonishment when Christian Barnard

performed the first heart transplant in 1967. More recently, one might think of the robotic surgery previously mentioned, wherein an intelligent machine performs the surgeon’s task. Another relevant clinical area is that of whole genome sequencing (WGS), where genomic information is used to identify inherited disorders and mutations which can influence the progress of many diseases. As in all branches of science, medicine is rapidly advancing in its knowledge and capabilities. Many innovations are made possible by advances outside medicine itself. They have been imported and applied to medical practice, often from genetic and computer science.

Many, if not most, of the innovative procedures trumpeted in the media will fall outside of our particular fields of clinical practice. Nevertheless, we should still have some appreciation of our own attitudes towards the ethical issues involved. This is important because news items are frequently the

key points



- New technology is ubiquitous in all areas of life, not least in healthcare.
- The pace and depth of change in new technologies is increasing at a dizzying rate that can be scary and bewildering at times.
- Our understanding of our humanity in relationship to God should influence how we interact with new technology.



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subject of conversation amongst work colleagues and in the wider world. We don't need to be aware of all the intricate details of whatever procedures are involved to understand the basic moral considerations. We all recognise that every area of medicine, including research such as clinical trials etc., are subject to strict ethical scrutiny.

Although we recognise that careful ethical considerations govern all forms of clinical work (and one would in no way wish to disparage this), it must be remembered that these ethical standards generally stem from a mindset that does not necessarily conform with a Christian viewpoint. Science (including medicine) and society today are very strongly influenced by Darwinian evolutionary thinking. They are resistant, often very vocally, to the biblical account of the origin of humankind and its account of the origin of the earth and the solar system. The divine is thus excluded from human thought processes. This leads to humanity assigning the honour for our achievements to ourselves and ourselves alone. Like the residents of Babel,² we want to construct a tower to reach the heavens and make a name for ourselves. There is nothing wrong with ambition or a wish to improve one's lot, but an attitude of selfish pride is contrary to biblical teaching.³

All this is unsurprising as humankind opposes God and the things of God.⁴ Fallen individuals do not want to acknowledge God as the Creator. To do so places us in a position of self-perceived inferiority. This impinges on our self-esteem. We do not want to have what we perceive as a secondary status. We don't want to be told what to do. We don't want our self-directed pride and achievements to be dented in any way or the credit for them to be attributed elsewhere. The concept of the sovereignty of God offends us because it means we are not in control. Indeed, it is a death blow to human autonomy.

As Christians, we recognise and attest to the attributes of God, which include his foreknowledge, sovereignty, and power. We know that God has created everything and that he has made humankind in his image.⁵ We did not simply appear as the result of a purely random, gradual process, some billions of years long, in which primaevial slime (wherever that came from!) gradually metamorphosed via ape-like creatures into the human form as we now know it.

Humans were created as intelligent beings, and medicine gives us a plethora of examples of our ingenuity. Indeed, it is astonishing what advances are now being made. Just over half a century ago, Christian Barnard could not have contemplated robotic machines performing surgery any more than the pioneering surgeon John Hunter of the

eighteenth century could have envisaged heart transplant operations.

Artificial intelligence (AI) is demonstrated by machines rather than humans. It is part of everyday life in search engines, speech recognition such as in the Alexa devices used by many, and computer games. In medicine, AI can pick up details in scans that the human eye can miss, and it is already being used for this purpose. Nevertheless, the potential dangers are well recognised, including the mooted possibility of super-intelligent AI improving beyond the ability of humans to control it. This led Stephen Hawking to suggest in a BBC interview that such a development could 'spell the end of the human race'.⁶ William Cheshire's piece in this edition explores the theological and ethical implications

of AI in medicine in more detail.

As already noted, whole genome sequencing (WGS) can provide genomic information that can influence the evaluation and treatment of inherited disorders. Superficially this seems helpful and indeed desirable; in practice, the pre-natal identification of an inherited disorder could also lead to an abortion. This raises ethical questions for Christians involved in this area of investigation. Melody Redman and Francis Sansbury's article in this edition addresses these and related issues in more depth.

In day-to-day clinical practice, most Christian healthcare workers are not faced with pressing ethical problems that trouble their consciences. We are dealing with sick people and do our best in often difficult circumstances to alleviate their suffering and effect improvement. Jesus healed the sick, and such is our aim as well. Nevertheless, as in all aspects of life, although we are under authority, it is primarily the authority of Christ to which we owe obedience, and that authority must take precedence.⁷

The modern world generally regards the human race as the product of a continuous sequence of random events with no direction. *Homo sapiens* are thus perceived as merely another animal, albeit one with superior skills and intelligence. Christians have a very different way of looking at these matters. We acknowledge God as Creator and the One to whom we are responsible and must answer. Humanity is made in the image of God and must answer to him. While acknowledging man's ingenuity (itself a gift from God), we must not permit wonder at this to detract from a proper sense of awe and reverence toward God himself, the Creator of all things. This truth must be at the forefront of our minds and dictate our ethics and clinical practice. To do so is to bear witness to God and the gospel in our interactions with our colleagues. ◦

Would you trust a robot surgeon powered by algorithms?



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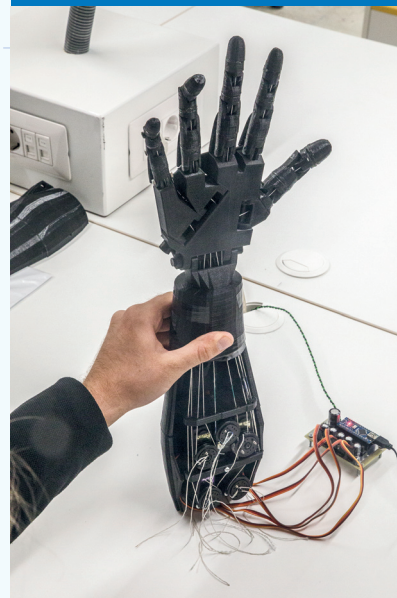


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