

The Watchtower's Handling of Blood

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Doug Mason

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THE WATCHTOWER SOCIETY'S HANDLING OF BLOOD

Blood transfusions, although often vital for the saving of a life, are potentially dangerous, which holds true for any medical procedure, no matter how simple or how complex. Blood Transfusions constitute an attack or intrusion upon an individual. This holds for any medical procedure, whether the recipient permits it or not.

It is the moral right of an individual to refuse or to accept medical treatment. If the proffered treatment may be accepted, it may also be refused. There are as many reasons for refusal as there are people: one may not wish to prolong his pain and agony or is unwilling to face further treatment; another may not wish to endanger her unborn child; yet another may wish to express his faith through the use of non-medical procedures.

Christianity is a personal religion, an intimate, direct fellowship between the believer and his God. Legal processes, which are used to exert secular Society's seasonal conscience, must not be used to influence one's conscience or mar the relationship between a creature and his Creator.

Reasoned debate must be permitted, even encouraged, to permit all to arrive at their own intelligent decisions. Freedom must exist to permit the exercise of one's convictions. External persons should offer advice and opinions but only God, in that personal fellowship with his follower, may condemn or praise, damn or give salvation.

Any decision that concerns moral values must be the outcome of a genuinely held personal conviction. Decisions must not be rigidly enforced from an external source. This holds true for any action, whether the source is secular Society or a religious Society. When a Jehovah's Witness refuses a blood transfusion, it must be their own personal conviction.

This Study is not concerned with either advocating or decrying the use of Blood Transfusions. That is not the issue. The issues addressed in this Study concern that external body of men who influence the Jehovah's Witness, the Watch Tower Bible and Tract Society. This Study's aim is to permit Jehovah's Witnesses make personal decisions.

If at the conclusion of this Study, a Witness wishes to refuse a blood transfusion because of their own genuinely held personal convictions, they are morally responsible to carry out that conviction. If they sees that the Watch Tower Bible and Tract Society fails to present viable reasons, the Witness must act accordingly.

CHAPTER 1: THE ISSUE IN QUESTION

BLOOD!

What powerful emotions that word can arouse!

The dictionary portrays this in emotionally-charged words as "blood-guilt", "blood-letting", "bloodshed", "bloodstained", "blood-money", "bloodsucker", "bloodsport", "bloodbath" and "blood curdling".

Some faint at the sight of blood. Others feel uneasy simply at the sound of the word. Some people ascribe mystical powers to the red substance. It is used in religious ceremonies before altars; drinking the dripping blood from the quivering flesh passes on the qualities of the previous owner. Its magic heals; its power destroys.

However, many are not so affected by blood. These people see blood as complex biological tissue performing essential life-giving and life-supporting functions, carrying nutrition to cells, removing waste and fighting infection.

It is important to identify one's own prejudices on blood and to recognise the views of others. Some people deliberately avoid contact with blood because of their physical reaction; others avoid it because of personal conviction, perhaps based on superstitious, religious, ethical, health or medical prejudices.

When learning what God has to say about blood, the serious student must consciously over-ride any prejudices, otherwise these will form barriers to learning God's teachings. The human viewpoint must give way to the Divine.

PERSONAL CONVICTION

Whatever the reason for avoiding contact with blood, a person must live conscientiously in full harmony with his own convictions. To do otherwise is hypocrisy.

Convictions must be personal, they must be genuinely held. Obedience to outside pressures, resulting in behaviour which does not accord with one's own personal beliefs, is sin.

"Each one should be fully convinced in his own mind" (Romans 14:5, NIV)

"Everything that does not come from faith is sin" (Romans 14:23, NIV)

THE PURPOSE OF THIS STUDY

The Jehovah's Witness' stand on blood transfusion is well known. Legalists, moralists and the medical profession have had to examine their positions, adapting processes so as to cope. Legal processes, including specially drafted laws enacted in hastily convened court sittings, are as well publicised as the death of a Witness following their refusal to accept a transfusion. These are matters of life and death. For the Witness it is a matter of eternal life and eternal death.

Problems abound with transfusions. Errors with cross-matching and the use of diseased blood are responsible for many of the problems. Ideally, a synthetic blood that really works would be an untold boon to the medical profession and to their patients. Witnesses, with their opposition to transfusions, form a ready pool of willing guinea pigs.

It is not the purpose of this Study either to advocate the medical process of blood transfusion or to oppose it. Undeniably, countless numbers have had their lives prolonged as a direct result of the process, and many would have lived if the process was available or had been used. There is no denying people have received blood unnecessarily, and many have been seriously injured or died as a direct consequence of receiving blood.

The primary concern of this Study is the Watch Tower organisation. In considering the blood issue, this Study permits those within the organisation, and those still influenced by it, to carefully consider their relationship to the Organisation.

HISTORICAL SETTING

Although it has existed since the late 1870's, the Watch Tower Bible and Tract Society (which is the controlling body for Jehovah's Witnesses, and is abbreviated as 'WTS' in this Study) has instructed its followers concerning blood transfusions only since the mid to late 1940's.

According to the 1975 Yearbook of Jehovah's Witnesses, the stand on transfusions became clearer "following the statement in The Watchtower of December 1, 1944, which speaks of the prohibition on blood, 'whether by transfusion or by mouth'" (1975 Yearbook, page 222).

The blood transfusion issue is kept constantly to the fore, with Witnesses regularly being supplied articles in the Society's official publications, particularly the bi-monthly magazines The Watchtower and Awake!.

EARLY DEVELOPMENT

Consideration of the Society's publications of the 1950's and the 1960's shows how it developed its blood transfusion stance during that period.

The 1950 booklet Evolution Versus the New World simply refers to blood tests as failing to prove evolution (pages 8-9), and whilst the 1952 revised edition of Let God Be True does not mention blood at all, the 1953 publication Make Sure Of All Things heads almost two pages of 'proof texts' on blood transfusion with the "Definition":

"Transferring blood from the veins or arteries of one person to another. As in intravenous feeding, is a feeding upon blood. An unscriptural practice."
(page 47)

In 1960 the Australian Branch of the WTS issued a 12-page publication on "the blood transfusion controversy". In 1961 the central administration of Jehovah's Witnesses published the 64-page booklet Blood, Medicine and the Law of God (referred to in the 1963 publication Babylon the Great Has Fallen!, page 545).

EARLY MAGAZINE ARTICLES

The 1963 Babylon book refers to an article in the July 1, 1945 issue of the Watchtower as referring to blood transfusion:

"Following this (Watchtower) article a great controversy raged over the subject, and letters clarifying the Bible's teaching on the divinely approved use of blood were published." (Babylon the Great Has Fallen!, page 545).

This Watchtower article of July 1, 1945 called on

"all worshipers of Jehovah who seek eternal life in this new world of righteousness to respect the sanctity of blood and to conform themselves to God's righteous rulings concerning this vital matter." (page 201)

According to William Cetnar, page 29 of the September 1945 issue of the Dutch edition of Consolation stated

"God has never published a decree which forbids employing medicine, injections and blood transfusions. It is a human invention like the Pharisee's disregard for Mercy and Grace. To serve Jehovah with all the mind does not mean to put our intelligence in a box. Principally because there is a

human life at stake. The life, being of great value, is holy to Jehovah."
(Questions for Jehovah's Witnesses, page 30)

This would pinpoint the starting time of the Blood Transfusion issue, since the Dutch edition of Consolation followed the above Watchtower by only a few weeks.

In 1940 the WTS, while still under Judge Rutherford, wrote glowingly of the use of a blood transfusion:

"The Mending of a Heart

In New York City a housewife in moving a boarder's things accidentally shot herself through the heart with his revolver. She was rushed to a hospital, her left breast was cut around, four ribs were cut away, the heart was lifted out, three stitches were taken, one of the attending physicians in the great emergency gave a quart of blood for transfusion, and today the woman lives and smiles gaily over what happened to her in the busiest 23 minutes of her life." (Consolation, December 25, 1940, reproduced in Cetnar (op cit), page 30)

Examination of Watchtower Publications Index 1930-1960 under the headings of 'Blood', 'Blood Substitutes' and 'Blood Transfusion' (pages 38-39) shows the WTS developed its position from around 1949. According to the Index, the Awake! of September 22, 1949 presented the first article on the 'Bible View' of blood transfusions, and the first article on 'blood substitutes' appeared in the Awake! of August 8, 1950.

The first article on the 'Dangers' of transfusions appeared in the Awake! of October 22, 1948. This was followed up by a Watchtower article two years later and by the Awake! of October 22, 1951, which is three years after the first article. 'Objections' were first 'answered' on pages 367-8 of the 1949 Watchtower, an indication that questions had been raised and that the Society had decided to state its position.

A DEFINITIVE PUBLICATION

In 1977 the WTS published its 64-page booklet, Jehovah's Witnesses and the Question of Blood (abbreviated in this Study as QB). The QB booklet continued to represent the Society's official view. Page 27 of the Awake! of June 22, 1982 refers to all of the booklet's 64 pages, and when the "Governing Body of Jehovah's Witnesses" published a 4-page letter to the medical profession in the following year, Blood Transfusion - Why Not For Jehovah's Witnesses?, it referred to QB.

Over the years since it published QB, the WTS has never excused, apologised or retracted any statement or reasoning used in it. If error or misinformation existed in the booklet when it was released, the WTS has never, with the advantage of further research and study, cared to modify the booklet. All the while that Witnesses have risked their lives and given the lives of their loved ones, the WTS has stood by its pronouncements and watched. It has seen children, women and men die directly as a result of its position.

ANALYSIS OF THE QB BOOKLET

The QB booklet's Table of Contents shows how the WTS covered the religious, ethical and medical issues. Study of the presentation provides the following analysis

- | | |
|--|--------------|
| (a) Religious reasons for not eating blood | pages 4-16 |
| (b) Equation of eating with transfusion | pages 17-18 |
| (c) Ethical and moral considerations | pages 19-38 |
| (d) Medical authorities quoted | pages 38-58 |
| (e) Conclusion and Appeal | pages 58-61. |

CHAPTER 2: A RELIGIOUS ISSUE

"The stand taken by Jehovah's Witnesses is above all a religious one; it is a position based on what the Bible says." (Jehovah's Witnesses and the Question of Blood [abbrev: QB]: page 5)

"It should be emphasised that the viewpoint of Jehovah's Witnesses on the matter (of administering blood) is entirely religious, based . . . not on medical findings. Whether the procedure is considered safe or dangerous from a medical standpoint in no way influences (the Jehovah's Witnesses') position." (Blood, Medicine and the Law of God, page 16)

"We (Jehovah's Witnesses) do not take it upon ourselves to conduct an objective debate on the advisability of the use of blood in medical therapy." (Ibid. page 38)

The WTS does not see the issue of blood transfusion as decided by the medical issues, with its advantages such as life-saving results, or with its disadvantages such as dangers of disease transmission and errors in handling. Quite apart from these, its position is determined by religious understanding, of interpreting the teachings of Scripture.

In 1983 the "Governing Body of Jehovah's Witnesses" wrote a four-page letter "To Members of the Medical Profession". Titling it: Blood Transfusion -- Why Not for Jehovah's Witnesses? the WTS advises that the issue is a religious one, not medical:

"It is not our intent here to take issue with the medical or scientific advisability of blood transfusions . . . Our objection to accepting blood is not primarily a medical one; it is a Biblical or religious objection . . .

"It is for religious reasons that Jehovah's Witnesses do not accept blood transfusions . . .

"Let us emphasize that in referring to such acknowledged (medical) dangers, we do not mean that Jehovah's Witnesses object to blood transfusions primarily for medical reasons. . .

"For more details . . . we invite you to read our booklet Jehovah's Witnesses and the Question of Blood."

In view of this, it is incongruous that virtually one-third of the QB booklet deals with the medical aspect, with much less space allocated to the religious exposition. Also, numerous items and articles appear regularly in Watchtower and Awake! magazines that deal exclusively with medical findings and with medical procedures.

SCRIPTURAL MEANING OF 'BLOOD'

In the Old Testament (OT), the Hebrew Scriptures, the word DAM (blood) occurs 362 times. Of these 362 occurrences, 203 denote "death by violence", about twice as often as "blood of sacrifice". Seventeen (17) occurrences relate to the eating of meat with blood, and seven (7) connect blood with "life".

"Far and away the most frequent use of the term ('blood') is to indicate death with violence. . For example we read, 'Whoever sheds the blood of man, by man shall his blood be shed' (Gn. 9:6), where the first occurrence of the word plainly points to murder and the second equally plainly to execution." (The Atonement, Morris, page 52)

"It is clear that the commonest use of DAM (Heb: blood) is to denote death by violence". (The Apostolic Preaching of the Cross, Morris, page 113)

In the New Testament (NT), the Christian Greek Scriptures, the word AIMA (blood) occurs 98 times, about three times as often as STAUROS (cross or stake) and about five times as often as the "death" of Christ. Of these 98 occurrences, 25 denote a "violent death", 12 refer to the blood of animal sacrifices, 5 expressions of "flesh and blood" occur, 4 refer to the woman with the issue of blood, and apart from John 1:13, the rest refer in some way to the blood of Christ, "and on a number of occasions the reference seems plainly to his death, without any necessary implication of sacrifice" (The Apostolic Preaching of the Cross, Leon Morris, page 122).

After examining these occurrences in the OT and NT, Morris concludes:

"Thus it seems tolerably certain that in both the Old and New Testaments the blood signifies essentially the death." (Ibid. page 126)

Since the blood in a transfusion does not "signify essentially the death" of the donor, the medical procedure does not fall within the teaching or the intent of "blood" in the Scriptures. Under the heading of "Blood", Leon Morris writes in The New Bible Dictionary, edited by J. D. Douglas

"Of all the 362 passages in which the Hebrew word DAM occurs in the Old Testament . . . only seven passages connect life and blood (seventeen refer to the eating of meat with blood). From this it is clear enough that death is the association most likely to be conjured up by the use of the term.

"(In) the New Testament, . . . as in the Old Testament, blood is more often used in the sense of death by violence than in any other sense. When we come to the blood of Christ there are some passages which indicate in the plainest possible fashion that death is meant." (page 160)

ANOTHER RESPECTED AUTHORITY CONCURS

In his definitive monograph The Meaning of the Word 'Blood' in Scripture, A. H. Stibbs wrote

"'Blood' is a vivid word-symbol for referring to someone's violent death. . . In the New Testament the word 'blood', while it is sometimes used in its direct literal sense to describe actual blood, is much more often used, as in the Old Testament, in a metaphysical sense as a way of referring to violent death, and of connecting other people with it." (pages 10,16)

TRANSFUSIONS NOT SYMBOLISED

In Scripture, 'blood' refers to death, usually a violent one -- even when the emphasis is not on the physical flow of blood, as in strangling or in stoning (see Acts 22:20). There is no death required for a transfusion to take place. Donors consciously and willingly give their blood without having to die.

In Scripture, the blood on the altar declared life had been taken. The blood on the ground showed the beast was dead before it was eaten. The blood symbolised life poured out in death.

The blood in the plastic bag following a donation does not indicate the owner had died. The blood in a transfusion does not have the meaning of death, particularly when the blood being given had earlier been taken from the person receiving it (autologous transfusion).

Furthermore, never does Scripture say Jesus Christ gave his blood to the believer. In a transfusion however, the blood is given. There is no analogy between the two. Scripture speaks of Jesus' blood (his death) being given for, or in place of, the believing Christian's death. Jesus' death is never given to the Christian. In a transfusion, however, the donor's blood is given to the recipient. The two cannot be compared:

"There is nothing in the ideas of the Bible about 'blood' which is at all comparable to the modern practice of blood transfusion. Nowadays, one man can sometimes say of another, 'He gave his blood to me'. This is not a right thing to say of Christ." (Stibbs, page 29)

To "drink Jesus' blood" is a metaphorical description partaking of the benefits of his death. It does not describe drinking of his literal blood, a practice which would have no part in Hebrew sacrifice or in Christian belief. There is analogy between drinking Jesus' blood and transfusions.

OT EVIDENCES

Throughout the Old and New Testaments, 'blood' consistently signifies 'death'. The reader is urged to refer to the authorities cited in this Study for exhaustive treatments on this point. Some of the evidences in the OT include (quotations are from the New World Translation)

Psalm 30:9 "What profit is there in my blood when I go down to the pit?"

Numbers 35:19 "The avenger of blood is the one who will put the murderer to death". (See also verses 26,27; Psalm 79:10)

Jeremiah 26:15 "If you are putting me (Jeremiah) to death, it is innocent blood that you are putting upon yourselves".

Joshua 2:19 "His blood will be on our heads if a hand should come upon him".

Leviticus 20:9 "He should be put to death . . . His own blood is upon himself".

Compare Psalm 72:14 "Their blood will be precious in his eyes"
with Psalm 116:15 "Precious in the eyes of Jehovah is the death of his loyal ones"

OT CONCEPTS

The Hebrew mind did not visualise life as existing separate from the body. They did not develop the dualism of the later Greeks in which the soul, as an alien principle, was unshackled from the body at death in a continuing existence.

"(The Hebrews) thought of life after death not in terms of the immortality of the soul but of the resurrection of the body. For them 'life' and 'the body' went together. If they found it difficult to think of human life as continuing after the body had died, why should we hold that they thought of the life of a slain animal as persisting in the basin the priest held?" (The Atonement, Morris, page 57)

To the Hebrew mind, it was the blood that gave life to the body. It was the life OF THE FLESH. Thus when the body was drained of its blood, death of the body was clearly evidenced. The display of blood was clear evidence death had occurred.

"In biblical anthropology the soul . . . is an integral part of the body: 'the soul' (the blood) animates the flesh of animals. In such texts (as Gen. 9:4; Lev. 17:11ff; Deut. 12:23) the Hebrew word soul would be well translated by our word vitality". (Vocabulary of the Bible, ed. J. von Allmen, page 38, art. 'Blood')

OT APPLICATIONS

Across the range of OT applications, the demonstration of blood consistently referred to death. In respect of slaughter, the blood had to be drained from the flesh to prove the beast was definitely dead:

"The consumption of blood was regarded as equivalent to eating the living animal" (The Encyclopedia of Jewish Religion, editors: Werblowsky, Wigider, page 73)

At the institution of the Passover, the blood of a lamb, without blemish and hence not deserving of death, was splashed on the lintels and doorposts. To the passing angel it was a symbol that a death had taken place, a substitute for the death of the firstborn. It was a "sign" of death that God would "see"; it was a shelter for those in time of danger. It was not a "life presented to God" nor was it "a release of life".

Likewise with Atonement, blood is linked with death. "It is the termination of life, the infliction of death, that atones" (The Apostolic Preaching of the Cross, Morris, page 119).

Numbers 35:33 explains it is the death of a murderer that atones, not the presentation of a life:

"And for the land there may be no atonement respecting the blood that has been spilled upon it except by the blood of the one spilling it".

To sustain its rationale on blood transfusion, the WTS holds to the erroneous position that 'blood' means 'life'. The Society clearly states its position:

"By not eating the blood . . . the Israelite was, in effect, returning the creature's life to God". (QB, page 9)

This unscriptural position is essential to the Watchtower Society's position on blood transfusion. Instead of recognising the true Scriptural meaning given to 'blood', the WTS extrapolates upon the false premise that equates 'blood' with 'life'.

Reckoning that 'blood' means 'life', the WTS reasons Scripture prohibits the use of blood on the grounds that it would 'sustain' the user. Hence, reasons the WTS, since blood must not be used to 'sustain', a blood transfusion falls under the Scriptural prohibition, since that blood would be 'sustaining' the recipient.

"If animal blood representing life was to be viewed as sacred and not to be taken in to sustain life, obviously human life and blood were to be viewed and treated as even more sacred . . . If animal blood, representing life, was not to be taken in for sustenance, that would be even more so of human blood." (The Watchtower, June 15, 1978, page 22, emphases supplied)

The question of "sustenance" refers to eating the flesh of an animal while it is still alive. The Jews were not to follow this hideous practice of the surrounding heathens. They were permitted only to eat the meat of a dead animal, and were to show this by draining the blood from the meat they were eating.

The use of human blood could not be considered as relevant, let alone more sacred, since there was no question of either preparing human flesh for consumption or for using it in any sacrificial system.

OT METAPHORICAL APPLICATIONS

Care must be taken not to give literal meanings when a metaphorical or figurative sense is intended. For example:

"David's refusal to 'drink the blood of the men that went in jeopardy of their lives' is a metaphorical statement and must be understood so. David certainly did not mean that he would literally be partaking of either the blood or the lives of the men, and the statement must not be tortured into giving an unreal meaning." (The Apostolic Preaching of the Cross, Morris, page 115; see also The Atonement, Morris, page 53)

David was declaring his attitude to the sacredness of life, in this case, the sacredness of the lives of his mighty men:

"A similar attitude . . . to the solemn significance of enjoying the benefit procured at the cost of the sacrifice of life . . . is expressed in David's unwillingness to drink water procured at the risk of men's lives". (Stibbs, page 13)

Other metaphorical uses of 'blood' include: 'innocent blood', 'blood on his head' and 'blood crying out'. These are in the same category as the above example from David, and would likewise produce unwarranted conclusions if taken literally.

"The Hebrews tended to use the term 'blood' in picturesque metaphors, more particularly as a vivid way of referring to death." (The Atonement, Morris, page 62)

LEVITICUS 17:11

Of the 362 OT appearances of 'blood', only 7 connect it with 'life'. The other 355 give it the meaning of 'death'. Apart from the overwhelming statistical evidence, those 7 texts that connect blood with life do not give unequivocal support to the Watchtower's position. Leviticus 17:11 is a typical example. In the Watchtower's New World Translation, the text reads

"The soul of the flesh is in the blood"

The word rendered 'soul' in the New World Translation of Leviticus 17:11 translates the Hebrew word NEPHESH. The Society uses this text to equate 'blood' with 'life'. The text itself is ambiguous, and may "just as well be interpreted of life yielded up in death, as of life set free" (Morris in Douglas, page 160).

"The Leviticus passage is ambiguous, for the reference to blood could be understood as signifying the presentation of life, or, equally, as indicating the infliction of death. . . . This enhances the importance of Numbers 35:33, for in this verse there is no ambiguity." (The Apostolic Preaching of the Cross, Morris, page 118)

When Charles Taze Russell, founder of the Watchtower Bible and Tract Society, wrote an article in the December 1890 issue of the Watchtower, he indicated that he realised Scripture equates the term "blood" with "death". He wrote:

"Animals were killed and their blood was carried in by the priest and presented before God as the evidence that death had really taken place . The blood, being no longer in the victim's veins, was the positive evidence that the life was taken".

The Hebrew word NEPHESH, rendered 'soul', or more properly as 'life' in Leviticus 17:11, has a range of meanings:

"It may not be without significance that Nephesh . . . is not coterminous with the English 'life'. It can mean something very like 'life yielded up in death'. . .

"(NEPHESH) is used in such a variety of ways with regard to death. . . . (There) are certain passages where NEPHESH plainly points to death. Thus the sailors, about to cast Jonah into the sea, pray 'let us not perish for this man's nephesh (Jonah 1:14). Clearly it is (Jonah's) death and not his life (the sailors) have in mind. . . . There are passages where NEPHESH is translated by 'dead' or a similar term, as 'Ye shall not make any cuttings in your flesh for the dead (LANEPHESH)' (Lv. 19:28; cf Lv. 21:1; 22:4; Nu.

5:2; 6:11; 9:6,7,10; Hg. 2:13,etc.)." (The Apostolic Preaching of the Cross, Morris, page 116; see also his page 126)

Since in some instances NEPHESH is to be understood in the sense of 'life yielded up in death', as in Genesis 9:4, Leviticus 17:11, Exodus 4:19, Psalm 35:4, 1 Samuel 28:9, 2 Samuel 14:7, Proverbs 1:18 and others, there is no support or comfort for the WTS. In a blood transfusion the blood carries no meaning of 'life yielded up in death'.

"The association of NEPHESH with DAM in Leviticus 17:11 etc., cannot be held to prove that life is thought of as still existent after the blood has been poured forth . . . It (is) more probable that the meaning here is that of life given up in death. This is supported by the fact that it is the 'life of the flesh' that is said to be in the blood, and it is precisely this life which ceases to exist when the blood is poured out. . . It is most unlikely that (the Hebrews) would think of the life of an animal as persisting after slaughter." (Morris, op cit., page 117)

From his study into three texts that relate 'Blood' with 'life' (Genesis 9:4; Leviticus 17:11; Deuteronomy 12:23), Stibbs concluded:

"A careful examination of the contexts (of these three passages) reveals that in each of the three cases these statements say not that 'blood' is 'life' in isolation, but that the blood is the life of the flesh. This means that if the blood is separated from the flesh, whether in man or beast, the present physical life in the flesh will come to an end. Blood shed stands, therefore, not for the release of life from the burden of the flesh, but for the bringing to an end of life in the flesh. It is a witness to physical death, not an evidence of spiritual survival". (Page 11)

AN INCONSISTENT POSITION

The Watchtower Society is one of several bodies that do not believe in the immortal soul. It teaches the unconscious sleep of the dead. However, the concepts which underlie the teaching that 'blood' means 'life' run counter to the WTS's teachings. Those concepts speak of life being unshackled at death, whereas the Watchtower's stance on unconsciousness in death should, in all consistency, recognise that the removal of blood means its display declares 'death', not 'release of life'.

"It is the blood which gives life to the flesh'; this is the meaning of the fundamental definitions of Gen. 9:4; Lev 17:11ff; Deut. 12:23; the 'soul' of the flesh resides in the blood; the soul of all flesh lies in its blood. In these contexts the word soul has no connection with the Greek ontological dualism which sees in the soul an alien principle opposed to the body. In Biblical anthropology the soul on the contrary is an integral part of the body: 'the soul' (the blood) animates the flesh of animals. In such texts the Hebrew word soul would be well translated by our word vitality." (Vocabulary of the Bible ed. J. von Allmen, page 38, article 'Blood')

NT MEANING

The meaning of 'death' given to 'blood' in the Old Testament is carried into the teachings of the New Testament (NT).

"There (in the New Testament), as in the Old Testament, blood is more often used in the sense of death by violence than in any other sense." (Douglas, page 160)

"In the New Testament the word 'blood' . . . is much more often used, as in the Old Testament, in a metaphorical way of referring to violent death, and of connecting other people with it." (Stibbs, page 16)

"The term blood is not used as often in the New Testament as it is in the Old (it is found ninety-eight times). But, as in the Old, the most frequent single classification is that which refers to violent death." (The Atonement Morris, page 62)

Examples of typical passages include

Revelation 6:10 "Until when, Sovereign Lord holy and true, are you refraining from judging and avenging our blood?"

The blood means their death, whether the means resulted in a physical flow of blood or not. See also Rev. 17:6; 18:24.

Matthew 27:24,25 "I (Pilate) am innocent of the blood of this man . . . His blood come upon us (Jews) and upon our children."

Both Pilate and the crowd use the word 'blood' to describe Jesus' death.

Romans 5:9,10 "We have been declared righteous now by (Jesus') blood. We have become reconciled to God through the death of his Son."

These parallel statements in Romans clearly show that by 'blood', Jesus' death is clearly meant. See also Col.1:20. No blood transfusion satisfies the meaning of death that is given to blood throughout Scripture.

NEW TESTAMENT APPLICATIONS

Included among the NT applications of 'blood' are:

* Hebrews 9:11-14 *

"When Christ came as a high priest . . . he entered no, not through (dia) the blood of goats and of young bulls, but through his own blood . . . How much more will the blood of the Christ, who through (dia) an everlasting spirit offered himself." (NWT, 1971 edition, marginal reading)

The Kingdom Interlinear Translation of the NWT shows that Christ entered the perfect tent through his 'blood'. The old order required the high priest to enter "with" blood but Christ, as the High Priest of the new order, entered "through" blood, that is, by means of his death. (Hebrews 9:25)

"Christ did not enter 'with blood' or take any blood at all. He entered 'through his own blood', that is by way of his own death . . . So, in the heavenly glory, He does not sprinkle, and never has actually sprinkled, blood upon some heavenly mercy-seat. Rather He is Himself, so to speak, the mercy-seat or propitiation." (Stibbs, pages 23,18)

The typical High Priest of the old order, in taking blood into the tabernacle, indicated death had taken place. Christ entered the greater tabernacle by means of his blood, that is, by means of his death.

* John 6:54-58 *

"He that feeds on my flesh and drinks my blood has everlasting life . . . for my flesh is true food, and my blood is true drink".

In contrast with the passages in Hebrews and elsewhere, this saying by Jesus has no reference to the Hebrew sacrificial system, since there is no place there for the drinking of blood, and Jesus positively commands such action. The Greek of John 6:53 clearly shows the 'flesh' and the 'blood' are treated and separately: Jesus is speaking of his death.

* Revelation *

Statements in the Revelation, which was also written by the disciple John, show that Jesus' blood provides eternal benefits:

Revelation 1:5 "Loosed us from our sins by means of his own blood"

Revelation 7:14 "Washed their robes and made them white in the blood of the Lamb"

Revelation 12:11 "They conquered (the Devil) because of the blood of the Lamb"

To "eat Jesus' flesh" and to "drink Jesus' blood" means to partake of the eternal benefits of his death.

"Such language describes not participation in His life but appropriation of the benefits of His life laid down. To eat His flesh and to drink His blood is to confess that only through His death can I live." (Stibbs, page 28)

Even though the Jews were repulsed by the thought of drinking Jesus' blood, he positively commanded it. In this command the context is of death and of appropriating eternal benefits of the life laid down. Christians receive the benefits of the death of Jesus, but the death itself (the blood) is never given to them.

To see any analogy between Jesus' command or the Jews' revulsion and the transfer of blood from one person to another is to step outside the message and the intent of Scripture. In a transfusion there is no death required, there is no appropriation of benefits on the eternal spectrum, there is no benefit gained from a death. In a transfusion the blood is given to the recipient, whereas in Scripture the blood itself is not given to the Christian, only the benefits of the blood are given.

ORIGIN OF "BLOOD IS 'LIFE' "

Since Scripture gives the meaning of 'death' to blood, the alternate incorrect meaning comes from somewhere else.

"It seems clear enough that it is Bishop Westcott who is chiefly responsible for the wide-spread modern prevalence of this idea (that the expression 'blood' means 'life')." (Stibbs, page 6)

Commenting on the Epistles of John in 1883, Westcott wrote

"The Blood always includes the thought of the life preserved and active beyond death. . . By the outpouring of the Blood the life which was in it was not destroyed, though it was separated from the organism which it had before quickened." (Quoted in Stibbs, page 7)

The proponents of this view see life as continuing upon death. But nowhere in Hebrew thought, and particularly in the Law, is there any idea that corresponds with the later Greek thought that saw life existing apart from the body. According to the Hebrews there is no separate soul, man and beast are composite living entities. The Jews did not teach that life resided in the blood and that by pouring it out the life was released, to be returned to God. But the proponents of that view do believe this:

"The blood, in fact, needs to be dissociated from death. . . It is life, once imprisoned and misused, now released.' (F.C.N. Hicks, The Fullness of Sacrifice, page 242). . . 'The victim is slain in order that its life, in the form of blood, may be released.' (Vincent Taylor, Jesus and His Sacrifice, pages 54-55)." (Quoted in The Atonement, Morris, page 54)

The position that 'blood' means 'life' is based on the belief that life continues at the moment of death. The WTS does not agree with this teaching yet it proclaims a teaching based on that belief. The belief

that blood stands for life instead of death robs all meaning from the Levitical sacrificial system. In the greater fulfilment, it robs all meaning from the blood (death) of Jesus Christ.

"On this view, blood and death have little to do with one another. It is life, not death, that blood signifies. When the priest stood by his altar with a basin full of blood it was not really blood: it was a basin full of life.

"It was the animal's bad luck that the priest could not get his basin full of life without the animal dying." (The Atonement, Morris, pages 54-55)

When a doctor holds the bag of blood that has been donated he is not holding a substance that satisfies the Scriptural symbolism of death. There is no "bad luck" that demands the owner of the blood had to die for the substance to be available. In the medical process the blood does not symbolise death but love and caring.

CONCLUSION

When Scripture refers to the display of blood, the meaning ascribed is death. This is clearly depicted through study of sacrifice and slaughter. The blood demonstrated that death had been inflicted. In the case of sacrifice, it gave a sign to God; in the case of slaughter, it declared God's ownership of life.

The blood was inexorably tied to that of edible, sacrificial beasts. Fishes' blood was not considered, even though the animals may be edible, since they played no part in the sacrificial system. Human blood was not encompassed. Not only did it come from a non-edible source, it was worthless sacrificially there is only one who is unblemished and not deserving of death: Jesus Christ.

The Scriptural meaning of blood, namely death, finds no satisfaction in the modern medical process of blood transfusion. Death is not essential to the process. Whether people die is incidental, even accidental. Since the donor is not required to die, the collected blood does not symbolise death. The transfusion is essentially the transfer of body tissue, a process not objected to in principle by the WTS.

In a blood transfusion, "death" is not passed from one person to another. There are no eternal benefits from a blood transfusion. But in Scripture "blood" does refer to death, usually a violent one; blood is not passed from one person to another, and there are benefits on the eternal plane (with respect to the blood - the death - of Jesus Christ). The belief that equates "blood" with "life" relies on the teaching of the Immortal Soul, a teaching the WTS ostensibly denies.

The WTS says its stance on blood transfusion is determined by its understanding of Scripture. Since this is faulty it casts doubts on the Society's teachings on blood and on its ability to interpret Scripture.

CHAPTER 3: A MORAL PRINCIPLE

"The Creator attached a highly important moral principle to blood." (Jehovah's Witnesses and the Question of Blood, abbrev: QB, page 6)

"This was not a mere dietary regulation nor a pointless religious ritual. Such conduct involved a highly important moral principle: Blood represented life that was from God." (The Watchtower, June 15, 1978, page 22)

"The issue of blood for Jehovah's Witnesses, therefore, involves the most fundamental principles on which they as Christians base their lives. Their relationship with their Creator and God is at stake." (QB, page 19)

"Thus they are moved to keep Jehovah's law on blood even in ways that might appear to some to be insignificant." (Watchtower 15 February, 1964, page 128)

The Watchtower Bible & Tract Society (WTS) presents the issue of Blood Transfusion in an environment of moral integrity and pristine purity. Obedience is extolled, particularly when life is at risk.

Details are provided to Witnesses on topics as diverse as the use of garden fertilisers, the feeding of pets and their treatment by vets, and the medical use of leeches. Moral principles covering blood determine where the Witness buys his food, where he works, what he stocks in his shop, and prevents many accepting inoculations.

Responding to the moral principle, Jehovah's Witnesses accept "faithfulness" even when it may result in their death or in their children's:

"Jehovah's Witnesses are sure that obeying the directions from their Creator is for their lasting good... They cannot and will not violate their deep-seated and Bible-based religious convictions." (QB, pages 19,21).

A SERIOUS MORAL REQUIREMENT

According to the WTS, when God attached the "highly important moral principle" to the "dietary regulation" concerning blood, he gave "a regulation that applied... to all mankind from that time on." (QB, pages 6,7).

Page 8 of the QB booklet commences a sweep down history, to show a continuous moral thread.

The booklet begins with Noah, using the Commentary on Genesis by Gerhard von Rad to show that Genesis 9:3,4 is "an ordinance for all mankind." (QB, page 8).

Moving into the history of Israel, the QB booklet notes that the prohibition on eating blood covered "'any sort' of blood; 'the blood of any sort of flesh' (Leviticus 17:10,14)." (QB, page 10; see also QB, page 8).

Coming to the Christian era, the booklet points to the Council of Jerusalem, recorded at Acts 15. The decision of that Council is seen as teaching that: "it was 'necessary' that they abstain from blood.. The command to 'abstain from blood' was not a mere dietary restriction but was a serious moral requirement." (QB, page 12).

Attestations of Church Fathers such as Eusebius and Tertullian are then called on to show that early Christians did not eat blood.

3: A Moral Principle

The booklet then presents historians to show that from that time onwards, Christians abstained from things that were "unclean" are said to have continued to the present abstinence by Jehovah's Witnesses.

"Down through the centuries this requirement (to 'abstain from blood') has been recognized as 'necessary' for Christians." (QB, page 16).

MORALITY

"Morality" is concern for the distinction between what is right and what is wrong.

In its analysis, the WTS is thus claiming that the injunction against consuming animal blood, as given by God to Noah, describes the right action to be practised by all persons, for in Noah all mankind existed. This 'right action' was reiterated by Moses to the Israelites, confirmed by the New Testament Church at Acts 15, and has been practised by Christians down to the present time, where it is now practised by Jehovah's Witnesses.

CORRECT PERSPECTIVES AND STANDARDS

Since we are Christians, we must first consider the stance taken by the pure church of the Apostles as recorded in the NT. The pronouncement by James, reported at Acts 15, and the position taken by the Apostle Paul, who was deeply involved in the Council at Jerusalem, help provide the correct perspective and understanding. This does not mean the OT statements may be ignored; these must be carefully considered, but in the light of the NT.

Each aspect of the moral attitude of the NT Church must be studied to identify any relevance to the modern-day practice of blood transfusion.

The standard of "Morality" must be upheld by the WTS: Does it behave truthfully? Is its presentation of the facts honest? Does it provide all the relevant information? These questions must be answered. If the WTS does not uphold the highest standards of Morality, its statements regarding God's "moral requirements" cannot be accepted. Truth must be supported by truth, used truthfully. Resorting to dishonest tactics makes the conclusion untenable.

If unacceptable practices are used to support a belief, the belief is not upheld. If the WTS uses such practices to support its stance on blood transfusion, its teachings cannot be accepted. Worse, it has blood on its hands.

PERSONAL CONVICTIONS

A Christian must be fully convinced in his own mind concerning his beliefs, and is obliged to live according to his convictions. Every man must act as he is "fully convinced in his own mind" (Romans 14:5).

When a Jehovah's Witness is fully convinced in his own mind that God abhors blood transfusion, to act contrary to that conviction is sin

"Everything that is not out of faith is sin" (Romans 14:23).

When a Christian lives a life that does not harmonise with his convictions, that is sin. When he acts although he has doubts that he should act, that is sin. When he fails to act although he is convinced he should act, that is sin.

CHRISTIAN MORALITY

There is an added dimension that determines a Christian's behaviour -- it must be tempered by the affect it will have on other Christians. Christian morality is concerned with ensuring others are not stumbled by one's own freedom.

"It is well not to... do anything over which your brother stumbles." (Romans 14:21).

"Do not by your food ruin that one for whom Christ died." (verse 15)

"Food will not commend us to God... But keep watching that this authority of yours does not somehow become a stumbling block to those who are weak." (1 Cor. 8:8,9; see also verse 13).

"Christian duty is to be considerate of persons with weak consciences, being willing to forgo permissible things so as not to stumble these others." (Watchtower, September 15, 1982, page 31).

MORAL RESPONSIBILITY

The strong Christian knows "the Kingdom of God is not eating and drinking". The strong Christian has "faith to eat every-thing... (since) nothing is defiled in itself... (for) all things are clean." (Romans 14:17 (margin), verses 2, 14, 20).

"Not what enters into (his) mouth defiles a man; but it is what proceeds out of (his) mouth that defiles a man." (Matt. 15:11; see also verses 17-20).

"The strong Christian realises that God's Kingdom is not concerned with eating and drinking, but with righteousness and peace and joy with holy spirit." (Romans 14:17).

If Jehovah's Witnesses were part of the Christian community (the WTS's continual barrage against Christendom clearly indicates this is not so), then Christian and Witness alike would be bound to behave in a manner that would not harm the other's conscience.

In that case, since a Jehovah's Witness believes the Kingdom of God is concerned with "eating and drinking" (of blood), it would be the Christian's moral responsibility to recognise the Witnesses' weak consciences. In this way peace and unity would be promoted. This, however, is a hypothetical situation; the WTS has no intention of being at peace and unity with Christians.

The very least that is expected of the Christian is for him to expose individual Witnesses to the truth. If the Witness conscientiously rejects that truth it becomes the Christian's responsibility to ensure the Witness's behaviour fully accords with his own convictions before God.

At least, through their enforced consistent behaviour, Witnesses would not be harming the weak consciences of other Witnesses. However, it is wrong for the WTS to deny non-Witnesses freedom of conscience to accept blood transfusions while demanding freedom of conscience for Witnesses to reject blood transfusions.

A PRACTICAL EXAMPLE

The Apostle Paul encountered a situation at Corinth in which attitudes to food caused the consciences of weaker Christians to be marred by stronger Christians. In that pagan society, meat was offered to idols before being made available in the market place. The strong Christian found this no cause for concern as he knew "an idol is nothing" (1 Cor. 8:4). However, weaker brethren could not tolerate the situation, and their consciences became defiled. (verses 7,8).

Paul said the strong Christian may "eat anything sold in the meat market without raising questions of conscience" and he may eat with an unbeliever without raising questions. But when the conscience of a weaker Christian caused him to state the meat had been offered to an idol, the stronger Christian had to behave in "a manner that does not cause the weaker brother to stumble." (1 Cor. 10:25, NIV; see verses 24-33).

Thus even though eating or failing to eat makes the strong Christian no better or no worse, he must ensure "the exercise of (his) freedom does not become a stumbling block to the weak (Christian)." (verses 9,10, NIV; see also verses 12,13). In this way peace and unity are promoted.

ANOTHER EXAMPLE

Six years before Paul wrote these words to the Christians in the pagan society at Corinth, a similar situation was resolved by the leaders at Jerusalem.

At Corinth, the weak Christians of pagan origin found conflict in their consciences resulting from their pagan past. They still lived in that pagan world and were exposed to the freedom of conscience exercised by their stronger Christian brothers.

At the Council at Jerusalem the problem was, in principle, similar. The Jewish Christians also found conflict in their consciences resulting from their past. They were steeped in the Jewish traditions (during the early years Christians considered themselves part of the Jewish system) but they were now living in a community where the Christians with Gentile, pagan origins disregarded those Traditions.

The situation before the Jerusalem Council meeting was thus, in principle, similar to the situation at Corinth six years later.

Two issues were in dispute at Jerusalem:

- (i) Whether it was necessary for Gentile converts to be circumcised (see Galatians 2:1-10).
- (ii) The issues of social intercourse between Jewish and Gentile Christians (compare Galatians 2:11-14).

"The basic issue was whether non-Jewish converts had to keep all 'the Law of Moses'." (AWAKE!, May 8, 1976, page 26).

THE DECISION

The judgement of the Council comprised two parts:

- (i) Circumcision: James' decision was "not to trouble (the Gentiles) who are turning to God." (verse 19).

"On this primary issue the decision is definitely against the Judaizers." (The Interpreter's Bible, on Acts 15:6-29, page 198).

- (ii) Social Intercourse: The Gentile Christian must recognise "there are still Jews loyal to the Law of Moses whose consciences must be respected. Therefore the Gentiles too must be ready to make concessions." (ibid.)

CONCESSIONS

The decision by James asked for concessions from each group: each had to recognise the other's conscience. In this way the church of God would prosper. That was the objective of the judgement:

"If you carefully keep yourselves from these things, you will prosper." (Acts 15:29)

The Jewish Christians were "zealous for the law" - the writings of Moses. "From ancient times Moses" had been preached in city after city, Sabbath after Sabbath (Acts 21:20; 15:21). The Gentile Christians had to recognise their brothers' sensitivities and were to abstain from activities that would mar their fellow believers' relationships with God and with one another.

3: A Moral Principle

The Gentile Christians had concessions made to them; no longer was there a need for physical circumcision, as had been decreed in Moses. The Gentile Christians, in turn, also had to make concessions.

"The decision taken at the Council (at Acts 15) was a compromise. Gentile Christians are to be exempt from circumcision; but for the sake of Jews living among them they too must be prepared to make concessions and abstain from offensive practices, if Gentile and Jew are to enjoy full social intercourse together in a united church." (The Interpreter's Bible, page 204. See also Vocabulary of the Bible, J. von Allmen, page 39, article: "Blood").

A LOCAL APPLICATION

In its decision, the Council at Jerusalem addressed matters that were offensive to Jewish scruples, including "food which had been offered to idols, and the flesh of strangled animals which therefore still contained the blood." (The Interpreter's Bible, page 204). The matter of 'fornication' was added to the issues concerning unclean foods since this was "a sin to which former pagans were particularly prone." (ibid).

The local, specific nature of the Jerusalem Council's decision is shown by Paul's letter to the Corinthians, which he wrote six years after that decree. To the Corinthians he wrote

"Eat everything sold in the meat market without raising questions of conscience". (1 Cor. 10:25, NIV)

The Council at Jerusalem concerned itself with the problem of Gentile Christians behaving in a manner that would not cause offence to Jewish believers, thus maintaining harmony. In the situation at Corinth, and Paul was fully aware of the earlier decision, his instruction was to consider the problem (the source of the meat) only when it caused offence to the conscience of the weaker brother. Otherwise they were to eat "without raising matters of conscience." (1 Cor. 10:25,27)

The WTS attempts to make the decision of the Council at Jerusalem regarding 'blood' a universal rule governing all times and all conditions. This is not so; it was a local application of a principle for a specific situation.

A GRADUAL DEVELOPMENT

To the Jewish Christians at the centre of the dispute, the Mosaic Law was deeply embedded into their lives. They had listened to it every Sabbath, as had their forefathers throughout the centuries (Acts 15:21). For them, replacement of the Mosaic Law by the fullness of the glory of Jesus Christ was a gradual process, taking place over many years (2 Cor 3:12-18; Heb. 8:13).

As the Jewish Christians were weaned from the Law of Moses, the relevance of the specific decrees at Acts 15 declined and finally disappeared, leaving behind the principle that has been reapplied to suit succeeding circumstances. 1 Corinthians 10:24 sets forth this principle:

"Nobody should seek his own good, but the good of others." (NIV)

THE EARLY CHURCH

Further evidence that the decisions of Acts 15 were a local application of the principles of Christian Morality, as laid down in Romans 14, is given by the actions of the early church.

Although the best available Greek manuscripts give the four prohibitions as listed in our modern renderings of Acts 15, some early authorities do not. For example, various Western authorities omit 'what is strangled' "so that we have a three-clause decree which can be interpreted as a prohibition against three typical sins, idolatry, fornication, and murder ('blood')." (The Interpreter's Bible, page 203). The Western authority Tertullian, who is cited as an authority by the WTS on page 13 of its QB booklet, explicitly understands "blood" to mean "murder".

"(After a generation or two), the situation which called forth the Jerusalem Council and the apostolic letter of Acts xv. 23-29 disappeared, and the Western Text of Acts adapts the letter to a new situation by altering its requirements in a more purely ethical direction -- requiring abstention from idolatory, bloodshed, and fornication." (The New Bible Dictionary, edited by J. D. Douglas, page 264, article: 'Council of Jerusalem')

THE CHRISTIAN ERA

On pages 13 to 16 of its QB booklet, the WTS cites statements from Christians of various ages who have refused to eat blood. Apart from the leap required to equate eating with transfusion, any argument can be "proved" by the careful selection of quotations. No doubt for every Christian who held one view, another authority could be cited who held an opposite view.

For example, on page 15 of QB, the WTS quotes one authority as believing that Christians "should not eat anything unclean". This statement could be used to "show" that some Christians of the 11th and 12th centuries in Pomerania were part of a continuous chain who differentiated between "clean" and "unclean" meats. However, the WTS does not hold this position on "clean" and "unclean" foods, so it ignores the statement.

Any non-Scriptural statement can be used in whatever way one wants to. For example, the quotations in the QB booklet could be presented to show how misguided some people have been throughout the Christian era. In any case, the WTS teaches that the church fell into apostasy from its very earliest times. Statements from an apostatised church can hardly be promoted as authoritative.

THE LAW OF MOSES

The issue before the Council of Jerusalem concerned the relevance of "the custom of Moses" to Christians (Acts 15:1).

"The basic issue was whether non-Jewish converts had to keep all of 'the Law of Moses'." (Awake: May 8, 1976, page 26)

In the context of the Council, "Moses" means the teachings of the first five books of the Bible, commonly called the Pentateuch. In the Jewish division of Scripture, these five books constituted "the Law", "the Law of Moses", and so on. (See Luke 24:44; also Acts 21:20-21; Rom 10:4,5; 1 Cor. 9:8-9. Compare Acts 6:14 with 2 Cor. 3:13-15).

ACTS 15 AND THE LAW OF MOSES

When he made his decision, as recorded at Acts 15, James referred to "Moses" being preached from ancient times, where it had been "read aloud in the synagogues every Sabbath" (verse 21). The Council's decision concerning the Law of Moses was determined by the view that people are "saved through the undeserved kindness of the Lord Jesus".

Circumcision, the dominant issue before the Council, preceded the Law through Moses by centuries (Romans 4:10; Gal. 3:17) yet it is part of "the Law of Moses". Likewise with Noah: although he preceded Moses, the narratives and the instructions concerning blood are part of the "Law of Moses". There is no mention of "Noah" or of any "Law of Noah" before the Council.

Although circumcision was instituted upon Abraham well before the Law was given to Moses, the physical act is no longer obligatory. The meaning of circumcision must now be understood through the relationship of the believer and Jesus Christ -- even though Abraham is the Father of all believers. Likewise for the instructions given to Noah concerning blood: even though they preceded the giving of the Law to Moses, they are to be treated the same as all other instructions of the Law of Moses, such as the instructions concerning circumcision. Likewise, the meaning of the instructions must be interpreted through the eyes of the Christian dispensation.

THE WTS AND THE LAW

The WTS has a clear position concerning "the Law":

"After Jesus died, true worshipers were no longer obliged to keep the Mosaic Law." (QB, page 10)

Following this statement in QB, the WTS uses two examples from the Law to demonstrate its position. These examples come from Leviticus, showing that Leviticus is part of "the Law of Moses" that is not obligatory upon Christians:

"Dietary restrictions of the Law, such as those against eating fat or the flesh of certain animals, (are) no longer binding. Leviticus 7:25; 11:2-8." (QB, page 10)

In this statement, the WTS refers to verse 25 of Leviticus 7. This verse is reckoned by the WTS as irrelevant to Christians. If Leviticus 7:25 is a "dietary restriction of the Law" then the next verse, which also refers to eating, is also a "dietary restriction of the Law" that Christians are no longer obliged to keep. This next verse, verse 26 of Leviticus 7, is a prime WTS reference text concerning the eating of blood.

The WTS is thus saying the Law is not obligatory (QB, page 10) but parts of it are. (The reason for this may be the WTS's faulty interpretation of James' decision at the Council of Jerusalem). The WTS's position brings it to the point where one sentence (Leviticus 7:25) is a non-obligatory "dietary regulation" and the next sentence, almost part of the same breath and most certainly still speaking of eating, is not part of the Law's "dietary regulation". All this despite the WTS's assertion that Christians are not obliged to keep the Mosaic Law.

There is no reason for stating that the instructions concerning fat and blood are to be treated separately.

"The eating of fat and of blood are prohibited in the same terms and indeed sometimes in the same expression: 'You must not eat any fat or any blood' (Lv. 3:17)." (The Atonement, Leon Morris, page 60)

If the Law of Moses is no longer binding upon Christians, it is wrong for the WTS to cite reference after reference from the Law for justification of its stance. Yet this is what the WTS does: pages 8 and 9 of the QB booklet cites Leviticus (10 verses), Numbers (2 verses), and Deuteronomy (3 verses). The WTS's interpretations appear to be determined by its preconceived conclusions. A dangerous and unsatisfactory "method" of reading God's Word.

THE PURPOSE OF KILLING

In the Israelite economy, the killing of beasts had a two-fold aspect: slaughter for food and atonement for sins. God originally gave humankind a vegetarian diet, but following the Flood he permitted Mankind to slaughter beasts, to eat their flesh. When our First Parents sinned, God instituted the sacrificial system that demanded men take the life of beasts for the purpose of Atonement.

In spite of these permissions to take animal life, never has there been permission to take human life, apart from retribution for murder. Certainly man has never been permitted to use human life in the manner that he was to use animal life. When Abel was killed, his blood called out to God.

Following the Flood, God reiterated the sacredness of human life: although man could take the life of beasts, indeed was ordered to ensure life had completely ebbed from the flesh, he was not permitted to take the life of humans. (Genesis 9:4-6)

NO EXTENSION TO HUMAN

This distinction between animal life and human life exists because man is made in the Image of God. To touch human life is to violate the Image of God.

"Anyone shedding man's blood, by man will his own blood be shed, for in God's image he made man." (Genesis 9:6)

The rules concerning animals may not be extended to humans because humankind is not an extension of the animal kingdom. To apply regulations to mankind that apply to animals is to debase man. The relationship between humankind and animals is one of "fear" and "terror" (Genesis 9:2). There is no bridge from the animal kingdom to the human plane.

If the laws pertaining to animal blood were extended to human blood, this would give permission to take human life, give instruction to bleed a human to death and to pour his blood upon the ground or upon the altar. The laws concerning animal blood may not be extended to human blood. A different set of rules applies. Because man is different, because he is in the Image of God, the laws pertaining to animals do not apply to him.

It is not a question of human blood being worth more than animal blood since in the sacrificial system of the Law, human blood was of no value. Neither was there any value in or consideration of human blood being drained, since human flesh was not to be eaten.

The Law described how to dispose of the blood drained from an animal. These regulations were necessary because animal life could be taken and because blood played a significant role in the sacrificial system. Clearly these regulations do not extend to humans. Since there is no permission to take human life, there is no need to give instructions regarding the handling of human blood. That is why no such instructions appear in Scripture.

In a blood transfusion, life is not being taken, life is not being sacrificed in death, and flesh is not being prepared for consumption. The instructions of Genesis 9:4 do not apply in a blood transfusion and the prohibitions of Genesis 9:6 regarding the sanctity of human life are not transgressed. The intent of a blood transfusion is the preservation of human life.

A blood transfusion is a process of tissue transfer, a process which is not objected to in principle by the WTS, as the Society permits organ transplants and inoculations, and permits the use of some components of blood.

NOAHIC MORALITY

All life belongs to God. It is only by divine permission that the life of animals may be taken. When taking the animal's life, man was to demonstrate God's ownership of life by not eating the blood, since the life of the flesh resided in the blood.

"Not only human life but animal life was equally recognised as God's. It could, therefore, only be taken by Divine permission; and when it was taken God's ownership of the life that had been taken had to be solemnly acknowledged. So, before their flesh could be rightly eaten, animals had to be slain before the Lord as unto Him; and their blood, which represented the life that had been taken, had to be either poured out on the altar, or poured out to God on the ground and reverently covered." (The Meaning of the Word 'Blood' in Scripture, A.M. Stibbs, page 13)

Life is sacred, God's possession. Man was to indicate his recognition of God's permission to take animal life by not eating that which had animated the flesh – the animal's blood.

"When man slaughters and kills, he is to know that he is touching something, which, because it is life, is in a special manner God's property;

and as a sign of this he is to keep his hands off the blood." (Genesis, von Rad, page 128)

The morality taught through Noah is that Man is to recognise God's ownership of Life. As Life is God's property it is sacred, but Man is permitted to take it, provided it is animal life. Respect for life does not mean it may not be taken, but to indicate God's permission to take animal life, Man was not to eat that which had animated the flesh - the animal's blood.

Respect for human life, however, means its sustenance and protection (Gen 9:6). Human life may not be taken, but it may be given. Since Man is in God's image, he exhibits characteristics such as Will, Integrity, Moral Judgement and the like, and he may be prepared to give his life rather than violate principle.

For this reason, people give their blood. This giving takes different forms, such as the martyr's stake, giving blood as a donor and giving the Word of God to others. Donating blood exhibits preparedness to give that another may live. It exhibits a preparedness to stand for the principle that life is sacred, that "greater love hath no man than this, that he lay down his life for another".

TRANSFUSIONS AND NOAHIC MORALITY

Noahic Morality concerns itself with the recognition of God's ownership of life and through that recognition, respect for life. Respect for life does not mean life cannot be taken; indeed life had to be taken for the purpose of atonement and it had to be taken before flesh may be eaten.

But the sacredness of human life stands apart in its application of the principle: "respect for life". The laws pertaining to animal life do not extend to human life, for with human life there is no permission to kill, there are no instructions concerning the manner of the handling or the disposal of human blood, no applicability for the purpose of atonement, no permission to eat human flesh.

In a blood transfusion human life is being saved; in the Noahic injunction concerning animal life, it is being taken. In a blood transfusion the donor's life is not being taken; there is no requirement for death to occur. Since the donated blood does not indicate life has been taken, it does not symbolise death, whereas in Scripture the presence of the fluid does indicate death has occurred. The symbolism of 'blood' in Scripture finds no fulfillment in the blood of a blood transfusion. In a blood transfusion the flesh of the donor is not being prepared for eating, but in the Noahic instruction the blood is drained to make the flesh suitable for eating.

The sacredness of life did not mean life could not be taken, provided it was animal life. The sacredness of human life stands as a principle on its own, not because of rules governing the animal kingdom. The Ten Commandments, the constitution of the Jewish economy, gave the principle "Thou shalt not kill"; blood transfusions are intended to support that preservation of human life.

MOSAIC MORALITY: LEVITICUS 17

Leviticus 17 draws together the Mosaic teaching and morality on blood. It reveals that, in the light of their teachings, the Jews were governed by pragmatic regulations.

The blood was to "make atonement" when it was applied to the altar in the Sanctuary (Lev. 17:11). The New Testament retains the Levitical principle.

"The law requires that nearly everything be cleansed with blood, and without the shedding of blood there is no forgiveness." (Heb. 9:22, NIV)

Christians recognise the symbolism that points forward to the worth of the death and resurrection of their Lord and Saviour Jesus Christ.

Because of its sacral role in the Mosaic system, blood had to be respected. Since blood was encountered in everyday life, from slaughter for food to menstruation, rules were enforced that

emphasised its sacred role. The rules were designed to prevent everyday contact with blood dulling the believer's sensitivities to its message given in the Sanctuary services.

Following the Introduction, Leviticus 17 is arranged as four paragraphs: these commence at verses 3, 8, 10, and 13. The format of each of these paragraphs is similar. After similar openings, each paragraph presents the definition of the sin (verses 3-4, 8-9, 10, 13-14), prescribes the punishment (verses 4, 9, 10, 14) and generally closes with an additional reason for obedience (verses 5-7, 11-12, 14).

The Levitical Chapter concentrates on mistakes laymen are apt to make, and teaches:

- * Domestic animals must not be killed away from the Tabernacle (verses 3-7)
- * No sacrifices outside the Tabernacle (verses 8-9)
- * No blood to be eaten (verses 10-12),
- * Rules about hunting game animals (verses 13-16).

LEVITICUS 17, Paragraph #1

Verses 3-7 ban the killing of the main domestic sacrificial animals except in the Tabernacle.

The punishment against this offence is given in verse 4 of Leviticus 17 as "cut off" (compare verses 9, 10 and 14). The expression "cut off" is generally understood to mean to be punished directly by God. The offender has shed blood and consequently will be punished directly by God.

"This offence is as serious as murder." (Journal of Biblical Literature, vol. 90, 1971, page 154)

"It is unlikely that judicial execution (at the hand of man) is intended (by 'cut off'), because many of the crimes to which this penalty is attached are secret sins which would be difficult to prosecute in the court (eg. Exodus 30:38; Lev. 7:20-21; Num. 15:30-31). Moreover, God sometimes threatens to cut people off himself. Such a threat would be unnecessary if capital punishment were mandatory (17:10)

"It appears, therefore, that this phrase ('cut off') may not only refer to premature death at the hand of God, but hint at judgement in the life to come." (The Book of Leviticus, Gordon J. Wenham, pages 203, 241-242)

This regulation concerning the killing of domestic animals -- sacrificial beasts -- was intended to counter sacrifices to the "goat-shaped demons" (verse 7). This law was designed to prevent an excuse by the slaughterer that he was merely killing an animal outside the camp.

In the wilderness, no secular slaughter was permitted. But when the people developed from a nomadic group to a settled nation, the circumstances altered and the slaughter of beasts for food no longer required direct involvement with the Tabernacle.

The word 'Deuteronomy' means "the second giving of the Law". It introduced changes to the Law to accommodate the nation's changed circumstance, and the changes show the Law was practical. Jesus echoed this pragmatic attitude centuries later when he said the Sabbath had been made "for man" not the reverse.

LEVITICUS 17, Paragraph #2

The Jew, in offering his atoning sacrifice, had to do so intimately with the Sanctuary, its altar, its priests and its services. If this had not been laid down, false sacrifices and demonology may have arisen, sectarianism may have resulted and the people would have failed to pay their dues to the priests. The "alien resident" (verse 8) was bound by this rule also.

LEVITICUS 17, Paragraph #3

Verse 10 commences the third paragraph of Leviticus 17, which continues to verse 12. The paragraph deals with the prohibition on the eating of blood. The rule traces back to Noah (Genesis 9:4); it is also stated in Lev. 7, Deut. 12:15 and in 1 Sam. 14:32ff. It applies to the alien resident also (verses 10,12). The guilty party is "cut off".

"Evidently it was a religious rule of the first importance. Yet its precise significance is elusive. Two explanations are offered for the prohibition ... By refraining from eating flesh with blood in it, man is honouring life. To eat blood is to despise life ... Thus one purpose of this law is the inculcation of respect for all life. A second reason for the ban is given in v.11. 'I have given it to you on the altar to make atonement for your lives' ... Because animal blood atones for human sin in this way, it is sacred and ought not to be consumed by man." (Wenham, pages 244-245)

The first reason concerned the aspect of slaughter. The second reason, given in verse 11, concerned the role of blood in atonement. Neither aspect bears upon human blood or upon the role of blood in a blood transfusion, since there is neither slaughter nor atonement. Human flesh is not eaten in a transfusion, it is not the purpose of a transfusion to prepare it for eating and the human blood taken in a transfusion is worthless for purpose of atonement.

LEVITICUS 17, Paragraph #4

The fourth paragraph of Leviticus 17 (verses 13 to 16) deals with the killing of edible game, such as the gazelle, roebuck or hart. In such a case, the hunter could not be expected to chase his prey into the Tabernacle before slaughtering it. Such beasts were not offered in sacrifice and it did not matter where they were killed.

However, the rule regarding the eating of the blood was still strictly enjoined (verses 13, 14). Since an animal that died naturally or from an attack by another beast would not have been properly bled, if a man ate from it he would become unclean. He would have to wash himself and change his clothes "to rid himself of potential impurity (verses 15,16)", (Op. cit., page 246). Contact with the carcass of an animal which dies of itself is polluting in itself (see Lev. 11:39-40).

In Deuteronomy (12:15-16, 22ff), the rule is altered to permit the sojourner in the land of Israel to eat beasts found dead and hence were unbled.

Just as the hunter was not expected to chase his quarry into the Tabernacle before killing it, so it was for the fisherman. The Law made no regulation concerning any need for the fisherman to take his catch to the Tabernacle before killing it, nor was there any need to bleed the fish, either at the Tabernacle or when he landed them. The Encyclopaedia of Jewish Religion states:

"The blood of fish does not: come under this prohibition ... The blood of ('clean') fish is permitted". (pages 73, 116)

Jesus ate strangled, unbled fish. The red cells of fishes, unlike ours, have a nucleus. Certain fishes living in Antarctic seas have no need for haemoglobin, as the water is so cold. (Refer to More Insight On Blood, Dr Earle Hackett, pages 31-32).

LEVITICUS 17 NOT UNIVERSAL

The expression "any sort of blood" in Leviticus, 17:10,14 is thus limited by the context to beasts "sacrificed upon the altar" (verse 11). The expression does not extend to 'clean' fish and is never extended to non-edibles, let alone humans. Man is treated separately and distinctly as he is in the "image of God".

Leviticus 17 speaks of the worth of the death the blood represents, and in the sacrificial system human blood was worthless. (Jesus' blood stands infinitely apart from that of mere mortal man. He is unique, being without the taint of or propensity to Sin - Hebrews 4:15).

Leviticus 17 is not universal. It does not cover the full range of edible beasts or fish and does not encompass human life or human blood. The Jews recognised no 'universal Covenant'. Not only were Gentiles permitted to sell unbled flesh but the Jews were permitted to sell such flesh to the Gentiles for food (Deut. 14:21). Jehovah's Witnesses recognise this principle and are permitted to sell blood-products to non-Witnesses (see Watchtower of 15 November, 1964).

DEUTERONOMY

Deuteronomy, literally "second law", marks the transition of the people of God from their nomadic wanderings as a tribal community to a settled nation. It reflects the need for the Law to be reaffirmed yet modified to accommodate the altered conditions. For example, it was no longer practical or reasonable for beasts to be brought to the Tabernacle for slaughtering for food, and this command was dropped.

The sacral significance of blood remained but the applications were altered. It still was not permissible for the Israelite to partake of unbled flesh but the sojourner in the land now had to consume it and the Jew was instructed to sell it (Deut. 14:21). Any universal non-cultic application of Genesis 9:4 seen by the WTS was not so interpreted by those who penned and edited the words of Genesis and Deuteronomy.

The WTS recognises non-JW's may have blood transfusions and Witness doctors have administered transfusions with the WTS's approval (Watchtower December 15, 1964, page 682). This is recognition by the WTS that the non-Jew may partake of blood. Hence the WTS is unjust in accusing non-JW's of "blood-guilt" before God, as it repeatedly does.

MOSAIC MORALITY AND BLOOD TRANSFUSION

Any application of Moses' morality concerning blood to the modern medical practice of Blood Transfusion must be determined in the light of:

1. The intrusion of Jesus into history
2. The teachings and practice of the NT church
3. Whether the modern medical practice falls within the compass of Mosaic morality
4. Whether Blood Transfusions fall within the ambit of "eating".

1. The intrusion of Jesus into history

For the Christian, Jesus is pivotal. His appearance on the world scene, and in particular his intrusion into Jewish history, and the ramifications of his life, his teachings and his antitypical sacrifice, affect the Christian's understanding of every other matter.

Jesus taught that it is not what enters a man's mouth that defiles, but what comes out of it. The blood in the Tabernacle took on new meaning through Jesus' death upon Calvary, and was totally supplanted by it. The new law must not be appended to the old Law, like putting new wine in old skins. It now commands men to drink Jesus' blood -- to partake of the benefits of his death -- and to eat his flesh:

"Jesus said unto them: 'Most truly I say unto you, unless you eat the flesh of the Son of Man and drink his blood, you have no life in yourselves. He that feeds on my flesh and drinks my blood has everlasting life, and I shall resurrect him at the last day; for my flesh is true food, and my blood is true drink.'" (John 6:53-55 emphases supplied)

2. The teachings and practice of the NT church

As we have seen, Christian behaviour is governed by consideration for the effects one's behaviour may have upon the sensitivities of others. For this reason, the Gentile Christians at Antioch had to respect the deeply ingrained sensitivities of their Jewish Christian brethren regarding the eating of

meat, whereas six years later Paul advised the Gentile church at Corinth there was no need to concern themselves with those matters unless someone else's conscience was being affected thereby.

3. Whether medical practice falls within Mosaic morality

This factor must be considered only after the teachings of Jesus Christ and his teachings through the NT church have been studied. Mosaic morality must be seen through the morality of the antitype. The Christian recognises the Reality has been found in the death and resurrection of his "Lord and Saviour Jesus Christ" (2 Peter 1:11). For the Christian, there is no hope without the forgiveness obtained through the atoning worth of the blood -- the death -- of Jesus.

As Leviticus 17 shows, the over-riding concern of Moses is to preserve the sacral significance of blood, where its appointed role is to atone for sinful lives. Just as every Christian belief emanates from and is based upon the death and resurrection of Jesus Christ, so for the Jewish system. The Tabernacle was central and it, in turn, depended upon the meaning of the sacrificial substitute, whose blood was splashed upon the altar.

In a blood transfusion there is no relevance to atonement. Jesus Christ has fully and totally satisfied the divine command -- it cannot be added to. In a blood transfusion there is no death involved nor is one required. Indeed, the intent of a transfusion is to preserve life.

As with Noah, Moses' regulations concerning the handling of blood refer to animal blood. Animal life was permitted to be taken. The context is of the permission to take life. In fact, the consumer had to ensure the flesh was absolutely lifeless.

The Mosaic regulations referring to animal blood cannot be extended to the medical process of treating human life. None of the regulations concerning the proper disposal of animal blood (which indicated death had occurred) bears upon human life, either at the time of Moses or today. Those laws pertain to the permission, even command, to take life -- animal life -- with the enjoinder that human life was inviolate.

Moses' attitudes to human life pertain to its preservation (Note 'Thou shalt not kill' of Exodus 20) and are supported by the modern medical process. Blood Transfusions maintain the moral principle of the integrity of human life.

The principle of preserving human life through the transferring of substances from one person to another is not condemned by the WTS. It permits the transplanting of bodily parts (Watchtower March 15, 1980, page 31; Awake! June 22, 1982, page 26). The WTS draws the line at blood but its reasoning is faulty since the Law of Moses at Genesis, Leviticus and Deuteronomy is speaking of animal blood, of the permission to kill, of a symbol of death, of the atoning worth of the blood, and of a system completely supplanted by the person Jesus Christ.

4. Whether Blood Transfusions Fall Within the Ambit of "Eating"

In its QB and BM (Blood, Medicine and the Law of God) booklets, the WTS clearly puts its position that the Mosaic dietary rules have no bearing upon Christians, and that a transfusion is a form of "eating" of blood:

"After Jesus died, true worshipers were no longer obliged to keep the Mosaic law. Dietary restrictions of the Law, such as those against eating of fat or the flesh of certain animals, were no longer binding." (QB page 10)

"Nothing is there stated that would justify making a distinction between taking blood into the mouth and taking it into the blood vessels. And, really, is there in principle any basic difference?" (QB pages 17-18; see also BM page 14, Awake! January 22, 1958)

Hence the WTS has to differentiate between the Mosaic dietary rules on the eating of foods and the rules on the eating of blood, even when the two are being considered in the same context, effectively the same breath (Leviticus 7:25,26).

A TRANSFUSION IS DIFFERENT FROM EATING

"Transfusion" and "Eating" are biologically different processes. The Mosaic prohibition refers to the eating of blood but physiologically the infusion of material into the bloodstream invokes a completely different system.

"(In eating,) the food is . . . entirely broken up and converted into a form in which it can be absorbed into the body . . . The process is entirely destructive as regards the food itself. The useful parts of the food are converted ... This process is called metabolism.

"On the other hand the process of blood transfusion consists of the introduction into the circulation of an additional quantity of ready-formed blood. The transfused blood mixes with that of the patient and supplements it, without being in any way altered itself." (God, Blood and Society A.D. Farr, page 70)

"(Transfusion) is, in effect, a sort of tissue graft." (op. cit., page 72)

The WTS reasons

"Doctors know that a person can be fed through the mouth or intravenously." (QB page 18)

In normal feeding, the material is absorbed into the circulation through the alimentary tract. When a patient is fed intravenously, "the fluids introduced into the circulation are absorbed through the walls of the blood vessels" (Farr, page 72). A Blood Transfusion is a transfer of existent blood directly into a recipient's bloodstream, and is hence different from eating or intravenous feeding.

It is fallacious to argue the two are identical since fluids are introduced in intravenous feeding and in a blood transfusion. A few similarities do not prove they are identical; one cannot rightly argue that a cat and a dog are completely identical because both have four legs.

Some products that cannot be taken by mouth may be given intravenously. It is sometimes the only effective means of giving medical treatment. Frequently, antibiotics given orally produce intolerance, whereas no such reaction occurs when they are given intravenously. Insulin cannot be taken by mouth as it is broken down in the stomach; it is only useable intravenously.

The BM booklet (page 14) refers to Denys, a transfusionist of the middle 1600's, to support its view that a transfusion only bypasses the eating process. The limited knowledge of the Frenchman is shown in that he worked only 40 years after Harvey's discovery of blood circulation was published.

FOOD MAY NOT BE PLACED DIRECTLY INTO THE BLOODSTREAM

In the body, blood is not created by food. The components of blood are manufactured within the body, in special bone marrow. The composite fluid is used to transport nutrition and energy to cells, and to transport waste for excretion.

Placing a puree of food directly into the bloodstream, supposedly bypassing the digestive processing system, can be fatal. Those unfortunates who inject even conventional foods such as milk or sandwich spreads directly into their bloodstreams suffer irreparable brain damage or an excruciating death.

When blood is transfused, the blood types of the donor and the recipient must be carefully cross-matched, with dire consequences when they are not. This care is not required when blood is drunk. Animal blood is consumed in a reasonable quantity whenever meat is eaten, and the consequences are not immediately fatal. Yet were this same animal blood given intravenously, it would likely prove fatal.

Thus blood is not created by food; a transfusion is not simply a bypassing of the digestive processes, and drinking animal blood is not fatal whereas the transfusion of animal's blood most likely would be fatal. Transfusion and eating are quite different processes.

DRINKING BLOOD MAY BE DETRIMENTAL

Drinking blood is of little benefit, and may even prove detrimental. The delicate walls of the eaten corpuscles are ruptured and any value destroyed, noxious products are created, and the partaker may become quite ill. Yet that same person may have his life prolonged were that very same blood injected directly into his bloodstream.

If the drinking of blood directly affected the consumer's blood volume, this would be a far simpler and easier method of providing blood than the present medical process.

WTS ADMITS VACCINATIONS ARE NOT "FEEDING"

When speaking of vaccinations, the WTS declares the injection of blood products into the body is not necessarily a nourishing of the body, a direct feeding on blood or the use of blood as food:

"Serums are prepared from blood . . . However, since they do not involve the using of blood as a food to nourish the body . . . their use is a matter that be decided by each person according to his conscience". (Awake! August 22, 1965)

This statement shows that the process of injecting material into the blood stream is not a bypassing of the digestive process. Material, even products prepared from blood, such as serums, may be infused into the blood stream yet the body is not "nourished" thereby.

This passage does not explain how to determine when injected blood is being used "as a food to nourish the body" and when it is not. Which components of blood may be used before this command is breached? Is the body nourished only when packed red corpuscles are employed or does the blood have to be whole? Why are serums and Factor 8 for haemophiliacs acceptable to the WTS?

Actually, whole blood is rarely used. Better use is made of the product when blood is separated into its components. And the recipient's body is better able to use the offering when the specific deficiency is directly catered for.

Besides, blood is not given as nourishment but to compensate for defective blood or to counter fluid or blood volume loss. Hence the experiments with artificial volume expanders. Donated blood is taken from the veins, not the arteries, and contains little if any nutrition, and carries much waste material.

OT MORALITY AND BLOOD TRANSFUSIONS

There is a clear dichotomy in Scripture between the handling of animal life and blood and the handling of human life and blood. Both animal life and human life are owned by God, and this must be recognised and respected. However, the implications for each are different.

In terms of animal life, the owner of that life -- God -- has given permission for it to be taken to enable the flesh to be used as food. He instructed that life had to be totally removed from the flesh to make it fit for consumption as food. Blood was thus a symbol of death.

In terms of human life, since man is in the Image of God, it is inviolate. This principle is enshrined in the Ten Commandments and given greater meaning by Jesus at the Sermon on the Mount. In a blood transfusion the Biblical principle of preserving human life is upheld.

The Jews, who are scrupulously meticulous in their application of Scripture and do not have the advantage of the teachings of Jesus or of the NT, find no conflict between Scripture (our OT) and blood transfusion, and fully support it.

SCRIPTURAL MORALITY

Thus far this Chapter has canvassed the morality of blood in the light of the intrusion of Jesus Christ into the affairs of men. Since Christianity is a personal relationship between the Christian and his God, the Christian's behaviour is determined by personal conviction. (Behaviour is controlled by an existent relationship; it is not the means of obtaining one).

For this reason, the Christian is to ensure his behaviour does not undermine another's personal convictions. This is exemplified by Paul in his instructions to the Corinthian Christians, who lived in a Gentile environment, and by James in his decisions to those in active communion with the Jewish Christians who looked to Jerusalem for guidance. In each case the weak conscience of another had to be taken into consideration.

After looking at the matter of blood from the Christian perspective and at the teachings of Jesus Christ and of the NT church, and having addressed the OT, particularly the Mosaic and Noahic attitudes and teachings, it is clear the morality attached to the modern medical process of blood transfusion does not breach the morality attached to blood by the Word of God.

CHRISTIAN PERSPECTIVE OF LIFE

Daily, each individual makes decisions that are determined by personal conviction. Considered separately, these decisions may be quite small, but they represent that person's perceptions of himself, his values, his relationships, his perspectives. A Christian's beliefs determine what he is prepared to read, how he speaks, where he goes, what he wears.

Rarely are these decisions a matter of life and death, but the occasion could arise where a belief is so strongly held it could lead to that situation. People hold views on the value of life, manifesting them in life-or-death moral issues such as in-vitro fertilisation, abortion, suffering, capital punishment or euthanasia. The Christian's perspective of this life in terms of the Eternal Life influences his attitudes towards this life, including its termination.

"If in this life only we have hoped in Christ, we are of all men most to be pitied." (1 Cor. 15:19 NIV)

In the Christian perspective of Life, the termination of this present existence is not the end but marks an interval until that glorious existence based on the worth of Jesus Christ's all-sufficient sacrifice.

Respecting adherence to principle, Christians cannot condemn the JW's preparedness to die rather than transgress his beliefs. With his principle of placing greater significance upon the eternal point of view, the JW is consistent with the Christian attitude; each is prepared to die rather than compromise.

MARTYRDOM

One of the paradoxes of the Christian faith is that to receive the gift of life a person must be prepared to lose his life. Self must be subjugated to his Lord's demands, even to the supreme test. Christians respect in awe those who have testified to their faith with their blood. The blood spilled by the Roman lions and by the Inquisitors has firmed the resolve of Christians throughout the ages.

Stephen lost his life for his testimony to his Lord. Paul declared himself a prisoner for the sake of Jesus Christ (Philippians 1:9). Jesus clearly taught this

"He that finds his soul (life) will lose it, and he that loses his life for my sake will find it." (Matthew 10:39. See also Matt. 16:25; Luke 9:25; John 12:25)

The death must be "for Jesus' sake". Sadly, not all martyrs died for the right reasons. As with everything that is genuine, there is the false. If the testimony of the spilt blood is not "for his sake", it is a sham.

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Jesus asks for allegiance and witness to his Name. He does not ask for witness to a cause or a group, or testimony for a doctrine. The Christian who dies faithfully does so for that Person. It is testimony to the personal, intimate relationship that he enjoys with his Lord Jesus. Doctrines can never save, only Jesus' death can save, and has.

The JW's stance on blood transfusion does not fall within the Scriptural ambit of a witness "for Jesus' sake". It is a stance for a teaching, a doctrine imposed by a body of men and, as such, the stance is an expression of allegiance to a set of beliefs imposed externally, imposed compulsorily, not necessarily a stance demonstrating the individual's genuinely held personal conviction. Does the WTS permit individual rights and freedom of conscience or does it claim to be the mouthpiece for God in these days? Sadly, the latter is the case.

Scripture does not ask for life to be placed needlessly at risk. David ate the shewbread when he was hungry. Although it was not lawful for David to do this, Jesus upheld his actions in example of this principle. Life is a talent the Christian is to invest for the service of the Lord it belongs to.

CONTEMPORARY CHRISTIAN MORALITY

The proper attitude for a Christian to take in respect of a JW's stance on blood is most complex, virtually a paradox, and consists of a composite of factors under spiritual, legal, medical, moral and ethical considerations.

This paradox is further compounded by the Christian's knowledge that the WTS uses false witness to enforce its views, and that it does not allow its members the very freedom of individual choice it asks non-Witnesses to exhibit.

CONTEMPORARY CHRISTIAN ATTITUDES: MEDICAL ISSUES

Any medical process is an intrusion -- an attack -- and it is any person's right to refuse the treatment offered.

Jehovah's Witnesses are not alone in finding moral objections to a medical process. The Roman Catholic, for example, objects on moral grounds to medically induced abortions and to surgical methods of birth control. Charismatics resort to treatments that are unconventional in the view of modern medical practice. They cannot complain when a JW also refuses a conventional medical process.

However, the WTS's position is weak. It cannot rightly complain about the degree of "attack", the principle involved or the use of blood. The WTS accepts the "degree" of attack sustained in a blood transfusion since it permits, as a matter of principle, the infusion of fluid into JW's veins. The WTS accepts the principle of injecting material directly into the blood stream. The nature or composition of the fluid used is irrelevant. In addition, based on its "religious understanding", the WTS permits the injection of blood components into the body:

"Witnesses' religious understanding does not absolutely prohibit the use of (blood) components such as albumin, immune globulins, and hemophiliac preparations." (Awake! June 22, 1982, page 25)

Blood is more often used in its component parts, to make the process more effective and to make more efficient use of the available material. For example, red cells are used after chemotherapy, albumin for burns or shock, gamma-globulins are used in the production of prophylaxis against several deadly infections and diseases, coagulant factors such as platelet concentrates and cryoprecipitate are used in dealing with haemophilia, and so on.

The passage in the Awake! of June 22, 1982 (quoted above) refers to the "Witnesses' religious understanding" and to the acceptance of "hemophiliac preparations" by the WTS. Presumably their "religious understanding" is that the blood must not be used to "sustain" the recipient. But those blood components that are permitted by the WTS do "sustain" the recipient. Alternatively, it can

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rightly be argued that components such as plasma or red corpuscles are not "foods", and that the donated blood, being taken from the vein rather than the artery, has no nutritional value.

"Hemophiliac preparations" such as Cryoprecipitate or Factor 8 are produced from the plasma the WTS rejects. It is this very treatment, which the WTS permits, that has been the major source of AIDS in Blood Transfusions.

If "hemophiliac preparations" are acceptable to the WTS, on what grounds can treatments such as the use of platelets be rejected? Each is used to treat medical conditions: platelets are used for patients who bruise easily and suffer internal bleeding, while hemophiliac preparations are used to treat patients suffering with blood clotting problems. Where can the WTS draw the line, in that it permits some use of donated blood? Why are some components "acceptable" yet others are not? Where is the principle that is involved? In accepting products from blood donors, is not the WTS condoning the actions of those donors?

The WTS does not object to the removal of blood. It permits blood to be given for the purpose of blood tests. It does not object to the storage of blood, since this must occur for such testing to occur. Blood is also stored in heart-lung machines for heart operations, and the WTS does not object to the use of those machines.

It cannot be rightly argued by the WTS that only a small amount of blood is taken, or that a small amount is stored, or that a small amount is used, or that it is stored for only a small time. It is a question of principle, not amount. At what amount of blood or after what time of storage would the WTS draw the line -- and where is the scriptural basis for any answer?

Since a Witness may give blood for a blood test, may he not give it for a Transfusion to be used by others whose consciences are not troubled thereby? Only the amount used is different, as in each case the recipient makes use of the product, and in the case of the Blood Test, uses it for financial gain.

CONTEMPORARY CHRISTIAN ATTITUDES: LEGAL

The purely legal aspects of Blood Transfusion are well covered in A.D. Farr's book God, Blood and Society, and study of that material is recommended.

Whether it likes it or not, the WTS exists in a secular community. Sometimes the WTS agrees with that community's views, at other times it does not. Caesar and God are separate, but in practical life their paths cross. Each holds different perspectives, a different set of values. It is a recipe for conflict.

Secular society's set of values is concerned solely with this existence. This is as it should be. Secular society does not have the right to legislate in the areas of belief, conscience, or religious values. (It should accommodate for the range of convictions held by its members). When it sees the existence of one of its members under threat, secular society takes action. This can be the recipe for conflict. Whether secular legal opinion supports the WTS or not is irrelevant, since in religious matters the only basis for determining right action is that personal relationship between the Christian and his God.

The issue becomes more clouded when the life of a child is involved. Apart from the emotion created, the issue of responsibility must be considered.

- Can a line be drawn between the permitted death of a child through neglect of medical processes by a JW parent and that caused through neglect by an atheistic parent?
- Is motive the mitigating factor? (Whether the child was going to die anyway is irrelevant, since it is the principle that is of concern).
- Can the parent be held blameless because he was concerned for the perceived eternal welfare of his child?
- Is secular society correct claiming the parent acted irresponsibly?

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- Does a Jehovah's Witness parent act selfishly in dying rather than accept a Transfusion and live, which would allow his child to be brought up in the ways of uprightness?

There are no simple answers (apart from the over-simplistic statements from the WTS). This shows the responsibility that lies at the WTS's door.

The WTS asks secular society to permit its followers freedom to exercise their consciences, yet it does not permit its own followers this basic right. This religious Society does not exhibit the morality it asks of secular society. Yet it condemns non-Witnesses when they exercise their own consciences in accepting a blood transfusion.

Since the WTS does not allow individuality, it does not permit true personal conviction. If a JW is not exercising his conscience, the formulators of the anti-blood-transfusion edict are collectively responsible for the outcome, in this life and in the life to come.

Only when the individual JW truly and willingly holds these views is the WTS relieved of any responsibility for the consequences of that JW's actions. It is not valid to pass the blame on to Scripture, as the WTS does, since it is a matter of how the Scriptures are interpreted by the WTS.

If the JW has a right to individual belief and to the exercise of that right, the WTS cannot rightfully complain when society, and the Christians who are part of it, claim their rights and express those rights by accepting transfusions. If there is a right to refuse on conscientious grounds, there is a right to accept on conscientious grounds, and the WTS has no right to set itself up as Judge, Jury, and Hangman on the charge against non-JW's violating the WTS's perception of some "God-given law".

The WTS, however, does not allow anyone -- Witness or non-Witness -- the right to exercise his own conscience, to the point where the JW has to deny his conscience on the grounds of maintaining a "clean organisation". The JW thus has to bow to the demands of other men. What is the legal responsibility of the Organisation and of those formulating its policies? What is their moral and spiritual responsibility - particularly when they use several forms of false witness to perpetrate their errors!

For the Christian member of society, the determinant legal opinion comes from Scripture as revealed to him by the Holy Spirit. In the OT, the punishment was not invariably death. In the NT, the determinant for behaviour is no longer any legal letter of the Law, but comes from genuine consideration for the views and sensitivities of others.

CHAPTER 4: MORALITY IN ACTION

"Jesus' teachings emphasized purity of heart, singleness of outlook and intent, freedom from hypocrisy -- all these being qualities that characterize integrity. The apostle Paul showed the same concern as had David and earlier servants of God for proving blameless and faultless in his ministry, free from any charge of corruption or deviousness in his dealings with others." (Aid to Bible Understanding, page 838, art. "Integrity")

"We can recognize a religion by the kind of people it produces . . . It should produce persons who are honest, who stand out among others because they do what is right. Is that not what you would expect of a religion that truly draws one close to God? God looks for these things too, and they determine whether a religion is approved of God or not". (The Truth That Leads To Eternal Life, page 15)

"The Catholic Church occupies a very significant position in the world and claims to be the way of salvation for hundreds of millions of people. Any organization that assumes that position should be willing to submit to scrutiny and criticism." (Awake! August 22, 1984, page 28)

"A necessary part of life is that we make decisions and reach judgments. But decisions reached 'without due examination' or judgments reached 'on other grounds than reason or justice' are evidences of a closed mind.

"Having an open mind, on the other hand, means to be receptive to new information and ideas. It means being willing to evaluate information without a biased attitude . . . A closed mind may indicate lack of knowledge . . . An open mind can serve to your advantage." (Awake! November 22, 1984, pages 3, 4)

Whatever the reason, whatever the purpose, when a writer quotes another person, he must be true to the intent, the message and the words of that person.

If a journalist, in preparing an item or an article, makes an error in fact, the proprietor of that newspaper or journal is held responsible. He, in turn, may be exonerated if that error is demonstrated to be an isolated incident. If, however, the proprietor consistently misrepresents others' views or words, he may justifiably be held in contempt.

If an organisation, when quoting others, consistently misrepresents their views or words, or misquotes them with a view of promulgating a certain position, that organisation must be held in contempt. If that organisation purports to be religious, claiming to uphold high moral principles, yet it consistently misrepresents and misquotes to support its own tenets, then it, as a corporate whole, must be condemned.

There is clear value in studying how facts are reported, since the evaluation and interpretation of facts, plus any comments, are subject to personal preconceptions and colouration. Things are seen as one would like them to be, rather than as they really are. A study into the actual reporting of facts is thus clearer in its outcome than is any exegesis of Scripture. The former becomes a simple matter of making direct comparisons, the latter is hindered by a multitude of concepts held by the reader.

This Chapter of our study focuses on the booklet Jehovah's Witnesses and the Question of Blood (abbrev. QB) to determine whether the WTS has handled factual verifiable statements accurately, honestly and in an open manner, or whether it has permitted preconceived conclusions to influence its presentation.

The WTS has a propensity for citing obscure sources, using material which is difficult to obtain. Often such material appeared in a foreign language and the WTS provides its own English translation.

Whilst it uses some obscure sources, the QB booklet cites more readily accessible references. This probably occurs because of the nature of the topic. The QB booklet quotes several types of sources

- religious persons, such as the Church Fathers
- legal opinion, to show the WTS's position is morally defensible
- medical authorities, to provide technical evidence.

The issue is not whether the original reports are correct, accurate or true, but it is a question of how the WTS handles the reports.

For the Christian, the opinions of the legal profession do not provide the definitive basis for determining morality. It is ironic that the WTS calls up defence from the legal profession, for not only is it prepared to disagree with the profession when the need arises, but it denies its own followers basic rights such as the freedoms of expression, association and enquiry, and it denies them the right of appeal, which fundamental to legal rectitude.

The WTS would be seen to be in a morally indefensible position were it demonstrated that it consistently misquotes the words and misrepresents the views of others. It would thus be using immoral tactics to enforce adherence to the ruling body's demands. If immoral procedures are used to defend a belief or a position, the argument, the conclusion and the proponent cannot be accepted.

CHURCH FATHER TERTULLIAN

While speaking about drinking animal blood, with the intent of extending the application to the drinking of human blood, the QB booklet cites the third century Church Father Tertullian:

"Referring to the decree of Acts 15:28,29, (Tertullian) says: 'The interdict upon 'blood' we shall understand to be [an interdict] much more upon human blood - The Ante-Nicene Fathers, vol. 4, pages 85,86.'" (QB page 14)

The Western Text of the Scriptures omits reference to "what is strangled" from the list given at Acts 15. Tertullian is one of those Western Church Fathers who supports this reading. On the same page cited by the WTS, Tertullian uses the rendering:

"from sacrifices, and from fornications, and from blood." (The Ante-Nicene Fathers, vol. 4 page 85)

In the context of the passage cited by the WTS, Tertullian is writing upon the subject of adultery, and he uses this rendering of Acts 15 to indicate:

"there has been preserved to adultery and fornication the post of their own honour between idolatry and murder: for the interdict upon 'blood' we shall understand to be (an interdict) much more upon human blood." (ibid., pages 85-86)

The WTS tries to make it to appear that Tertullian was extending the application from the eating of animal blood to the eating of human blood. Nothing could be further from the truth. Tertullian is giving the meaning of "murder" to the expression "blood" at Acts 15, since it carries the greater weight of "human blood".

When the WTS quotes the above statement from Tertullian on page 14 of its QB booklet, it reproduces only the words appearing after "for", and fails to disclose that Tertullian was giving the meaning of "murder" to "blood". The WTS presents this statement from Tertullian in the context of the drinking of human blood. Nothing could be further from the truth.

There is no doubt Tertullian did write against the excesses of pagan society, including their bathing in and eating of bloody flesh, including human (see pages 30-33 of the QB reference 8 -The Fathers of the Church, Vol. 10; Tertullian, Apologetic Works, and Minucius Felix, Octavius, by Arbesmann,

Daly and Quain). There is no doubt that abstinence from eating animal blood and bloody flesh lingered on to some Christians down to Tertullian's time:

"Some groups in the Church continued to abstain from blood as late as Tertullian's day (early 3rd century)." (The Book of Leviticus, G.J. Wenham, page 247)

Care must be taken when citing another, including Tertullian. The WTS does not observe such care. The WTS appears to have a preconceived conclusion and then searches for evidences to provide that conclusion. This is no way to arrive at Truth.

MINUCIUS FELIX

Immediately after the above reference to Tertullian in its QB booklet, the WTS, with the intent of extending the reference of "blood" at Acts 15 to human blood, cites Minucius Felix. He lived at the time of Tertullian:

"Minucius Felix, a Roman lawyer who lived until about 250 C.E., makes the same point (as Tertullian), writing: 'So much do we shrink from human blood, that we do not use the blood even of eatable animals in our food.'" (QB, page 14)

Unfortunately, as with the above citation from Tertullian, the WTS has quoted only part of the original sentence, altering its meaning in doing so, and failed to reveal that the original writer was attributing the meaning of "murder" to the expression 'blood'.

In the context of the passage quoted by the WTS, Minucius Felix refers to pagan charges that Christians are "initiated by the slaughter and blood of an infant". He proceeds with a tirade against the pagans and their inhuman sacrifices and slaughters, likening them to those who eat the wild beasts that eat the men in the Arena. In this context of murder and gore, he writes:

"To us it is not lawful either to see or to hear of homicide; and so much do we shrink from human blood, that we do not use the blood even of eatable animals in our food."

The intent of the passage from Minucius Felix is towards murder and sacrifice, including the sacrifice of babies, immolation, burial of live people, and gorging on criminals' blood. To Christians, he says, homicide is not lawful. In keeping from murder, Christians are thus said to "shrink from human blood".

Despite the inference given by the WTS in its QB Booklet, the decree of Acts 15 does not figure in this passage by Minucius Felix. The WTS continues to misuse this passage, since it appears on page 24 of the Awake! for September 8, 1986.

Present-day Christians fully endorse the sentiments of Tertullian and Minucius Felix. Murder, violence, sacrificing of children and the like are as totally abhorrent today. These same modern-day Christians, because of their loving concern for other people, willingly give blood to assist others in need. Because they believe in the sanctity of life, they give so that life may be preserved.

At the time of the primitive Christians, when blood was spilt, this was accompanied with indescribable horrors. Modern-day Christians abhor such activities. Life is God's gift to men.

Nowadays blood may be given lovingly, in caring for others. The intent, the atmosphere and the results bear no resemblance to what the Church Fathers were concerned about.

ORIGEN

At this reference in the QB booklet to Minucius Felix, the WTS refers to the footnote appearing at the bottom of that page. The intent of the immediate context of the Booklet is to extend the scriptural

injunctions concerning animal's blood to the arena of human blood. In particular, the emphasis is upon Acts 15. The Footnote in the QB Booklet reads (in part):

"Other references (from the second and third centuries) supporting this application of Acts 15:28, 29 are found in: Origen's Against Celsus VIII, 29, 30 ... (etc)".

This passage from Origen appears at pages 649-650 of The Ante-Nicene Fathers Volume 4, by Roberts and Donaldson, and also appears at pages 514-515 of Ante-Nicene Christian Library Volume 23, by Roberts and Donaldson. In this passage Origen does not refer to human blood. He is answering a specific charge by Celsus that demons are to be sacrificed to, prayed to and believed. Celsus had stated:

"when they eat bread, or drink wine, or taste fruits, do they not receive these things, as well as the water they drink and the air they breathe from certain demons." (quoted in Origen)

Referring to 1 Corinthians Chapter 8, Origen answers:

"I cannot see how those whom he speaks of as abstaining from certain victims, in accordance with the traditions of their fathers, are consequentially bound to abstain from the flesh of all animals...

"But it is to be observed that the Jews, who claim for themselves a correct understanding of the law of Moses, carefully restrict their food to such things as are accounted clean . . . They also do not use in their food the blood of an animal nor the flesh of an animal torn by wild beasts, and some other things which it would take too long for us at present to detail".

The context is thus of food, of eating, and of demonology. Origen points to the behaviour of the Jews, but not in detail; and his very next words explain why -- Jesus has set men free from codes concerning food:

"But Jesus, . . . anxious not to throw any hindrance in the way of many . . . through the imposition of a burdensome code of rules in regard to food, has laid it down that 'not that which goeth into the mouth defileth a man, but that which cometh out of the mouth..' (Matt. 15: 11,17-19 is then quoted in full) . . . Paul also says, 'Meat commendeth us not to God..' (1 Cor. 8:8 is then quoted)."

It is at this point that Origen refers to the decree made at Acts 15:28,29, erroneously placing the assembly at Antioch:

"Wherefore, as there is some obscurity about this matter, without some explanation is given, it seemed good to the apostles of Jesus and the elders assembled together at Antioch, and also, as they themselves say, to the Holy Spirit, to write a letter to the Gentile believers, forbidding them to partake of those things from which alone they say it is necessary to abstain, namely, 'things offered to idols, things strangled, and blood'.

"For that which is offered to idols is sacrificed to demons, and a man must not join the table of demons. As to things strangled, we are forbidden by Scripture to partake of them, because the blood is still in them; and blood, because especially the odour arising from blood, is said to be the food of demons. Perhaps, then, if we were to eat of strangled animals, we might have such spirits feeding along with us. And the reason which forbids the use of strangled animals for food is also applicable to the use of blood. . . It is not, therefore, simply on account of some traditions of our fathers that we

refrain from eating victims offered to those called gods or heroes or demons."

The whole message of Origen concerns food, animals, animal blood and demons. Origen's list of the decision given at Acts 15, which was written to Gentile believers, omits the reference to fornication, thereby making it a purely dietary matter, not a moral issue: "things offered to idols, things strangled, and blood". To Origen, the concern is not the traditions of the fathers; Jesus has removed the Jewish codes concerning food.

By no stretch of the imagination is it possible to extend Origen's statement to encompass human blood or the practice of one person, without risking his life, willingly giving his blood that it may be transferred to another for the purpose of saving that life. In no way is the WTS's position supported.

According to Jesus, that which comes out of the mouth defiles -- murders, false witness, blasphemies. This brief survey has concentrated at one point in the WTS's presentation of the supposed views of Church Fathers. At this one point, the WTS has misquoted and misrepresented those views.

AN EXEGESIS ON GENESIS 9

To extend the Jewish prohibition on the consumption of blood to the human race as a whole, in its QB booklet the WTS cites page 128 of Genesis-A Commentary, by Gerhard von Rad:

"Gerhard von Rad, professor at Heidelberg University, refers to Genesis 9:3, 4, as 'an ordinance for all mankind, 'because all mankind has descended from Noah.'" (QB, page 7)

In his commentary, Gerhard von Rad provides a comprehensive analysis of the book of Genesis. On page 126 he introduces Chapter 9, verses 1 to 17 of Genesis with the heading: "God's Covenant with Noah". According to von Rad, "A new momentous chapter begins with ch. 9." (page 126). These first 17 verses, written by the P source, are concerned with "materials with which in such a form only the priests were concerned" (page 127).

The succeeding verses of Genesis chapter 9 (verses 18 to 29) are seen as "part of the Yahwistic primeval history", with the P account resuming at Genesis chapter 10, where the history of the covenant with Noah moves "out into the vast international world" (page 130).

In his analysis of verses 1 to 17 of Genesis ("God's Covenant with Noah"), von Rad reasons "it is fundamentally important to understand that P is not speaking of distant primeval things, but is answering definite elemental questions for the faith of later Israel" (page 127). These "definite elemental questions" were raised because:

"violence and reciprocal killing characterize the communal life of the creatures; there is no peace among the creatures. This raises theological questions which ch. 9 answers." (page 127)

The first question dealt with in Genesis 9 was: "under these altered conditions, did the first command of creation (ch. 1.28), 'be fruitful' still hold?" (page 127). The answer given in verse 1 was that "God, in spite of everything, has renewed this command" (ibid).

The second question, dealt with in Genesis 9:2-4, asked:

"How was the violence exercised on earth and the killing to be reconciled with God's absolute sovereign right over all creatures? The relationship of man to the animals no longer resembles that which was decreed in ch. 1. The animal world lives in fear and terror of man". (page 127)

The answer given in chapter 9 was that:

"God . . . renewed man's sovereign right over the animals. What is new, however, is that God will also allow man deadly intervention; he may eat

flesh as long as he does not touch blood, which the ancients considered to be the special seat of life". (pages 127-128)

Von Rad highlights the "strict distinction in Deuteronomy between sacrifice on the one hand and profane slaughter on the other" (page 128). Genesis 9 is an answer to the priests at the time of Deuteronomy and considers the aspect of "profane slaughter" (von Rad, page 128). At the time of these priests, "blood could not be eaten even at profane slaughter. It was to be poured out 'like water' (Deut. 12.16,24; 15.23)" (page 128).

"The ordinance in (Genesis 9) v.4 . . . is thus shown to be historically a late reflection. But the new thing is that the command is shifted completely from Israel's cult to the universally human . . . the usage is here legitimated quite unculturally on the basis of God's right of dominion over all life. Here, therefore, it is . . . an ordinance for all mankind. Even when man slaughters and kills, he is to know that he is touching something, which, because it is life, is in a special manner God's property. This regulation of man's relation to the animal world could be designated a regulation of necessity". (page 128)

Thus in delineating "man's relation to the animal world", God permits him "deadly intervention" in which he "slaughters and kills" on the basis of "God's right of dominion".

The relation of human to human is covered quite separately by Genesis 9 and by von Rad. On pages 128 to 130, von Rad covers verses 5 to 7 of Genesis 9. Whereas verses 2 to 4 are considered "a regulation of necessity", verses 5 to 7 are not.

"This regulation of man's relation to the animal world could be designated a regulation of necessity. [5-7] But the establishment of the divine sovereign right over human life is expressed apodictically and unconditionally: It is absolutely inviolable . . . because man is God's possession and was created in God's image." (page 128)

As with verse 4 of Genesis 9, verse 6 is removed from its original priestly setting and now "expresses a most universal human order" (page 129). Both are universal because "God does not abandon his sovereign claim over all creatures" (page 129). They are based upon the vertical relationship with God, not upon any horizontal relation between people.

Speaking as it does of human to animal relation, verse 4 lies outside a description of relationships between people. It cannot therefore be applied to the relation that exists between humans in transfusions, nor can verse 4 be applied to the nonviolent relation that exists between donor and recipient.

SEVEN SIGNIFICANT WORDS

The WTS's citation of von Rad in its QB booklet reads:

"Gerhard von Rad, professor at Heidelberg University, refers to Genesis 9:3, 4, as 'an ordinance for all mankind' because all mankind has descended from Noah." (QB page 7)

These last seven words are essential to the WTS's argument, but they do not appear in the book and they do not represent von Rad's analysis.

The WTS is thus guilty of misrepresenting the message and the intent of von Rad, as well as omitting significant relevant information. Whether the WTS agrees with those sentiments or not is irrelevant. The force and legitimacy of their argument must be doubted when the WTS has to resort to such tactics.

Since Genesis 9:4 refers to animals, to slaughter, killing, the eating of flesh and the permission to take life, it has no bearing upon blood transfusions. In a blood transfusion, man does not "touch life", life

is not violated. The donated blood does not indicate flesh is being prepared for eating. That is not the purpose of the medical process.

If the purpose of the transfusion were to kill the donor or the recipient the instruction given to Noah in verse 6, and not verse 4, would become relevant, inasmuch as God gave permission to take animal life, but not human. Von Rad recognises there are clear differences between verses 4 and 6 of Genesis 9. The WTS fails to do so.

Thus far this Chapter has considered a sample of the QB booklet's references to religious sources. In particular it has considered references to three Church Fathers appearing in the booklet at the one context, and it has considered a reference to a Commentary. Each of these references supposedly supports the WTS's rationale concerning blood. Careful reading shows none is saying what the WTS claims.

MORALITY AND THE INDIVIDUAL JW

Personal questions any practising JW must ask himself, and ensure he gets an honest and objective answer, include

1. Am I truly following the dictates of my own conscience, or are external pressures from others determining my position? Am I controlled by the questions: "To whom else Can I go ?" or "The WTS is right on other things, so it must be right on this one also", or by the thought: "All my friends (or family) are Witnesses and they would not be permitted to talk to me again".

This would mean the actions of that JW are taken to satisfy those who are "lording it" over him and are not the product of his own faith. In the light of Romans 14:23, his actions are sinful.

2. Is it not better to be prepared to lose eternal life if it means my child will have me present to bring him up, giving him a greater possibility of being brought up faithful to God through my sacrifice for him?

Is not the parent's death in such a circumstance a result of selfishness, demonstrating a lack of putting the concerns of others first (in this case, the lack of concern for one's own child)? Would not the child love and respect the parent more for the eternal sacrifice that has been paid by the parent on its behalf?

Did not Jesus say he who loses his life shall gain by it? Could it be that in showing preparedness to sacrifice eternal life for the sake of others, the parent is in reality gaining eternal life ?

3. What are the Great Moral Principles, and how do they apply in the refusal to accept a Blood Transfusion ?

- * It is better to give (one's life) than to receive
- * Greater love has no man than this, that he lays down his life (eternal life) for another (John 15:13)
- * Do to others what you would like that they should do to you.
- * The Kingdom of God is not eating and drinking (Romans 14:21)
- * You should not cause your food to ruin the one for whom Christ died (Romans 14:15)
- * There is nothing that a man takes into his stomach that defiles him, only what comes out of his heart. (Matthew 15:11,17,18; Mark 7:15, 20-23)

4. Is Blood Transfusion the Unpardonable Sin ?

- * Being a NT Christian, can the WTS's ban on Blood Transfusion be supported through the eyes of the NT?

- * What about the followers of the WTS movement who lived and died before this relatively recent edict on Blood Transfusion? Not one of them spoke against it for the first half of this century. Does this mean that they, which included some members of the 144,000, are as guilty as those who now condone this medical practice? If those earlier Witnesses are forgiven because of their ignorance, is this not so for non-Witnesses or for children living today?
- * Does Truth change with Time? If so, when shall we know when the truth has become Truth, or whether we are still waiting for Truth to come? When a group of men says it is God's Slave, do we know if that truth has really become Truth yet?

TYPICAL REASONING USED BY THE WTS

The WTS has encountered many arguments regarding its stance on 'blood'. Some of the WTS's answers highlight its inconsistent position. For example, it has argued that "commercial gain" is not to be derived from blood yet it permits blood tests to be conducted -- even by Witness doctors. Also, it prohibits the use of whole blood or red cells yet it permits the use of plasma products for protection against disease, haemophiliac treatment, and so on. If it is a matter of principle, it must cover blood in totality.

The WTS has had to handle questions concerning employment, medical treatment of pets, even questions concerning the feeding of meat to pets. Its position has at times appeared bizarre, particularly when it extends its prohibitions beyond the human arena. If the matter is a Religious issue based on Morality, how can it concern the treatment or the feeding of animals? Can animals be deemed "guilty" before the Lord? Can they be deemed guilty because of its owner's religious beliefs? Would it not have been better for that beast were it not domesticated, or if it were being cared for by a non-believer?

In its QB and BM (Blood, Medicine and the Law of God) booklets, the WTS demonstrates its morality in action.

MUST NOT "SUSTAIN"

In its QB booklet, the WTS writes:

"A human is not to sustain his life with the blood of another creature (Genesis 9:3,4)" (QB page 17; BM page 14 uses the expression : "to nourish")

Genesis 9:3,4 states that when meat is eaten, it must not contain any life. The flesh must be dead, and blood is the life of the flesh. This verse is not speaking of the eating of blood separate from the flesh.

To state that this verse says blood must not be used because it "sustains" or "nourishes" is to go beyond the plain word of Scripture. When the student goes beyond the express statements of God's Word he has entered the arena of interpretation and speculation. There are several possible explanations for this injunction, including spiritual, health, moral, and so on.

Not all dietary exclusions are based on "sustenance" or "nourishment". For example, it was for spiritual and moral reasons that the shewbread in the Hebrews' Sanctuary was not allowed to be eaten by unauthorised persons. Other foods or parts of foods denied to people for religious and moral reasons included: the Burnt-offering; the Sin-offering; the Trespass-offering; the Meat-offering; the Peace-offering; the First-fruits of wheat, barley, the vine, the fig-tree, the pomegranate, the olive and honey; the Terumah; the Tithes; the Challah.

It has been shown earlier in this Study that verses 3 and 4 of Genesis chapter 9 refer to the blood of animals, whereas the reference to human blood is confined to verse 6 of that Chapter. Even if "sustenance" were the reason for abstinence, the thought or intent of partaking of human blood in a meal would be abhorrent and totally foreign to the mind of the writer of Genesis.

Verses 3 and 4 of Genesis 9 are in the context of making flesh suitable for eating. Any reference to "creature" in the passage from the QB booklet must be confined to that intent. It cannot be extended to human flesh or to human blood since is totally irrelevant to the context of those verses.

Paradoxically, the WTS explains later in its QB booklet (particularly pages 50 to 54) that transfused blood is not the panacea the medical profession would have its patients believe. The WTS argues that transfused blood does not sustain:

"Blood stored more than ten days 'does not improve or may even worsen oxygen delivery immediately after transfusion.' And (the researchers) found that the oxygen delivery was still below normal twenty-four hours later." (QB page 53)

More significant is the WTS's statement that the use of blood in inoculations "is not directly eating blood" (Watchtower November 15, 1964, page 682). How can the WTS state that receiving blood in a transfusion comes under the jurisdiction of Genesis 9:3,4 yet the receipt of animal's blood in an inoculation does not? If the latter is not "feeding", then neither is the former.

AVOIDING FOOD THAT CONTAINS BLOOD

The WTS claims:

"Jehovah's Witnesses avoid . . . food that contains blood." (QB page 24)

The WTS does not advocate a vegetarian diet, and all meat contains blood. Naturally, if any Witness is so concerned about this fact that he wishes to follow a vegetarian regimen, it is vital that steps are taken to ensure the diet remains adequate.

In his book, Horace Thornton, B.V.Sc., D.V.H., F.R.H.S. writes:

"In the live animal about 7 per cent of the body weight is represented by blood, but only about half of this blood can be removed by bleeding. Thus, even though a live steer of 1000 lb (453 kg) weight will contain about 70 lb (32 kg) of blood, only 30 lb (13.5 kg) (3 gallons or 13.5 litres) is removed during bleeding." Aspects of Meat Inspection (1973)

Thus 1 lb (450 gm) of meat contains just over 1/2 ounce (13.5 gr) of blood. If a person ate 6 ounces (180 gr) of meat per day, this would amount to just over 3 pints (1.9 litres) of blood taken in by mouth each year. If 6 ounces of "effectively bled" meat is eaten each day, the amount of blood consumed by mouth would be the equivalent of about 4 units of transfused blood. Imagine the amount consumed over several years.

To ask a butcher whether his meat is bled adequately to satisfy one's religious beliefs is self-delusion. What businessman would willingly admit to facts that will result in decreased trade? What the butcher considers blood-free may not, under rigorous inspection, prove to be so.

There seems to be no small inconsistency where a person would prefer to forego a medical process yet will take in the blood of an animal by mouth, which was the Bible's original prohibition. It would be interesting to examine the treatments received by an animal during its life which remain resident in the flesh, whether its blood has been flushed out or not. In reality, of course, drinking blood could shorten life rather than maintain or nourish it.

"WE CANNOT DRAIN"

In its earlier BM publication, the WTS wrote:

"We cannot drain from our body part of that blood, which represents our life, and still love God with our whole souls." (BM page 8)

Blood is living tissue and is continuously replenished. Each second some 3 000 000 red blood cells are created and released into the blood stream, replacing those that have done their work. Each of

these three million cells contains three hundred million haemoglobin molecules. Each of these haemoglobin molecules contains:

"2954 atoms of carbon, 4414 atoms of hydrogen, 806 of oxygen, 780 of nitrogen, 12 of sulphur and 4 atoms of iron." (More Insight On Blood page 10)

Red cells have a life span of about one hundred days and in any drop of blood there are cells in all stages, from brand new to dust-like particles. Blood is continuously being removed and replaced by the body. Following a donation of blood, the body promptly sets about replacing the lost volume.

To state that draining blood prevents one completely loving God suggests that a person experiencing a nose-bleed is unable to love God to the full. How many menstrual Periods would it take before a woman becomes totally incapable of loving God?

RISKS IN TAKING BLOOD

It is the right of any person, after rationally considering all the implications, to make a conscious and deliberate decision to refuse ANY medical process. The WTS, through its QB booklet, states:

"There are serious risks in taking blood." (page 49)

Any refusal based on the risks involved are not concerned with religious objections, and since the WTS objects to the transfusion of blood as "basically a religious objection, not a medical one" (QB pages 48-49), the "serious risks" involved are a totally separate issue and are irrelevant.

In refusing any medical treatment, the patient must make a decision based on his and her understanding of all the complex issues involved, in close consultation with their medical advisors.

There is no doubt that:

"a blood transfusion can be more dangerous than any other surgical technique. . . (but) properly handled and adjusted to the patient's needs it can prevent much suffering and in many cases save life." (Notes for Nurses on Blood Transfusion [June 1976], Australian Red Cross Blood Transfusion Service, page 2)

Experts in fields of medical technology warn of dangers inherent in medical procedures, but to refuse treatment because potential dangers lurk could be foolish at the very least, and could prove fatal, perhaps unnecessarily. Procedures employed by medical practitioners in Biblical times, such as the Gospel writer Luke, involved risks also, yet their practice was not shunned or condemned on this ground.

When haematologists warn of the dangers of their procedures, it is like the elders of the congregation being instructed of the dangers when handling the people who are in their spiritual care. Just as there would be no thought of removing all people from the congregation, and thus not having one, because there are cautions to be observed, so also there is no thought that transfusions should cease because there are cautions to be observed when they are being performed.

The number of people lost from the congregation each year is great, as is the number of people killed through medical processes, including blood transfusions. This does not mean the principle of having congregations should be abandoned. Similarly, it does not mean medical procedures, including blood transfusions, should be abandoned on this ground. It means greater care and understanding are required regarding members of the congregation and also with medical practices.

ACCEPTING DANGER FOR THE SAKE OF PRINCIPLE

The WTS writes:

"Willingness to accept dangers for the sake of principle is not unique with Jehovah's Witnesses." (QB page 23)

It is inconsistent for the WTS to state on the one hand that Blood Transfusions are a dangerous medical procedure and then to state that Witnesses are prepared to accept the "dangers" of refusing a Transfusion.

This passage in the QB booklet could be rephrased to show that Christians are prepared to accept the "dangers" of a blood transfusion for the sake of the principles that one's life is sacred and it is one's responsibility to maintain that gift from God.

The "danger" Witnesses accept only comes when they refuse the medical therapy of Blood Transfusion. Whenever they are confronted by blood in other circumstances, the WTS is prepared to forego its "principles", whether "danger" exists or not. These are demonstrated through considering inoculation, employment, business and the acceptance of other medical treatments.

INOCULATIONS

Animal's blood is used for the preparation of several vaccines, yet the WTS says Jehovah's Witnesses may use such preparations, since:

"he is not directly eating blood . . . (and) it is not used for food or to replace lost blood." (Watchtower November 15, 1964, page 682)

Thus Jehovah's Witnesses may accept blood at times. It appears the criteria are:

1. it is not being eaten when it is being injected into the body
2. it is not being used as a food
3. it is not replacing lost blood.

How are these criteria arrived at? What are the Scriptural bases? Does Genesis 9:3,4 state blood may be eaten when it is not being used to replace lost blood? Hardly! The last criterion appears to be a definition of convenience rather than having been gleaned directly from the Word of God.

From this statement in the Watchtower it is clear that the blood received in a transfusion is not "eaten" directly, since it is injected into the body. Further, blood is not used as "food" and is often provided to counter specific maladies, such as RH incompatibility, rather than compensate for blood loss.

The WTS shows it is not prepared to accept the "dangers" of refusing treatment involving blood when it states inoculations are accepted because they are "a virtually unavoidable circumstance." Where has Principle gone?

It is strange that the WTS allows serum injections made from animal blood (Watchtower June 15, 1978, pages 30-31). Why can sera made from animal plasma be allowed to "fight disease" (which is using blood to "sustain life" anyway), while injections of red cells or platelets are forbidden, when these too are given in response to a specific disease? To which of its component parts does blood have to be broken down into before it ceases to be blood? Are just some of the component parts unacceptable? On what Principle?

It is clear that the WTS permits some use of blood, despite its position on the use of blood in transfusions. Presumably Witnesses cannot give blood, although the prohibition from the WTS is always stated in terms of the receipt of blood:

"The official Jehovah's Witness instruction is, 'keep yourselves free . . . from blood' (Acts 15:29 NWT) ' . . . any sort of blood. . .' (Lev. 17:10 NWT). We would appear to be faced again with the wish to have things both ways." (God, Blood and Society A.D. Farr, page 69)

EMPLOYMENT

Blood is used in a wide range of everyday products and all people continuously come into contact with them. The WTS provides a listing of such products, stating that "none (of these products) is in

accord with the Biblical method of handling blood." (Watchtower November 15, 1964, page 681) lists:

"Adhesives for making plywood, particle board, hardboard, bottle crowns, furniture and musical instruments. Blood is also being used in polymerization of rubber compounds, insecticidal binder, settling compound for industrial waste treatment, clear water purification (paper industry), uranium purification, foaming agent for lightweight cellular concrete, fire foaming agent, wine clarifying agent, paper coatings and binders, paper flocculants and sizes, replacement of casein in latex emulsions, emulsified asphalt, cork composition, photoengraving platemaking solutions, leather-finishing operations, water-resistant binder of pigments for print dying on cotton cloth, fertilizers, animal foods, and amino acid production, such as histidine and histamine, for example. . . None of these is in accord with the Biblical method of handling blood." (Watchtower November 15, 1964, page 681)

The WTS states:

"(these) uses of blood today are objectionable from the Biblical viewpoint (but since) it becomes almost impossible for (Jehovah's Witnesses) to avoid all contact with them - leather goods, furniture, bottle tops, cotton cloth, and so forth (what he does) is a matter of conscience . . . a personal decision." (op. cit., pages 681,682)

If it may be left to the conscience of the Witness whether buys, sells or rents a house "in which plywood is found" and if it is up to his conscience whether he works for a company that uses blood glue or not (op. cit., page 682), where has the WTS's principle gone? Why does it draw the line only on one issue -- the use of human blood in some transfusions? Is the WTS really prepared to accept "dangers for the sake of principle" ? (QB page 23).

BUSINESS

The WTS instructs Witnesses they may sell "blood goods, such as blood sausage" when they work in a store selling such products.

"(Jehovah's Witnesses) may sell blood items to worldly persons in a drug store or will spread blood fertilizer on the field of a worldly employer at his request." (Watchtower November 15, 1964, page 681)

The WTS decries the storage of blood yet a Witness doctor is permitted to administer stored blood in a transfusion requested by the patient. Witness doctors have done so (op. cit., pages 682-683).

These are further examples where the WTS is inconsistent with its stated position that Witnesses are prepared "to accept dangers for the sake of principle" (QB page 23) and they "always consider God's laws in everything" they do (Watchtower November 15, 1964, page 683).

MEDICAL

Not only is the WTS not prepared to "accept the danger" of missing out on the protection offered by inoculations prepared from blood products, but it is grossly inconsistent in other medical aspects.

The WTS says the storage of blood is condemned by God, yet it accepts open-heart surgery involving a heart-lung machine, where blood is stored for considerably longer than the momentary storage of blood in a syringe. In its BM booklet (pages 14-15), the WTS says momentary storage in a syringe is not acceptable, yet it is prepared to accept a much longer storage in heart-lung and dialysis machines and in pathology tests (see Farr, pages 67-68).

The WTS does not object to blood tests (Watchtower June 15, 1978, page 30) yet the blood is stored, often for some time before the tests are completed. Any argument about the amount of blood taken or stored or about the length of time it is stored cannot be accepted since this is a question of Principle.

The WTS accepts injections prepared from animal's blood (op. cit., pages 30-31), which is just as much a medical procedure as a blood transfusion. Thus it accepts the injection of animal's blood, which product the Bible does refer to, whilst it does not permit the injection of human blood (or component parts such as red cells), which the Bible does not refer to. The WTS permits the use of blood in the treatment of haemophilia, which is the one service causing so much concern with the transmission of the AIDS virus.

DISEASE NOT AN INDICATION OF IMMORALITY

Before considering the Watchtower Society's use of medical authorities, it is vital to have a correct perspective of the dangers and diseases that are associated with the transfusion of blood. There is no nexus between an individual's disease or illness and his/her moral standing before God. Death and disease result from the state of Sin, not from the individual's sinning. It is not Scriptural to hold that someone's illness (or, conversely, one's good fortune) is the result of some direct intervention of God, as punishment for some bad deed or to reward some good deed.

To hold that one's disease is a direct punishment from God is to misrepresent his nature and to place one's illness into a moral realm where it does not belong. It shows a failure to understand the loving God of Infinite Mercy to impugn upon him the act of punishing an individual person with disease or, even worse, to punish some and not others who are identically "guilty".

It would make the healing or treating of a disease or illness a moral offence, unless it were treated through spiritual activities alone.

It fails to recognise that God has no pleasure in the death of any sinner, but has pleasure when he seeks forgiveness. In the Parables of the Lost Sheep, Lost Coin, etc., the joy of heaven comes from saving the lost sinner. It fails to answer the question: Why do some people commit a moral offence without becoming diseased, while others are "penalised" for committing the identical sin?

In terms of relative numbers, the vast majority of recipients of blood do not become ill. For many it is the sole reason for their not becoming ill or is their sole reason for survival (e.g. haemophiliacs, Rh factor babies or recipients of spider anti-venene).

People may become ill through eating poisonous food, exceeding bodily limitations, or through receiving diseased or incompatible blood -- but this does not deny the acceptability of the principle of receiving blood, any more than it denies the principle of eating food. Becoming ill does not make eating a moral offence, any more than illness condemns the principle of accepting a transfusion of blood -- or of accepting ANY medical therapy, inasmuch as any procedure has the potential of causing harm to some degree. Disease or the absence of disease provides no indication of morality or immorality. Homosexuality is condemned by Scripture but this does not prove that AIDS is God's punishment -- not all homosexuals get AIDS, not all who get AIDS are homosexual. Lesbians do not get AIDS.

One must be cautious not to adopt the position that God is behaving in a certain manner because that is what he should be doing. One must not say that God is "punishing" a certain person, practice or principle because that is what one believes God should to be doing. How would one rationalise the suffering of a new-born baby with either AIDS or haemophilia?

The dangers associated with the transfusion of blood lie, not with any moralistic cause, but in that it is, along with all medical therapies, a non-natural act, an intrusion, an assault. The transfer of tissue, and the WTS permits organ and tissue transfer where blood is not incorporated, lies in the process being unnatural -- contrary to the common action of Nature.

Homosexuality may result in AIDS, not because of direct punishment by God, but because there is a direct passage of bodily fluids from one person to another.

The WTS concurs:

"We neither stated nor implied that AIDS was God's judgment on homosexuals. Sickness is part of sin and imperfection that all of us have inherited from Adam. But it cannot be denied that certain actions bring unavoidable consequences." (Awake! September 22, 1986, page 28)

Whether the transfer of tissue, and blood may be considered a tissue from the body, or whether homosexuality, the eating of "unclean" foods or any other action is contrary to moral rectitude is not resolved by any consequential illness or disease. Morality must be considered distinctly and separately.

WHEN MORALITY DOES RESULT IN DISEASE

Whilst the existence of a disease is no proof of an individual's sinning, at times there is a direct link between an individual's moral stance and that person's disease or death.

This occurs when a person refuses medical treatment or advice on the basis of personal belief, which results in disease or death. Morality and disease then do become entwined.

The U.S. mortality rate related to blood transfusion was estimated by several authorities in the early 1970's (the time the QB booklet was written) as approximating 3,000. A death due to a moral stand, such as the death of a Jehovah's Witnesses due to the refusal of a blood transfusion, is uncommon enough to make it newsworthy.

Deaths that result from medical treatment and deaths that result from the refusal of treatment on moral grounds may not be compared.

The deaths and disease due to the medical process of transfusion result from physical causes. This is in common with the deaths and diseases due to other medical processes, such as occur, for example, under anaesthesia or with the administration of drugs. Also, in most cases these people are already very ill and the administration of blood may not be the sole or dominant factor contributing to the death.

The deaths and diseases that result from the refusal of medical treatment on moral grounds, such as a death due to refusing an abortion on religious grounds, are on a totally different plane. These people are often quite well and the process offered may not be significant in terms of the overall treatment.

Each day, the medical practitioner makes decisions that are influenced by his abilities. When a death or disease results, this is a risk open to enquiry. When it occurs as a matter of course of the disease or injury, this is accepted. When a person would be expected to survive a particular trauma but refuses the prescribed treatment on moral grounds, the resultant death must be viewed in a totally different light.

CHAPTER 5: HANDLING MEDICAL EVIDENCE

"Clergyman? Butcher? Lawyer? Politician? WHOM CAN YOU TRUST? Dishonesty has penetrated almost every walk of life. Certainly we need a voice we can trust. The Watchtower and Awake! are such voices. You can trust them. Why? Because these magazines are pledged to uphold the righteous standards of the Bible". (Awake! October 22, 1984, page 32 advertisement, Australian edition)

"Avoid Independent Thinking . . . How is . . . independent thinking manifested? A common way is by questioning the counsel that is provided by God's visible organization . . .

"Fight Against Independent Thinking . . . Today Jehovah is using only one organization . . . We should ask ourselves: '. . . Can we get along without the direction of God's organization?' No, we cannot!" (Watchtower, January 15, 1983, pages 22, 27)

Thus far this Study has considered the topic of blood from the standpoint of Scripture, looking at its interpretation and the related ethical and moral issues. It has been shown that, in contrast to the teachings of the Watchtower Society (WTS), Scripture consistently holds that "Blood" means "Death", usually inflicted violently. The ethical and moral applications made by the WTS on blood contrast with the stance taken by Scripture.

This Chapter considers the WTS's handling of medical authorities. The authorities presented and discussed in this Chapter were determined by material available from the Medical Libraries at the University of Melbourne and the Red Cross Society in Melbourne, Australia. There was no prejudicial selection of the material considered. It should not be construed these statements are exhaustive, nevertheless sufficient is provided to determine the constant nature of the Watchtower Organisation.

It is not the object of this Study to either promote or denigrate the medical procedure but to consider the WTS's handling of the relevant aspects. Any determination regarding blood transfusion is a consequential matter. The object of this Study is to examine the Watchtower Society. For this reason, the significance of the medical sources lies not in their content or message, but in considering how the WTS handles them.

The WTS sees benefit in considering medical sources:

"There is benefit in briefly examining the medical implications of refusing blood . . . The 'advantages and disadvantages of the form of treatment' merit consideration." (Jehovah's Witness and the Question of Blood [QB] pages 38-39)

Both the "advantages" and the "disadvantages" merit careful consideration. There are dangers involved in any medical process, and the transfusion of blood is no exception. There are dangers even with "aspirin and penicillin" (QB page 41). However, there are life-saving benefits obtained from medical procedures, including the transfusion of blood.

Most important is the Watchtower Society's handling of the facts. Does it carefully present both sides of the story or has it suppressed relevant information to suit its own ends? Does the QB booklet present all the facts honestly and openly, using all the relevant authorities? Does the WTS present all the pertinent information given by those authorities it does quote? Or is its selection of the sources, the quotations and the articles determined by its predetermined conclusion?

GOD, BLOOD AND SOCIETY, by A.D. Farr (QB. page 36, ref.40; QB. page 40, ref.47)

As the QB states (page 36), Farr does not agree with the State overriding religious principles of any person (Farr, p. 115). This does not mean Farr agrees with the WTS's position. In fact he specifically states he does not. He takes Voltaire's stance:

"I disapprove of what you say, but will defend to the death your right to say it" (Farr, page 116).

The second reference in the QB booklet to Farr (QB page 40, ref. 47) states:

"nearly three hundred different Rh types may theoretically be recognised." (Farr, page 32).

Farr continues, although the QB booklet does not:

"In view of the near impossibility of transfusing any blood which is exactly identical to that of the recipient a cross-match test is performed prior to every transfusion. . . It must be stressed that the risk of immunising is, outside of the Rh system, very small." (Farr, page 32-33)

As a transfusion authority points out:

"There are well over 100 known blood group factors. However, the ABO and Rhesus systems are the most important as far as blood transfusion is concerned." (The Vital Factor, Australian Red Cross Society, page 9)

It is good the QB booklet should acknowledge Farr's book, since it is specifically written to expose theological and medical errors of the WTS. However, the WTS does not provide a balanced presentation of the book's views and contents.

SURGERY, February 1974, (QB page 43, ref.57)

The QB booklet quotes from an article appearing in the February 1974 issue of Surgery.

"major new problems related to massive transfusion have been proposed." (Surgery, Feb 1974, pages 274-275)

The WTS fails to explain the context of the statement, that it is only one of three topics introduced at the start of the Article and that, following a comprehensive analysis, the Article concludes the problem is not as severe as was proposed.

The Introduction of the Surgery article, which concentrates on "massive transfusions of blood", not those normally encountered, explains it is concerned with "three recent developments":

"First was the war in Vietnam, where massive transfusion of blood reached an intensity of use never before approached. . . Second has been the development of improved analytic techniques which have made practical the more accurate study of these alleged problems. . . Finally, major new problems related to massive transfusion have been proposed." (Surgery, op. cit., page 274, emphases supplied)

Those words quoted by the WTS in its booklet are therefore part of the Introduction to the Surgery article, simply a proposition considered by the author, along with two other developments. It is not a proposition necessarily concurred with by that author.

CONCLUSIONS WITHHELD BY THE BLOOD BOOKLET

After considering these developments carefully, the Surgery article concludes:

"Many of the serious toxicities attributed to the massive transfusion of stored blood are often due to giving too little blood or giving it too late. . .

"In spite of all the problems with liquid stored whole blood, we have a product that usually works well. Historically, as new problems associated with massive transfusion have been defined, they have almost always been grossly overstated." (pages 290, 291)

Speaking of one of the developments referred to in its Introduction, namely the war in Vietnam, the Article concludes:

"When one considers the great numbers of transfused casualties, the low mortality rate, and the fact that most such deaths were due to uncontrolled bleeding from combat injuries, the value of even our presently imperfect product in saving lives from massive haemorrhage becomes evident." (page 291)

Having considered the proposition quoted by the QB booklet, the Surgery concludes that the fears are grossly unfounded:

"Stored blood is useful and effective, even when it must be given rapidly in large amounts." (page 291)

The QB booklet never mentions this.

SOUTHERN MEDICAL JOURNAL, April 1976 (QB page 42, ref.55; page 45, ref.61)

The purpose of the article in the April 1976 issue of the Southern Medical Journal, referred to by the QB booklet, is stated as being: "to review the major 'risks'" of blood transfusion (Journal, page 476).

As the QB booklet states, the Journal refers to the rate of deaths due to transfusions:

"It has been estimated (probably conservatively) that between 3,000 and 30,000 deaths attributable to transfusions occur annually in the United States." (page 476)

The sentence immediately preceding this one refers to "thoughtless prescription of blood transfusion", but adds that "the odds are in the physician's favour that nothing will go wrong" (page 476).

The article in the Journal does not attempt to whitewash the dangers associated with transfusions, for many deaths do occur, due, almost invariably, in the light of present knowledge, to human error, not to the principle of transfusing blood.

The article in the Journal, in reviewing these major "risks", comments on each. Each of the risks is treated in full. Some are considered as not serious or as rare, and others are listed as being minimised or managed through greater care. For example:

"HEMOLYTIC REACTION . . . Most hemolytic transfusion reactions are due to errors in identification . . . Great care must be taken in checking the name and hospital number on the patient's identification bracelet, on the transfusion forms, and on the label of the tube into which the blood is placed. Likewise, when blood is given, it is imperative that all these checks are repeated carefully." (Journal, page 476)

Some risks do, of course, pose serious problems. Post-transfusion hepatitis, "the most common cause of serious morbidity and mortality associated with transfusion. . . an especially serious disease in patients over the age of 40" (Journal page 477), can only be prevented through not transfusing blood (page 478). Post-transfusion hepatitis can be reduced by 25 per-cent through careful screening of the donated blood. Also,

"the careful outscreening of donors with a history of hepatitis and the exclusion of high risk donors (prisoners, alcoholics and drug addicts) is

essential, and the use of only volunteer donors usually is important." (page 478)

The QB booklet cites page 477 of this Journal (QB, page 45, ref.61) in support of its statement that:

"one percent, or one person out of one hundred, contracts hepatitis following a transfusion". (QB, page 45)

Actually, the Journal gives a figure of: "in the range of 0.1% to 1%" (page 477).

The WTS's figure is in error by up to 10 times -- and it is a matter of simple reporting. The WTS could at least be accurate, particularly when lives are at risk. So many people rely on the information given them by the WTS. The WTS should not inflate figures to suit its own ends. The article in the Southern Medical Journal concludes:

"the risks of morbidity and mortality associated with transfusion are so great that no transfusion should be given until it is decided that it is absolutely necessary, and then only with the utmost care." (page 478)

This does not mean transfusion should cease, nor does the article state this. Indeed, the article opens with reference to a previous article by the same author in which he describes "the indications for transfusion of blood and blood components." (Journal page 476)

Recognition of dangers provides better protection, no matter what the endeavour. All medical processes are fraught with danger, yet this is no reason for not proceeding with them. The WTS accepts the dangers associated with medical processes, including those that are identical with transfusions.

Those components of blood the WTS does accept, such as Factor 8 for haemophiliacs, are more susceptible to dangers than those components of blood it rejects:

"Albumin and plasma protein fraction. . . carry no risk of causing hepatitis. However, all other blood components carry a risk. The risk with some components is greater than with others. Any component made from pools of plasma (eg, commercial concentrates of coagulation factors VIII or IX) carry a much greater risk." (Journal, pages 477-478)

THE GIFT RELATIONSHIP by Richard Titmuss (QB page 44, ref.60; page 46, ref.67)

(In the UK, Australia, New Zealand and Canada, this book was published by Pelican. The reference to page 142 at Reference number 60 [QB page 44] appears at page 160 of the Pelican edition and the QB booklet's reference to page 147 [QB page 46, ref.67] appears at page 166 of the edition published by Pelican. Page numbering of the original George Allen & Unwin edition cited by the WTS is given in this Study.)

Both references in the QB booklet to The Gift Relationship refer to the serum hepatitis problem. This problem is a real concern to all involved with Blood Transfusion. But the QB booklet fails to present a balanced report of the book's statements.

The booklet cites page 142 of The Gift Relationship in support of its statement:

"you can contract (serum hepatitis) from as little as one millionth of a milliliter of infected blood." (QB page 44)

The Chapter of The Gift Relationship cited ("Is The Gift A Good One?", pages 142--157) concentrates on serum hepatitis. It presents a serious indictment of the commercial supply of blood.

Reflecting the state of knowledge at the time of publication (1970), the book introduces the then unproven screening agent of Australian Antigen (page 142, footnote). It provides U.S. estimates of an annual death rate of from 3,500 to 10,000 due to post-transfusion hepatitis. Studies presented in that

Chapter show that transmission of diseases is minimal where purely voluntary sources of blood are employed and when that blood is far more plentiful.

STATEMENTS DISREGARDED

The WTS ignored several significant statements in The Gift Relationship. In doing so, it failed to provide its readers the balance they deserve. Referring to serum hepatitis, the book does present a balanced view

"The development of homologous serum hepatitis is a hazard which besets rather less than 1 per cent of recipients of whole blood or small-pool plasma. . .

"Recipients vary in their susceptibility. It has been found that a minute fraction of a millilitre of virus-laden blood was enough to cause hepatitis and it was for this reason that the production of large-pool plasma. . . was abandoned in favour of limited pools . . .

"Some patients suffer no upset from the transmitted virus, some may have only a transient liver dysfunction with or without jaundice and yet others may develop a rapidly fatal hepatic necrosis." (pages 25-26)

SERUM HEPATITIS UNCOMMON IN BRITAIN

The above present the British experience, where 99% of donations are given voluntarily, compared to 7% in the United States. This is why, states The Gift Relationship, in Britain:

"In no case has the incidence (of hepatitis) been shown to be higher than 1% and in the most recent study (from Birmingham) it was nil. . .

"A study published in 1970 concluded that serum hepatitis is 'an uncommon disease' in Great Britain." (page 154, footnote)

COMMERCIAL DONORS

The Gift Relationship shows the situation is critical in countries where donors receive payment for their blood, as in the United States and Japan. Here the problem stems from the poor quality of the donor, who is most often of a class susceptible to being a carrier of hepatitis, such as prisoners, narcotics users (having been infected from needles used in the self-administration of their drugs) and alcoholics.

Statements appearing in the Chapter of The Gift Relationship that the QB booklet refers to include

"One of the main keys to preventing hepatitis after transfusion . . . was in the careful checking of the source of the blood . . .

"No matter what method of case finding was used, the lowest incidence of post-transfusion hepatitis was seen when commercially supplied avoided . . .

"The risk of serum hepatitis from transfusions derived from prison and Skid Row populations is at least ten times that from the use of voluntary donors.

"The risk of hepatitis 'developing in recipients of blood known to have been donated by convicted or suspected narcotics was 70 times that in the controls' . . .

"The only answer, according to other authorities, is to 'eliminate the professional donor entirely'." (pages 146, 147, 152)

THE PROBLEM

The problem does not lie with the principle of blood transfusion but in the human factor, where drug users, for example, sell their blood for money to buy more drugs. Such sources represent a public health hazard. Such hazards are minimised when donations are made purely voluntarily. There is a difference between donated blood and commercially supplied blood.

"There are more deaths caused by the use of blood from paid donors than from the use of blood from volunteer donors." (The Gift Relationship, page 152)

OTHER STATEMENTS DISREGARDED

Significant statements in The Gift Relationship have been completely disregarded by the QB booklet.

For example:

"The Uniqueness of Blood. Despite the development of plasma substitutes and other products, advances in the freezing and preservation of blood to permit longer-term stockpiling, and the use of specific blood components, there is no substitute for the vast majority of patients for the direct use of fresh whole human blood. No alternative to whole blood and its main component elements has yet been developed in the research laboratory. The human body remains the only source." (pages 20-21)

"The transfer of blood and blood derivatives from one human being to another represents one of the greatest therapeutic instruments in the hands of modern medicine. It has made possible the saving of life on a scale undreamt of several decades ago and for conditions which would have been considered hopeless." (page 27)

"'In medicine there is no substitute for human blood'." (page 31)

In his book, author Richard Titmuss uses the topic of blood transfusion as a means for discussing social policy and social attitudes. His comments are pertinent to this present Study:

"In all cultures and societies, blood has been regarded as a vital, and often magical, life-sustaining fluid, marking all important events in life, marriage, birth, initiation and death. . . . Symbolically and functionally, blood is deeply embedded in religious doctrine. . . . From time immemorial it has symbolized qualities of fortitude, vigour, nobility, purity and fertility. Men have been terrified by the sight of blood; they have killed each other for it; believed it could work miracles. . . .

"The very thought of blood, individual blood, touches the deepest feelings in man about life and death. . . . Even in modern times, mystical and irrational group attitudes to blood have sharply distinguished certain Western societies -- as in Hitler's Germany with its myths of 'Aryan' and 'Jewish' blood." (pages 15-16)

SCANDINAVIAN JOURNAL OF INFECTIOUS DISEASES, Vol.6, 1974 (QB page 46, ref. 65)

AN INCORRECT FIGURE

The QB booklet claims this Journal reports that:

"about 10 to 12 per cent of those contracting serum hepatitis from transfusions die as a result." (page 46)

Actually the Journal really says. "about 10%". It does not say "about 10 to 12 per cent":

"The lethality in post-transfusion hepatitis is about 10% in most studies."
(page 286)

The Journal continues (but QB does not):

"This is an unusually high lethality for acute hepatitis. However, the disease will most often attack patients in a poor general condition on account of disabling diseases. The long-term prognosis of the disease is good in most cases." (pages 286-287)

A BALANCED VIEW WITHHELD

Other statements in the Scandinavian Journal present a balanced view of the problem. The QB did not give these other statements, but chose to ignore them, failing to present the "advantages" as well as the "disadvantages". The Journal states, at the same context referred to by the QB booklet:

"Transfusion hepatitis is still a very small part of the total epidemiological problem of acute hepatitis in a population. Recent German reports have estimated that only about 3% of the total number of patients with acute hepatitis had received blood or blood products. . .

"Voluntary donors cause considerably less transfusion hepatitis than the paid donors. . .

"More than 30,000 cases occur every year in the USA with a mortality of several thousands. In Japan . . . the problem is tremendous, while in Denmark, for instance, only 40 cases have occurred after 200,000 transfusions per year." (pages 286-287, see also pages 288-289 and the Tables)

The article in the Journal concludes:

"By far the best donors are the voluntary donors and particularly those who persistently donate their blood and thus serve as their own safety control."
(page 289)

HEMATOLOGY, Prof. J.W. Linman, (QB pages 43-44, ref.58; page 46, ref.66; page 48, ref.73; page 50, ref.80)

At several occasions, the QB booklet refers to this book as authoritative. On page 43 the booklet reproduces the Table that appears on page 991 of Linman's book. However, the booklet fails to reproduce the words that accompany this Table. Those words present a balanced picture of the situation, and explain the Table:

"When properly indicated, the benefits of transfusions far outweigh the risk of undesirable side effects . . .

"Fortunately most complications are relatively mild; but some are fatal. Available data suggest a mortality of about one death in 5,000 transfusions; however this figure is most likely too high." (pages 990-991)

The booklet by the WTS does not present this balanced view.

FEBRILE REACTIONS: FACTS WITHHELD

Page 44 of the QB booklet quotes from Linman's book respecting Febrile Reactions. The booklet quotes one sentence from the book that refers to "severe febrile reactions . . . in certain acutely ill patients"; these are extreme conditions.

To be fair and to show all aspects, the QB booklet should have quoted the preceding sentence. It reads:

"Most of these (febrile) reactions are mild, and slight fever may be missed if serial temperatures are not obtained." (Hematology page 991)

Febrile reactions can also occur when non-blood solutions are used to replace blood loss: The Journal of the Medical Association, Feb 5, 1968, page 400; see QB pages 55,57; refs 96,103.

The QB booklet presents the serious situation of serum hepatitis but it fails to disclose the sentence in Hematology that follows the one it does quote:

"Human gamma globulin . . . is the only available means of modifying the disease." (Hematology, page 994)

That is, febrile reactions can be treated -- and the benefits of transfusions outweigh the risks (see Hematology, page 990).

GROSS BACTERIAL CONTAMINATION: THE FACTS

Page 48 of the QB booklet refers to the "gross bacterial contamination of blood". It states quite simplistically: "certain types of bacteria can multiply in chilled blood", giving as its reference page 995 of Hematology to indicate this and the "grave threats" these pose.

There is no denying these facts but the QB booklet has not given a balanced picture. This same book, Hematology, states that, using sterile containers and prompt refrigeration,

"there is little possibility of contamination with the common bacterial pathogens."

This sentence immediately precedes those cited by the WTS. The book Hematology continues:

"Modern blood bank methods make gross bacterial contamination an unlikely occurrence." (page 995)

RISKS IN MANY MEDICAL PROCEDURES

There are risks in transfusions, but the benefits outweigh the risks when the need for a transfusion is clearly indicated. Risks exist with other medical procedures such as operations and the administration of drugs and medicines, particularly those that are self-prescribed, such as Aspirin.

HANDLING MEDICAL EVIDENCE

The book God, Blood and Society, which is cited in the booklet at Reference 40 (page 36) as authoritative, states:

"The fact that the practice of blood transfusion can be abused does not ipso facto make the practice as such undesirable, as the Jehovah's Witnesses suggest." (page 42)

The existence of risks does not preclude the acceptance of medical procedures. The WTS accepts risks when it permits medical processes and when it accepts the use of some blood components.

Concerning the risks from treatment in a large Australian hospital, a survey showed errors in the administration of drugs to be as high as 13% (Melbourne Herald, Dec. 29, 1978, page 5). Would the WTS categorically state that the administration of all drugs should therefore cease? Would the WTS suggest that since more than 10,000 persons died in 1978 in the United States while undergoing unnecessary operations (Melbourne Herald, op.cit.), that no operations should be performed?

REASONS FOR TRANSFUSIONS

The final reference to Hematology appears at page 50 of the QB booklet (reference 80). The quotation is used with the intent of indicating that:

"Blood is not a tonic or a stimulant. . . A transfusion serves only to augment total blood volume, to enhance the oxygen-carrying capacity of the blood, and as a source of normal plasma constituents such as platelets and coagulant factors." (page 985).

The quote in the QB booklet omits all the words emphasised, presumably because the WTS permits the use of blood plasma constituents for those purposes cited, such as Factor 8 for haemophiliacs. The sentences in Haematology immediately preceding the sentence quoted by the WTS provides the context:

"Insofar as possible only that component (or components) of blood that is deficient should be given. For example, a person who has a chronic anemia lacks red cells not plasma, a patient with a coagulation factor deficiency needs plasma not red cells, and an individual with acute hemorrhage ordinarily requires whole blood. Blood is not a tonic or a stimulant; it will not promote wound healing or suppress an infection. . . (etc., as related in the QB booklet, page 50)." (Hematology, page 985)

The QB booklet attacks the two issues of "augmenting total blood volume" (page 50) and "enhancing the oxygen-carrying capacity of blood" page 51.

In a carefully presented analysis, in which he states "one cannot set fort guidelines for transfusion therapy applicable in all cases", Linman gives "the basic indications for a blood transfusion" on this same page of his book. The WTS did not care to consider Linman's reasoning in full, nor did it provide the list of "basic indications":

"The basic indications for a blood transfusion are (1) to increase blood volume when hypovolemia consequent to acute blood loss threatens the integrity of the circulatory system, (2) to increase the oxygen-carrying capacity of the blood to prevent serious tissue hypoxia, (3) to supply deficient plasma factors in patients with certain coagulation abnormalities, (4) to remove deleterious materials from the blood (e.g., exchange transfusions in infants with erythroblastosis fetalis), and (5) to prime an artificial kidney or heart-lung machine." (page 985)

The QB booklet attempts to belittle the evidence given by Linman in his book, by calling in apparently contradictory evidence from other medical sources. However, the booklet fails to reveal that in the immediate context, the book clearly states there is an efficient physiological mechanism to maintain adequate blood and oxygen supplies to vital organs when there is a reduction in blood volume or haemoglobin (Hematology page 985). The book continues, that in the light of all the facts:

"blood transfusions are needed in patients with acute haemorrhagic anaemia only when shock is present. Shock resulting from causes other than acute haemorrhage is better treated with plasma or other volume expanders." (page 985)

Four rules are then given in the book regarding transfusion for anaemia:

The issue is not as simplistic as the QB booklet attempts to make out. If the issue is so complex that "medical authorities emphasise that at best they can say only what seems likely to happen," (QB, page 37, emphasis in original) how much more in the dark is a biased publication produced by non-experts! And how much more in the dark are those who only read what the biased publication is prepared to reveal to them!

**THE AMERICAN JOURNAL OF THE MEDICAL SCIENCES, Sept-Oct, 1975,
pages 276,281, (QB page 45, ref.64)**

On page 45, the QB booklet cites this source to justify a figure of more than 200,000 cases of post-transfusion hepatitis annually in the United States

"Information provided by the government's Center for Disease Control points to a conservative figure for hepatitis B cases as being 200,000 or more annually." (QB page 45)

Unfortunately, nowhere in the entire article could such a statement be found, nor that this figure is given. This figure may be correct, and the article in the Journal does highlight the serious situation regarding viral hepatitis, but this seems to be misleading reporting.

The QB booklet does not reveal that the article in Journal points to four sources of hepatitis A and B

- Blood/blood product transfusion
- Raw shellfish ingestion
- Parenteral drug abuse
- Personal contact.

The article features "the rise in parenteral (i.e. not through the intestinal system) drug abuse in persons 15-29 years of age" as playing a major role in viral hepatitis (page 281).

The discovery in 1965 of the screening agent Australia antigenb (HBs Ag) and its subsequent use has made the gathering of statistical analysis more accurate. For example:

"Previously it had been assumed that case fatality rates among hepatitis B (i.e. viral hepatitis) patients were at least ten times as high as those for hepatitis A. However, case fatality rates for patients in the surveillance program were essentially the same." (The American Journal of the Medical Sciences, Sept-Oct, 1975, page 281)

There is no doubt that viral hepatitis is a serious major health concern, and that the transfusion of blood and blood products is one cause, but the WTS is not justified in claiming this article refers to 200,000 cases annually in the United States. Further, the WTS is not frank and open, since it fails to tell its readers that transfusions are only one of four causes of the disease.

ANAESTHESIA, July 1968: Pages 395-6 (QB page 51, ref.82)

Page 413 (QB page 52, ref.84)

Page 416 (QB page 54, ref.95)

Pages 418-9 (QB pages 53-4, ref.91)

On pages 50 to 54 of its QB booklet, the WTS quotes extensively from the British periodical Anaesthesia to answer several questions that it poses.

On Page 50, the Watchtower Society poses the Question:

"If a patient has lost a great deal of blood . . . is the view that there is no alternative to blood a reasonable one?"

The Society then cites the three reasons for a Blood Transfusion given by Professor Linman on page 985 in his book, Hematology:

- to augment total blood volume
- to enhance the oxygen-carrying capacity of the blood
- as a source of normal plasma constituents.

Over the following pages of its booklet, the QB considers each of these reasons.

CONTEXTS OF LINMAN AND ANAESTHESIA ARE DIFFERENT

In Anaesthesia the articles are concerned with a particular condition -- "difficult situation(s)" (July 1968, page 395) . . . "disaster situations" (page 413):

"A major disaster to a 'Jumbo jet' or an 'Air-bus' (which) might give rise to four or five hundred burn or trauma cases and, in a nuclear disaster or in an earthquake there might be many thousands of casualties, any of which might require fluid replacement amounting to 15 to 30 litres in 48 hours." (page 413)

The book by Linman does not concern itself with that situation, and states:

"one cannot set forth guidelines for transfusion therapy applicable in all cases." (Hematology page 985)

Anaesthesia concurs there is a lack of hard and fast rules:

"The experts differ as to the nature of the fluids to be used (in the severely burnt casualty) and, in certain situations the choice will naturally be dictated by the fluid which is available." (July 1968, page 397)

The periodical explicitly states, within the context of the passages cited by the WTS, that it is considering unsophisticated surroundings in difficult situations, not those encountered in the controlled situation of a hospital (Anaesthesia, page 395).

'FIRST REASON' FOR A BLOOD TRANSFUSION: TO AUGMENT TOTAL BLOOD VOLUME

Under the first reason for a Blood Transfusion, namely "to augment total blood volume", page 51 of the QB booklet cites Anaesthesia, July 1968, pages 395, 396

"It is doubtful if (whole blood) is the fluid of choice for the initial treatment for the rapid transfusion of grossly hypovolaemic patients [those who have lost much blood]"

The passage from Anaesthesia cited by the WTS thus relates to:

- the "rapid transfusion" of whole blood
- for the "initial treatment"
- of those who have lost "much blood".

Careful reading of the sentence in the original article shows that it continues, after only a semicolon, with a reference to Crocker, who had just been shown to be referring to "isolated and emergency situations" (ref. 12. -- Crocker, M.C. [1968]. Fluids for emergency conditions. A review with special reference to disaster conditions. Anaesthesia, 23, 413).

Further, the WTS fails to reveal that the context of the sentence refers to "peripheral stagnation". The initial, primary objective of a transfusion under this circumstance is to increase the availability of fluid. Whole blood is not the most effective medium for achieving this under the conditions depicted by the article.

In addition, when page 51 of the QB booklet states that Anaesthesia speaks of "dramatic improvement", it fails to tell its readers that the periodical is speaking specifically of one aspect only - "peripheral circulation" (page 396).

BOOKLET IS HIGHLY SELECTIVE

Not only does the QB booklet fail to tell its readers the total context of the statements it quotes, but it fails to tell what else the periodical states within the context of the passage it cites. For example, when it speaks of burns, Anaesthesia states:

"The bulk of the fluid (lost) is plasma . . . certainly if the burn exceeds 25% of the surface area, blood should be given in addition to other fluids)." (page 394, emphasis supplied).

"In an emergency up to 2000ml (of Swedish type dextran) may be given if blood is not immediately available . . .

"In summary the majority of routine replacement transfusions at elective surgery can be conducted with dextran in saline solution alone; in the emergency situation, where the loss is greater than 1500 to 2000ml, the initial use of dextran will effectively delay the need for whole blood until the casualty can be transported to a more sophisticated location where proper facilities for blood transfusion are available. Chronic anaemia or hypoproteinaemia will limit the amount of dextran that can be used without the addition of blood or plasma". (page 396)

This last sentence forms the summary to the passage cited by the WTS at page 51 of its booklet. The periodical Anaesthesia continues:

"In an emergency any fluid is better than no fluid" (page 396)

Referring to "the severely burnt casualty", the periodical advises:

"The experts differ as to the nature of the fluid to be used . . . Where the burn exceeds 25%, blood is also required in the approximate proportion of 2 dextran to 1 blood." (page 397)

The article in Anaesthesia concludes:

"In general, far more patients suffer from lack of fluid than from overtransfusion". (page 409)

SECOND REASON FOR A TRANSFUSION: TO ENHANCE THE OXYGEN-CARRYING CAPACITY OF THE BLOOD

Referring to the second reason for a Blood Transfusion, as given in the passage from Linman ("to enhance the oxygen-carrying capacity of the blood"), the WTS admits that:

"alternative solutions are not really 'blood substitutes'. Why not? Because the hemoglobin of the red cells delivers oxygen throughout the body. Nonblood solutions do not contain this (hemoglobin)." (page 51)

"The medical profession prefers the term 'plasma substitutes' to 'blood substitutes' because none of these substitutes are able to supply the blood with oxygen as can blood." (Awake July 22, 1965, page 11)

Then on pages 52 and 53 of its QB booklet, the WTS endeavours to belittle the oxygen-carrying benefits of the blood as given in a Transfusion. It first discusses acceptable haemoglobin levels, following which it presents an argument to show that a transfusion is not effective in enhancing the blood's oxygen-carrying capacity.

HAEMOGLOBIN LEVELS

At page 52 of the QB booklet (reference 84), the WTS refers to the acceptable safe lower value of haemoglobin. The periodical Anaesthesia is quoted to provide a figure of "10.3 to 10.5 grams (per

100 ml)". The booklet then attempts to belittle this figure through referring to several other sources. This is done to show that Jehovah's Witnesses are able to tolerate "very low hemoglobin levels that formerly would have been considered as forbidden" (QB, pages 52-53). The WTS wishes to allay the fears of Witnesses, advising them not to be concerned if their haemoglobin level drops to a figure below that which has been determined as 'normal'.

However, there was no need to attempt to belittle article in Anaesthesia, since it continues:

"In less favourable circumstances a much lower haemoglobin level must be accepted. This applies not only in an emergency where blood is not available but also in conditions where patients suffer from chronic diseases such as malnutrition, parasitic diseases, blood disorders or chronic renal failure." (page 413)

Indeed, the article in Anaesthesia clearly states

"It is difficult to define the minimum acceptable haemoglobin level. Chronically anaemic patients (those with pernicious anaemia for example) survive, though somewhat disabled, with levels down to 4g per 100ml or less." (page 414)

Anaesthesia continues, saying that in a test with cats, dogs and rabbits, the animals died when the haemoglobin level fell to 3g per 100ml (page 414). (Ringer solution containing haemoglobin was used to replace the blood).

The article in Anaesthesia concludes:

"It is certainly always worth while attempting to maintain life by using other fluids to maintain the circulatory volume in the hope that the necessary supply of blood will become available in due course." (page 414)

There was no need for the WTS to attack Anaesthesia's figure of 10.3 to 10.5. A carefully balanced presentation of the context would have shown the full picture. The WTS appears unable to consider evidence from an objective view, but approaches the subject from the preconceived conclusion of advising Witnesses not to be concerned about their haemoglobin levels.

The WTS booklet plays with people's lives by withholding facts and misrepresenting authorities. The booklet it has produced tells its readers only as much as the WTS wants them to know. The image is of a bull trampling a field of lilies, caring not who or what it bruises. The WTS may have a prejudiced opinion but this does not give it license to behave as it does.

Thus the booklet does not quote sentences as:

"Provided blood loss is kept to a minimum and replaced . . . surgery is often tolerated surprisingly well." (Anaesthesia, July 1968, page 414, emphasis supplied)

OXYGEN-CARRYING CAPACITY

On page 53 of its booklet, the WTS poses the question:

"Will a transfusion immediately enhance the blood's oxygen-carrying capacity?"

The QB booklet then cites Anaesthesia (Reference 89) to show that the administration of blood does not "immediately enhance the blood's oxygen-carrying capacity".

"The haemoglobin of stored, citrated red cells is not fully available for the transfer of oxygen to the tissues for some 24 hours after transfusion . . . Rapid blood transfusion must therefore be regarded as a mere volume expander in the initial stages"

The WTS is using the periodical Anaesthesia to try and weaken the presentation by Linman's book Hematology. The QB booklet correctly quotes Linman as saying blood enhances the oxygen-carrying

capacity of the blood while Anaesthesia appears to deny this. The statement in Anaesthesia, however, is simply stating that it takes some 24 hours for the haemoglobin to be FULLY available from transfused stored, citrated blood, and that RAPID transfusions must PRIMARILY (not completely) be regarded as a volume expander in the INITIAL stages.

The balance of the paragraph in Anaesthesia, which is not quoted by the QB booklet, reads:

"There is, therefore, much to be said for using other plasma expanders for blood replacement during ELECTIVE operations to replace brisk moderate loss and to reserve whole blood for more leisurely administration in the post-operative period should this be necessary." (Anaesthesia March 1975, page 150. Only the word "during" is emphasised in the original)

On this topic, Anaesthesia notes:

"In the absence of blood, fluid replacement will not increase oxygen-carrying capacity." (July 1968, page 416)

THIRD REASON FOR A BLOOD TRANSFUSION: AS A SOURCE OF NORMAL PLASMA CONSTITUENTS

Without explicitly telling its readers that it is considering the third reason for a Blood Transfusion as given by Linman ("as a source of normal plasma constituents"), the WTS, on pages 53 and 54 of its QB booklet, discusses the merits of plasma expanders. The booklet asks:

"What are some of the nonblood fluids used as alternatives to blood transfusions? Are they being used effectively? What are their advantages?" (QB, page 53)

To the first question, the WTS answers with a list including saline solution, Ringer's lactate, dextran, and so on.

REFERENCE 91

The WTS claims, on pages 53 and 54 of its QB booklet, that Anaesthesia (reference 91) states:

"simple saline solution (0.9%) . . . is chemically compatible with human blood."

The cited reference (pages 418-9 of Anaesthesia) makes no such statement. What Anaesthesia DOES say is:

"0.9% normal saline is useful in small quantities, but . . . the gross quantities which may be required for burn therapy . . . may lead to excessive serum chloride levels. In addition the solution has, of course, no calcium or potassium, both of which may become low in large volume transfusions." (page 419, emphasis in original)

"Excessive use of salt solutions can lead to an overload of the circulatory and tissue spaces with resultant oedema." (page 417)

REFERENCE 95

The passage from Anaesthesia which is given on page 54 of the QB booklet as Reference 95 (July 1968, page 416), continues with:

"In the absence of blood, fluid replacement will not increase oxygen-carrying capacity." (Anaesthesia July 1968, page 416)

It must be noted that, in the context, these statements in Anaesthesia all refer to a very limited application -- the very initial stage. Subsequent requirements may fully warrant the use of blood or blood products, says the article:

"In the initial period Ringer lactate solution is probably the most useful generally available or locally manufacturable fluid. . . Once the immediate restorative measures have been taken whole blood and colloids must be given when they are or become available." (Anaesthesia July 1968, page 421)

The article in Anaesthesia also notes some interesting facts regarding Dextran, which are inert plasma substitutes. (There are no substitutes for blood. These products act as expanders, increasing the mobility of the red cells, thereby increasing the amount of oxygen available to the body).

"The original high molecular weight dextrans will hold fluid in the vascular compartment for 24 to 48 hours, but the lower molecular weight dextrans are more rapidly excreted and hence expand the vascular space for shorter periods . . .

"Dextrans should not be used in grossly dehydrated persons . . .

"In the absence of blood, dextrans are not usually given in quantities exceeding 1500ml in the adult. Transfusions exceeding 1ml/kg per minute. . . tend to produce bleeding tendencies.

"Dextrans are relatively expensive compared with saline solutions."
(Anaesthesia July 1968, page 421)

**ANNALS OF THE NEW YORK ACADEMY OF SCIENCES, January 20, 1975,
page 191 (QB page 45, ref. 63)**

On page 45, the QB booklet quotes this article from Annals of the New York Academy of Sciences to give a figure of "1,500 to 3,000 deaths" annually from post transfusion hepatitis (reference 63).

To be correct, the figure is not given as "1,500 to 3,000" anywhere in the article. The actual wording is "about 1,500". This is not to say that 1,500 deaths are not a problem. It is. But when there is no need to be dishonest to make a point, why do it? Does this indicate an underlying unhealthy attitude?

The succeeding reference in the QB booklet (reference number 64: The American Journal of the Medical Sciences) supposedly refers to a figure of 200,000 cases. However that article says no such thing. When these instances are coupled, there must be a serious doubt about the objectivity, balance and honesty of the WTS and its QB booklet.

The article in The American Journal of the Medical Sciences addresses itself to the problem of Blood-Transmitted Hepatitis, which is significant in countries dependent upon commercial donors, such as the United States. In considering this, the article in The American Journal of the Medical Sciences comments on:

"the dramatic reduction in (the) incidence of post-transfusion hepatitis that could be achieved by use of volunteer sources of donor blood." (Annals of the New York Academy of Sciences, January 20, 1975, page 194)

One case study of commercially supplied blood is reported as presenting:

"4.1 hepatitis cases/100 patients transfused; in striking contrast, those transfused with volunteer blood had an attack rate of only 0.7/100 patients." (Annals of the New York Academy of Sciences, January 20, 1975, page 194)

In another study there was a reduction from 15 per 1,000 patients to 3.7 per 1,000. (Annals of the New York Academy of Sciences, January 20, 1975, page 195)

MAYO CLINIC PROCEEDINGS, November 1976, page 725 (QB page 49, footnote, ref. 77)

At the Footnote of page 49, the QB booklet cites this article appearing in Mayo Clinic Proceedings to show that a person's red cell production may be built up by iron therapy:

"By means of iron therapy, red-cell production can be increased to two to four times the normal rate." (QB page 49 footnote; reference to: Mayo Clinic Proceedings, Nov. 1976, page 725)

To be precise, the figures given in the article are "two to three times normal" with oral iron administration, and "three to four times" the normal during the first two weeks of parenteral (that is, by injection) iron therapy, although it returns to two to three times thereafter (Mayo Clinic Proceedings, Nov. 1976, page 725)

"However the dangers of parenteral iron make this form of iron supplementation undesirable." (Mayo Clinic Proceedings November 1976, page 725)

The QB booklet omitted to mention that this increase occurred while the patient was:

"(being) bled 500 to 1000 ml/week . . . since marrow stimulation (the red cells are produced in the marrow) does not begin until the surgical loss occurs." (Mayo Clinic Proceedings, November 1976, page 725)

Furthermore, the sentence in Mayo Clinic proceedings that is referred to by the QB booklet specifically states:

"With oral iron administration, the marrow can increase production to two to three times normal IN RESPONSE TO BLOOD LOSS." (Mayo Clinic Proceedings, November 1976, page 725, emphasis supplied)

In addition, the article says:

"These results imply additional benefits of pre-operative autologous transfusion." (Mayo Clinic Proceedings, November 1976, page 725)

The article is thus stating that there are more advantages when the patient receives transfusions of his own stored blood. This is the thrust of the section of the article that the QB booklet is referring to. It is improper for the QB booklet to suggest it was simply a matter of "iron therapy". The technique included bleeding the patient and involved the principle of autologous transfusion of the patient's blood.

THE JOURNAL OF THE AMERICAN MEDICAL ASSOCIATION, April 12, 1976, page 1611 (QB page 40, ref. 49)

At page 40, the QB booklet quotes this article from The Journal of the American Medical Associations (JAMA) in the context that blood is extremely complex tissue that varies from person to person, which has a significant bearing on blood transfusion.

Rather than this being an argument against the principle of blood transfusion, it is presented by the article in JAMA as an argument for the principle of autologous transfusion,

"that is, blood (is) removed from an individual and subsequently reinfused into that same individual." (JAMA April 12, 1976, page 1611)

The whole intent of this article in JAMA is to demonstrate that most of the dangers of receiving blood from another person (homologous transfusion) are eliminated by collecting the patient's own blood before any elective surgery is undertaken and using that blood exclusively for the patient's needs, or along with blood from other donors. When ferrous gluconate is given before blood is drawn (phlebotomy) there is a negligible drop of haemoglobin, even if up to four units of blood are taken in a three-week period.

Statements from these reputable sources show their care and responsibility. They normally provide solutions to an observed problem. It is possible to imagine that a non-scientific mind, perhaps one that is quite distrustful of science and scientists, would demonstrate unquestioning reliance on the simplistic, although quite erroneous and mischievous, utterances coming to them from God's "sole representative on this earth".

The statement from JAMA quoted in the QB booklet ("that there is less than 1 in 100,000 chance" of having identical blood) is not as significant as the QB booklet wishes to make out. The JAMA article continues, stating that when this factor is combined with the difficulty of screening diseases and with human error:

"4% to 6% of patients receiving transfusions have some type of serious adverse reaction, most of which can be eliminated by the use of autologous blood." (JAMA, April 12, 1976, page 1611)

The JAMA article concludes:

"It is the patient's right to know and the physician's responsibility to inform him that safe blood for transfusion is available from a readily accessible source." (JAMA April 12, 1976, page 1612)

It is the WTS's responsibility to inform its readers like-wise.

THE JOURNAL OF THE AMERICAN MEDICAL ASSOCIATION, March 29, 1971, page 2077 (QB page 54, ref.92)

This article from JAMA is cited by the QB booklet (page 54, reference 92) as describing the "successful" treatment with Ringer's Lactate of patients who "have lost up to 66 per cent of the fluid volume of their blood" (QB page 54). All thirteen patients discussed in the JAMA article were Jehovah's Witnesses. The "successful" treatment resulted in three of the thirteen dying -- a mortality rate of 23%. (JAMA March 29, 1971, page 2080)

"Their demise appeared to reflect the nature of their disease, the trauma of the surgical procedure, and the response to the fluid resuscitative regimen." (JAMA March 29, 1971, page 2080)

Additionally, the average hospital stay was prolonged 3-4 days (JAMA March 29, 1971, Pages 2077, 2082 Table 2). It is not correct for the QB booklet to state treatment was "successful" for patients who had lost "up to 66 per cent of fluid volume", since the one patient who lost that amount died two days after her operation. The other women who died lost about 43% of blood volume each.

It must not be construed that this success rate may be achieved normally, since the procedures described "in many ways, extremes of clinical practice." (JAMA March 29, 1971, page 2077)

Other interesting information cited in the article include:

1. Three to five times the amount of the blood lost was replaced, with an average of 16% retained in the circulatory system.
2. 20% to 60% of blood volume loss was replenished because of the large volume of liquid administered.
3. Most of the administered fluid went to spaces outside the blood vessels.
4. Replenishment of red blood cells was "sluggish, regardless of various hemanitic preparations employed." (JAMA March 29, 1971, page 2082)

**THE JOURNAL OF THE AMERICAN MEDICAL ASSOCIATION, February 5, 1968,
Pages 399, 401 (QB: page 55, ref. 96; page 57, ref. 103)**

Both references to this article from JAMA that appear in the QB booklet (page 55, reference 96 and page 57, reference 103), appear in the context of the use of non-blood fluids in the conduct of "all major types of operation" (QB page 54). However, the JAMA article states that all operations were not conducted; for example, there was no open-heart surgery (JAMA February 5, 1968, page 400).

There is no doubt non-blood solutions are under-prescribed and under-used. This does not mean, however, that it is possible to eliminate the need for blood in many cases. Often it is the sole viable product. Of the 100 patients under review in this JAMA article, "four . . . required subsequent transfusions postoperatively" (JAMA March 29, 1971, page 399).

The JAMA article does not give unqualified support for the elimination of blood. For example, children less than 15 years old were not represented (because blood losses of more than 1 litre represented a larger proportionate blood loss) and all had a hemacrit reading of 30% or more. (In the JAMA article of March 29, 1971, page 2080 (QB reference 92, discussed previously), the patients had hemacrit readings down to 15%). The greatest blood loss group ranged from 1000 ml to 1500 ml.

There were 22 complications, "ranging from mild to severe", and one patient died (JAMA February 5, 1968, page 400). In fairness, it must be reported that the article showed the patients' recoveries were normal and hospitalisation was not extended by the regimen.

Undoubtedly, plasma substitutes (there are no "blood" substitutes) and expanders are the favoured form of fluid replacement in some circumstances, many in which doctors are presently using blood. But it does not follow that blood is thereby excluded as a viable and at times the sole means of treatment. The only valid conclusion that may be drawn is that the needless prescription of blood could be reduced, reserving it for those tasks where it is the only product that may be called upon.

THE WTS's HANDLING

As should be expected, the WTS's mishandling of the medical issues is consistent with its method of handling all other issues. Whether in its interpretation of Scripture, its reading of history or its relaying of plain facts, the WTS's path to the conclusion is twisted and strewn with misinformation and misinterpretation. It considers the ends as paramount. The WTS's prejudices colour its presentation. The predetermined conclusion prevented fair, open and honest handling of the evidences.

Playing on fears, prejudices and biases, the WTS pays scant regard for proper reasoning. It has its eyes set on the conclusion before it conducts its enquiry. In truth, the opposite process must be adopted, wherein serious unfettered enquiry leads to the conclusion, no matter how distasteful or unforeseen that may be.

Little wonder the WTS consistently and strongly discourages its followers from conducting their own study or investigation. It has much to fear. In the end, this speaks volumes on their calls for integrity in all things, for honesty in all dealings.