

# ***The Prolongevists Speak Up: The Life-Extension Ethics Session at the 10th Annual Congress of the International Association of Biomedical Gerontology***

John K. Davis, University of Tennessee

Life-extension was the focus for the 10th annual Congress of the International Association of Biomedical Gerontology, held last September at Cambridge University. This scientific convention included a panel of several bioethicists, including Art Caplan, John Harris, and others. The presentations on the ethics of life-extension are reviewed here.

Life-extension was the theme of the 10th annual Congress of the International Association of Biomedical Gerontology, (“Strategies for Engineered Negligible Senescence: Reasons Why Genuine Control of Aging May Be Foreseeable”), held on 19–23 September 2003 at Cambridge University, and organized by Aubrey de Grey of the Cambridge University Department of Genetics. Several speakers—John Harris, Arthur Caplan, Steven N. Austad, Jay Olshansky, Gregory Stock, and John Davis—addressed various ethical issues raised by the prospect of slowing aging and extending the human lifespan. Audio files for these talks are available from: <http://www.gen.cam.ac.uk/iabg10/>.

Although life-extension ethics is very new, certain issues and lines of argument are beginning to take shape, and the speakers often addressed similar issues in similar ways. All the speakers fell within the “prolongevist” camp, defending life-extension against various moral objections. Most of the speakers addressed particular issues; John Harris provided an overview and framework for discussion.

Some of the issues Harris discussed were also addressed by other speakers: whether developing life-extension is unjust if not everyone can get it (addressed by Davis), whether developing life-extension will cause a Malthusian crisis (addressed by Olshansky and Stock), whether life-extension is an unavoidable byproduct of the project of

eliminating the debilitating conditions of old age (addressed by Austad), and whether life-extension should be avoided on the grounds that it is an affront to the natural order and an evasion of the blessings of mortality (addressed by Caplan).

In particular, Harris argued that we cannot and should not seek to prevent the development of parallel populations of mortals and immortals, anymore than we should deny kidney transplants because there are not enough kidneys to go around—in other words, we should develop life-extension even if we cannot provide it to everyone (a conclusion Davis argued for separately). Like Austad, Harris argued that life-extension may be the side-effect of seeking a cure for age-related diseases. He also addressed the objection that halting or reversing aging would mean living so long that one forgets one’s earlier life, thereby losing personal identity over time. Harris responded that, even if one’s memory of earlier life-stages fades over centuries, there would be a sufficient connection between each stage and the next to come that one would continue to want to live. Finally, Harris addressed the question of whether it is better to have a turnover of generations, or a static population that lives on and on, with very minimal turnover—and concluded that, even if it were desirable to practice “generational cleansing,” it would be morally unjustifiable to do so.

In his ethics and policy presentation, Aubrey de Grey argued that biogerontologists have a moral

## **Keywords**

biogerontology  
immortality  
life-extension  
prolongevity

duty to publicly discuss the timescale for slowing, halting, or reversing human aging. Noting a widespread tendency not to speak boldly and plainly about what may be possible and when, de Grey encouraged scientists working on aging to make public predictions of the form, "We will multiply human lifespan by N1 in N2 years." Failure to publicly discuss this possibility and to offer specific forecasts of what may be achieved will, de Grey argued, operate to slow the scientific conquest of aging—and waste lives.

Steven N. Austad, a well-known specialist in the biology of aging, discussed his recent meeting with Leon Kass and the President's Council on Bioethics on the prospects and ethics of life-extension. In light of this meeting and other experiences, Austad suggested that proponents of life-extension research and development should advocate the conquest of disease, suffering, and infirmity, and stress the need to give seniors higher-quality physical lives, rather than stressing an end to human aging and the conquest of death (topics which make many people uneasy). This, he argued, is more consistent with values people already accept, and with the avowed goals of current biomedical research and public policy, and therefore a more productive way to raise the prospect of life-extension with policy-makers and the general public.

Among other issues, Jay Olshansky answered Malthusian worries about life-extension by contending that, if we achieved immortality tomorrow and the birth rate remained the same (currently approximately 1 percent per year), the world's population would take 140–150 years to double—half the rate at which the population doubled in the period following World War Two. The best demographic forecasts, in short, undermine Malthusian worries. Gregory Stock addressed similar issues by surveying different forms that life-extension might take, and discussing the various social and demographic changes each may bring. He concluded that it will be immensely difficult to anticipate and plan for these changes, given the variety of scenarios that may unfold.

Arthur Caplan focused on a series of arguments popular among such critics of life-extension as Leon Kass, Francis Fukuyama, Bill McKibbin, Daniel Callahan, and others. Caplan's general theme was that these arguments require the assumption that what is natural is better, that life-extension is an unnatural, arrogant, dehumanizing usurpation of the natural order, and that the natural order offers us blessings of finitude and wisdom which seek-

ers of life-extension overlook. After responding to each argument in turn, Caplan contended that there is no reason to assume that the natural order is morally preferable simply because it is natural, and thus there is no reason to value our current biology of aging to the point of rejecting the conquest of death.

John Davis addressed the justice issue, arguing that, even if it proves impossible to provide life-extension to everyone (as seems likely), that fact does not make it unjust to develop life-extension for those who can afford it. He noted that, in other contexts, we accept the general principle that taking from the Haves is justified only if doing so makes the Have-nots more than marginally better off. If life-extension is possible, then one must weigh the life-years at stake for those who receive the treatment against whatever burdens making such treatments available might impose on the Have-nots, who cannot afford the treatment.

The greatest burden, Davis argued, is that one's death is worse the earlier one dies relative to how long it is possible to live. For example, a death at 17 is much worse than a death at 97. Because life-extension changes how long it is possible to live, life-extension will make death at 97 tragic in a way it has never been before (in a sense that does not reduce to envy). However, Davis concluded, when this burden is compared to the number of additional life-years the Haves will lose if life-extension is prevented from becoming available, the burden to the Have-nots is marginal compared to what is at stake for the Haves. Therefore, inhibiting the development of life-extension is unjustified, even though it will probably not be available to everyone for a long time.

Perhaps the most valuable result of the ethics presentations was to identify many of the issues which must be addressed in future discussions of the ethics and policy implications of life-extension, including:

- Do gerontologists have a moral obligation to speak candidly about the prospects of life-extension, and to offer concrete predictions about when this might be achieved, so as to hasten public acceptance of this work and hasten the day when lives will be saved through life-extension? (de Grey)
- If we cannot make life-extension available to everyone, is it unjust to make it available to those who can afford it? (Davis, Harris)

- Will life-extension bring about a Malthusian crisis as people fail to die on schedule? (Olshansky, Harris, Stock)
- If one never ages, will one eventually lose psychological continuity with one's earlier life and thereby become a different person, defeating the purpose of life-extension? (Harris)
- Is there moral value in a natural order based on mortality and on the acceptance of death, and if so, should we refrain from developing life-extension? (Caplan, Harris)
- Is life-extension an unavoidable by-product of eliminating the debilitating conditions of old age, sharing the moral priority of curing diseases generally, or is it morally distinct from that project? (Austad, Harris)
- Is life-extension morally indistinguishable from saving lives generally by virtue of the fact that all life-saving postpones death? (Harris)
- Does life-extension make death worse for those who cannot obtain the treatment but nonetheless live to what is now regarded as a ripe old age—in other words, does it make death at 97 tragic rather than the achievement it has always been? (Davis)
- Is it preferable to have a group of people who live on and on, with very little population turnover, or to have a turnover of generations to bring in new ideas and new social developments—and if the latter, is that a reason to inhibit the development of life-extension? (Harris)

The session opened up these issues; it will be a long time before they close.

#### **COMPETING INTERESTS STATEMENT**

The author owns 100 shares of stock in Geron, equivalent to \$600 (US), as of 9/9/04.