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CHILD WELFARE VERSUS PARENTAL AUTONOMY:  
MEDICAL ETHICS, THE LAW, AND FAITH-BASED  
HEALING

**ABSTRACT.** Over the past three decades more than 200 children have died in the U.S. of treatable illnesses as a result of their parents relying on spiritual healing rather than conventional medical treatment. Thirty-nine states have laws that protect parents from criminal prosecution when their children die as a result of not receiving medical care. As physicians and citizens, we must choose between protecting the welfare of children and maintaining respect for the rights of parents to practice the religion of their choice and to make important decisions for their children. In order to make and defend such choices, it is essential that we as health care professionals understand the history and background of such practices and the legal aspects of previous cases, as well as formulate an ethical construct by which to begin a dialogue with the religious communities and others who share similar beliefs about spiritual healing. In this paper, we provide a framework for these requirements.

**KEY WORDS:** Christian Science, faith healing, religion and ethics

INTRODUCTION

Medicine and religion are allies in their mission of assuaging human suffering. Yet the interface between some religious faiths and medicine can create conflict between parental authority and the right of a child to receive appropriate medical care. Of the myriad of religious groups, General Assembly and Church of the First Born, End Time Ministries, Faith Assembly, Faith Tabernacle, and the First Church of Christ, Scientist (Christian Science) are among the religious groups that favor faith healing over traditional medical care.<sup>1</sup> Among these groups, Christian Scientists are the largest and most recognized. This paper examines the relationship between medicine, the law, ethics, and the Christian Science community. It will conclude with a call for further discussion of child rights within the medical community and recommend that children be afforded timely and appropriate medical care despite the religious beliefs of their parents.



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The following is a recent case in which failure of Christian Scientist parents to submit their sick children to conventional medical treatment resulted in death of the child:

In late Fall of 1992, James Andrew Wantland (Andrew), a twelve-year-old seventh grader in La Habra, California began to experience lethargy, weight loss, and frequent urination. Andrew began to complain to his father and paternal grandmother about his symptoms on or about December 14, 1992. His father, a Christian Scientist, felt his son's symptoms were transient and made little attempt to address the issue. By December 17, 1992, Andrew was emaciated, vomiting, and eating little. His father contacted a Christian Science practitioner who provided healing prayer without actually coming to see Andrew. By December 20, 1992, Andrew experienced altered mental status and total exhaustion. A Christian Science nurse was called to the family home. Upon her arrival, Andrew was making no eye contact, was unresponsive, and had rapid, deep respirations. At this time, Andrew's father decided to abandon spiritual healing and called 911. Andrew was transported to the nearest hospital and was pronounced dead. The medical examiner deemed the death to be the result of complications associated with juvenile diabetes.<sup>2</sup>

#### HISTORY AND DOCTRINE OF CHRISTIAN SCIENCE THEOLOGY

Mary Baker Eddy in Boston founded the Church of Christ, Scientist in 1879. The seminal tenet of Christian Science theology is healing through prayer. The basis of this belief comes from Eddy's spontaneous recovery, as a result of reading the New Testament, from an unspecified, lifelong, "chronic illness."<sup>3</sup> The basic Christian Science diagnosis of disease involves the conviction that "...all forms of disease are symptomatic of an underlying condition that needs to be healed...through prayer."<sup>4</sup>

Spiritual healing is accomplished through prayer provided by Christian Science practitioners. These practitioners usually do not actually see the sick – family members request prayers via the telephone or letter. Their training typically consists of self-study of Eddy's text, *Science and Health with Key to the Scriptures*, the Bible, and a two-week course of didactic instruction by a Christian Science teacher.<sup>5</sup> This instruction does not include training in medical science. A Christian Science nurse is trained in the basic skills of bathing, making beds, wound care and bandaging, and supporting the patient's own prayer.<sup>6</sup> Professional licensing is available to Christian Science practitioners and nurses in thirty-nine states, and

virtually all-major health insurance companies reimburse for Christian Science care.<sup>7</sup>

For Christian Scientists, the power of prayer is superior to standard medical treatment. The solicitation of medical care demonstrates weakness of faith.<sup>8</sup> Corroborative evidence for the success of spiritual healing is provided through member testimonials by the recently cured and supported by at least three other church members present during the patient's recovery. Since 1900, Christian Scientists have reported over 53,000 healings from many diseases.<sup>9</sup> However, the validity of this statistic is questionable for three reasons: (1) members are infrequently diagnosed by physicians, (2) Christian Scientists generally keep no written records, including a count of total membership and documentation of healings, and (3) unsuccessful spiritual healings are not documented or recorded through oral history.

In the U.S. Christian Scientists do not reject all medical care. As advocated by Eddy, orthopedic and dental treatments are appropriate as well as supportive equipment such as eyeglasses, crutches, and hearing aids.<sup>10</sup> In Canada and the United Kingdom, Christian Scientists routinely seek out medical care for their children, as law requires it.<sup>11</sup>

## LEGAL CONCERNS

In the *Wantland* case, a medical examination prior to the child's death would have resulted in the diagnosis of diabetic ketoacidosis, a complication of Type I diabetes mellitus – a disease well studied and effectively treated for over 50 years. In the State of California and in 45 other states (the exception states being Hawaii, Massachusetts, Nebraska, and North Carolina), parental or guardian reliance upon spiritual healing is exempt from child abuse and neglect laws. These so-called "religious exemption laws" were enacted as a result of successful Christian Science lobbying.<sup>12</sup> In 1974, the U.S. Department of Health, Education, and Welfare (now the Department of Health and Human Services) directed states to have religious exemptions for parents relying on prayer rather than medical care from child abuse and neglect charges.<sup>13</sup> This policy was reaffirmed in 1996 (and again in 2001 with reauthorization) with Congress' passage of the federal Child Abuse Prevention and Treatment Act (CAPTA). This law does not include a Federal requirement that a parent or

guardian provide a child any medical services or treatment against the religious beliefs of the parent or guardian.<sup>14</sup>

The ardent followers of spiritual healing rarely seek medical care for their children and it is unclear how many have died or are suffering from untreated illness. A study conducted by Asser in 1998 concluded that 172 children of faith-healing sects died from 1975–1995. Of these, 142 deaths were from conditions with survival rates of greater than 90%, 18 had survivals of over 50%, and three would have derived some benefit from medical care.<sup>15</sup>

In the United States, children are exempt from immunizations in all states, except Mississippi and West Virginia, if their parents object on the basis of religious convictions.<sup>16</sup> In 1994, the four-year-old son of Christian Scientists living in Massachusetts died of diphtheria as a result of not being vaccinated. Three dozen or more people, mostly children, were exposed to this child prior to his death.<sup>17</sup> In 1985, there was a measles eruption at a Christian Science college. Of the college's 700 students, 120 became sick with measles and three died – a death rate more than 20 times the mortality from measles in the general population.<sup>18</sup> In 1972, a polio outbreak at a Connecticut Christian Science boarding school went unreported until 11 children were paralyzed.<sup>19</sup> In 1988 and again in 1997 the American Academy of Pediatrics, joined by the National District Attorneys Association, the National Committee for the Prevention of Child Abuse, and the American Medical Association adopted policy statements calling for the complete repeal of religious exemptions in child abuse and neglect and criminal statutes.<sup>20, 21</sup>

Christian Scientists and other advocates of religious exemption laws base their convictions on two premises. First, the Constitutional right to freedom of religion is articulated with, “To hold that adults may be Christian Scientists but that if they are parents they may not raise their children according to Christian Science principles is to deny Christian Scientists the full right to practice their religion.”<sup>22</sup> Second, they take exception to the government interfering with their rights as parents. They argue that no entity should have the ability to abrogate the decisions, medical or otherwise, made by parents for their minor children.

In the Wantland case, the Orange County, California, District Attorney's Office decided not to file criminal charges against Andrew Wantland's father. A civil suit was filed against Andrew's father, paternal grandmother, and the First Church of Christ, Scientist by Andrew's mother (who had been divorced from Andrew's father for

many years at the time of her son's death). Andrew's mother alleged that she was not contacted throughout her son's illness and that she would have wanted him to receive medical care. The California Appellate Court ruled in 1998 that the Christian Science Church and its designates, the practitioner and nurse, were not obligated to seek medical care based upon their First Amendment rights to freedom of religion. The court also ruled that Andrew's father, who had been awarded legal custody of Andrew in 1989, and paternal grandmother acted reasonably under their rights to freedom of religion and that ultimately medical care was sought, albeit too late.<sup>23</sup>

There have been four additional notable court cases regarding medical care for Christian Science children. In *Walker v. Superior Court* (1989), the California State Supreme Court upheld the manslaughter convictions of the parents of a girl who died of untreated bacterial meningitis.<sup>24</sup> The Minnesota Supreme Court in *State v. McKown* (1990), dismissed manslaughter charges against the parents of a eleven-year-old boy who died of diabetic ketoacidosis.<sup>25</sup> In *Commonwealth v. Twinchell* (1993), the Massachusetts Supreme Court overturned the manslaughter convictions of the parents of a two-year-old boy who died of a bowel obstruction.<sup>26</sup> Finally, in *Hermanson v. State* (1990) the child abuse and third-degree murder convictions of the parents of a seven-year-old girl who died of untreated diabetic ketoacidosis were overturned by the Florida Supreme Court on the basis that that they did not receive sufficient warning that their religious beliefs could result in criminal conviction despite Florida's religious exemption laws.<sup>27</sup>

In the three of the four criminal cases that have been overturned on appeal, each dismissal was based upon a violation of the parents' rights to due process; however, the courts have agreed that religious exemption laws are not a defense of criminal neglect. In *Hermanson v. State*, the Florida Supreme Court stated, "...the legislature has failed to clearly indicate the point at which a parent's reliance on [their] religious beliefs in the treatment of [their] children becomes criminal conduct."<sup>28</sup> In addition to these spotlighted cases, it is likely that there have been many more incidents of pediatric morbidity and mortality from reliance upon religious beliefs for healing; however, the majority of these deaths are recorded as due to natural causes and are not investigated.<sup>29</sup>

Despite the federal mandate for religious exemption laws in 1974 and the enactment of CAPTA in 1996 and 2001, three states, Hawaii, Nebraska, and North Carolina have repealed all exemptions to their

civil and criminal code. Christian Science's defense under the U.S. Constitution may be a moot point. We are all afforded the right to practice or not practice the religious beliefs we choose; however, in the First Amendment, the government is specifically proscribed from "recognizing" any specific religion, therefore the majority of religious exemption laws may be unconstitutional. Furthermore, the relationship between parent, child, and religion has already been argued to the supreme judiciary. In *Prince v. Massachusetts* (1944) the U.S. Supreme Court majority ruled, "...parents may be free to become martyrs themselves. But it does not follow they are free...to make martyrs of their children before they have reached the age of full and legal [maturity]."<sup>30</sup>

In addition to the well-publicized Christian Science cases, over the last few years, three Colorado children have died of treatable illnesses. All three were children of parents belonging to the General Assembly Church of the First Born, a small faith-healing group. The first child to die was an 18-day-old boy who died in February 1999 of bacterial meningitis and pneumonia. His parents never cited Colorado's religious exemption to child abuse, but pleaded guilty and received probation and were ordered to provide medical care for their surviving child.<sup>31, 32</sup> The second child to die was a 2-day-old boy who died in July 2000 from a relatively minor heart defect. His parents were not prosecuted. The third child to die was Amanda Bates, a 13-year-old girl who died from untreated diabetes. According to the Colorado Springs paper, *The Gazette*, she suffered "brain swelling and gangrene in her genital area and buttocks."<sup>33</sup> Her parents have been charged with criminally negligent homicide. In April 2001, Colorado state legislators passed a bill that repealed the state's religious exemption as a result of the wide public outcry created by the deaths of these children.<sup>34, 35</sup> Colorado parents no longer have a religious exemption for felony child abuse, negligent homicide, reckless endangerment, and manslaughter.<sup>36</sup>

### ETHICAL CONCERNS

Medical ethicist Kenneth Kipnis questions the degree of respect owed to parental decisions regarding their children. Specifically, he argues that it would be a disservice for our society if, because of religious exceptions, we were to protect all children from abuse and neglect by their parents except those of Christian Scientists. He states, "Where it

becomes evident that parents, for whatever reason, cannot be expected to meet the standard, the larger community has a duty to relieve the parents of responsibility...to the point where the child's well-being is reasonably assured."<sup>37</sup>

Consider a brief application of ethical principles to the particular situation of a sick child of a Christian Scientist parent. The withholding of lifesaving medical treatment on the basis of the parents' belief that the child may be otherwise healed through prayer would suggest that parental autonomy outweighs prevention of harm to the child. However, the harm to the child, potentially resulting in severe morbidity and even death, far outweighs the harm to the parent by disregarding their autonomy and authority to make decisions about their child.

The ethical calculus of benefit/burden is clearly in favor of benefit of medical treatment. It would seem that medical treatment of a Christian Scientist's child does not impose specific or harsh burdens on the child or the parent. Alternatively, the burdens imposed if the child is *not* treated are considerable, including severe morbidity and even mortality.

This is in sharp contrast to the case of refusal of blood transfusion for a child of a Jehovah's Witness. The refusal is almost universally overridden by court order, but in the eyes of the Jehovah's Witness may carry a very significant burden. The Watchtower Society, the official agency of the Jehovah's Witnesses, maintains that transfusions are synonymous with eating blood, which is forbidden in the Bible in Genesis 9:4 and Acts 15:28–29.<sup>38</sup> Accepting a blood transfusion disobeys God's commandments and may lead to eternal damnation.<sup>39</sup> Until recently, a secondary but still significant burden included exclusion or banishment from the religious community. It is a compelling existential concept: the idea of sacrificing a very short (in relation to eternity) life on earth to assure eternity with one's creator.

There is significant heterogeneity in the Jehovah's Witness communities, and many have asserted various "pardons" for both adults and children in the instance that blood products are administered to them without their knowledge and/or consent. Jehovah's Witness parents may be comforted by the hope that their children may still see heaven even if they receive blood. It is interesting that this seemingly more theologically compelling argument for refusal of treatment (and only refusal of blood products; Jehovah's Witnesses embrace all other forms of medical treatment)

has not received the same degree of consideration and deference as that of the Christian Scientists.

Although we have concluded that the benefits of conventional medical treatment of a sick child of a Christian Scientist parent outweigh the burdens to the parents and family, that does not mean that the beliefs of the Christian Scientist practitioner should be disrespected or ignored. The imposition of the law between a parent's belief and values and their children constitutes a delicate situation that requires extensive consideration. In the case of overriding such a precious principle as the primacy of parents as guardians and decision-makers for their children, the burden of proof is on those choosing to override it. It may be useful to consider the conditions of Beauchamp and Childress that must be met to justify infringing one *prima facie* norm in order to adhere to another (in italics, below).<sup>40</sup> These conditions include the following:

1. *Better reasons can be offered to act on the overriding norm than on the infringed norm.* The argument can be made that a child's life is more important than a set of beliefs or morals. These are not the child's morals. It has often been argued, and most recently by Jeffrey Spike, who said, "The children are being raised in that community, yes, and by true believers, yes, but they deserve a chance to survive until they can judge for themselves whether to adhere to those beliefs."<sup>41</sup>
2. *The moral objective justifying the infringement has a realistic prospect of achievement.* If a child has an illness, for which there is no cure, such as a fatal brain tumor, then overriding the parents in order to give chemotherapy that has a 15% chance of shrinking the tumor, and no chance of eradicating it, would not be justified. However, if a child has bacterial meningitis, and the chance of recovery with IV antibiotics is greater than 90%, the infringement would be justified.
3. *No morally preferable alternative actions can be substituted.* If the child has an acute life-threatening illness, such as meningitis or diabetic ketoacidosis, or if the child is in pain, there are no morally preferable alternatives to medical care. However, if the illness is less acute, or not curable, then alternative actions could be sought which were more in keeping with the parents' preferences and beliefs.
4. *The form of infringement selected is the least possible commensurate with achieving the primary goal of the action.* When the

parents' desires are overridden, the action of overriding must be restricted to the specific circumstance, if possible. The rights of the parents to make other decisions for their children should be respected. However, in a situation in which a child has died, many would question whether the parents who allowed a child to die for lack of medical care would be "fit" to care for other children, and even further, whether they should be prosecuted for neglect and wrongful death. In that case, this is clearly a more difficult condition to meet.

5. *The agent seeks to minimize the negative effects of the infringement.* When parental rights are overridden to provide proper medical care to the child, the parents should still be allowed to make other decisions relevant to the situation, to visit their child, and to be informed of their child's condition.

## CONCLUSION

The right of a sick child to appropriate medical care supersedes the right of a parent to withhold that care for the sake of religious beliefs. The refusal of medical treatment on behalf of minor children is only supported when (1) the effectiveness of the treatment is in doubt, (2) the burdens of treatment outweigh its benefits, and/or (3) the care is refused by a decisionally capacitated minor.<sup>42</sup>

If members of the healthcare community are well informed about the doctrines, previous court cases, current laws of major religious groups that prohibit medical treatment, and ethical issues, not only will they be equipped to deal with the challenge they face in caring for these children but they will also be able to begin a serious dialogue with these religious communities and those who make the law.

## NOTES

<sup>1</sup> S.M. Asser and R. Swan, "Child Fatalities From Religion-motivated Medical Neglect," *Pediatrics* 101, no. 4 (1998): 625–629.

<sup>2</sup> Adapted from *Gayle Quigley v. First Church of Christ, Scientist et al.*, 65 Cal. App. 4th 1027; 1998 Cal. App. LEXIS 677; 76 Cal. Rptr. 2d 792; 98 Cal. Daily Op. Service 5928; 98 Daily Journal.

<sup>3</sup> J.C. Merrick, "Christian Science Healing of Minor Children: Spiritual Exemption Statutes, First Amendment Rights, and Fair Notice," *Issues in Law & Medicine* 10, no. 3: 321–342.

<sup>4</sup> N.A. Talbot, "The Position of the Christian Science Church," *The New England Journal of Medicine* 309, no. 26 (1983): 1641–1642.

<sup>5</sup> Merrick, cited in n. 3, above.

<sup>6</sup> Merrick, cited in n. 3, above.

<sup>7</sup> Merrick, cited in n. 3, above.

<sup>8</sup> L. May, "Challenging Medical Authority: The Refusal of Treatment by Christian Scientists," *The Hastings Center Report* 25, no. 1 (1995): 15–21.

<sup>9</sup> Merrick, cited in n. 3, above.

<sup>10</sup> Merrick, cited in n. 3, above.

<sup>11</sup> A.A. Skolnick, "Christian Science Church Loses First Civil Suit in Wrongful Death of a Child," *The Journal of the American Medical Association* 270, no. 15 (1993): 1782.

<sup>12</sup> R. Swan, "Religious Exemptions From Health Care For Children: Federal Policy," Children's Health Care Is A Legal Duty, Inc. (CHILD), <http://www.childrenshealthcare.org/>.

<sup>13</sup> Asser, cited in n. 1, above.

<sup>14</sup> Swan, cited in n. 12, above.

<sup>15</sup> Asser, cited in n. 1, above.

<sup>16</sup> Swan, cited in n. 12, above.

<sup>17</sup> B. McGrory, "No Charge Planned in Unvaccinated Boy's Death," *Boston Globe* 2 (April 1994): Metro/Region, 20.

<sup>18</sup> Merrick, cited in n. 3, above.

<sup>19</sup> Merrick, cited in n. 3, above.

<sup>20</sup> Asser, cited in n. 1, above.

<sup>21</sup> Swan, cited in n. 12, above.

<sup>22</sup> R.T. DeGeorges, "Letter to the Editor responding to Christian Science's Right to Refuse," *The Hastings Center Report* 25, no. 4 (1995): 2.

<sup>23</sup> *Gayle Quigley v. First Church of Christ, Scientist*, cited in n. 2, above.

<sup>24</sup> Merrick, cited in n. 3, above.

<sup>25</sup> Merrick, cited in n. 3, above.

<sup>26</sup> Merrick, cited in n. 3, above.

<sup>27</sup> Merrick, cited in n. 3, above.

<sup>28</sup> Merrick, cited in n. 3, above.

<sup>29</sup> Asser, cited in n. 1, above.

<sup>30</sup> Merrick, cited in n. 3, above.

<sup>31</sup> E. Gorski, "A Matter of Life and Faith," *The Gazette* 25 (March 2001): <http://www.gazette.com/archive/01-03-25/daily/top2.html>.

<sup>32</sup> N. Lofholm, "Prayed-over Girl Died of Untreated Diabetes," *Denver Post* 8 (February 2001): <http://www.rickross.com/reference/general/general342.html>.

<sup>33</sup> Gorski, cited in n. 31, above.

<sup>34</sup> Swan, cited in n. 12, above.

<sup>35</sup> M. Janofsky, "Colorado Children's Deaths Rekindle Debate on Religion: Should Parents be Allowed to Deny Care?" *New York Times* 21 (February 2001): sec. A, 10.

<sup>36</sup> Swan, cited in n. 12, above.

<sup>37</sup> K. Kipnis, "Letter to the Editor responding to Christian Science's Right to Refuse," *The Hastings Center Report* 25, no. 4 (1995): 3.

<sup>38</sup> Watchtower and Bible Tract Society, *Jehovah's Witnesses and the Question of Blood* (Brooklyn, New York: Watchtower Bible and Tract Society, 1977), p. 18.

- <sup>39</sup> Watchtower: Official Web Site of Jehovah's Witnesses, <http://www.watchtower.org>.
- <sup>40</sup> T.L. Beauchamp and J.F. Childress, *Principles of Biomedical Ethics*, 4th ed. (New York: Oxford University Press, 1994).
- <sup>41</sup> J. Spike, University of Rochester Medical Center, e-mail, March 14, 2001.
- <sup>42</sup> K. Kipnis, "Parental Refusals of Medical Treatment on Religious Grounds: Pediatric Ethics and the Children of Christian Scientists," in *Liberty, Equality and Plurality*, eds. L. May, C. Sistare, J. Schonscheck (Lawrence, Kansas: University of Kansas Press, 1997), pp. 268–280.

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