

Short Communication

Medicine in Danger?

Response to: 'On Heidegger, medicine, and the modernity of modern medical technology' by Iain Brassington, *Medicine, Health Care and Philosophy* November 2006 Epub ahead of print

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In his recent and interesting contribution 'On Heidegger, medicine, and the modernity of modern medical technology' Brassington brings together Heidegger's philosophy of technology on the one hand and medicine as being increasingly dependent on modern technology on the other (Brassington, 2006). Technology, for Heidegger, as Brassington points out, is associated with danger. Given the central role of technology in medicine, this raises the question to which extent medicine is in fact 'in danger'. Brassington asserts that "technologically-empowered medicine has managed not to import the danger from modern technology" and concludes his paper with the following remark:

Heidegger's worries about modern technology do not have to apply to modern medicine; to the extent that medicine is concerned by or for humanity, however that might spin out in practice, its appropriation of technology for the sake of irruptive humanity does not seem to me to have to be problematic.

Brassington's argument why medicine has managed to stay out of technological danger is based on a distinction he makes between chronological and historical modernity. He argues that, while modern medicine is in a chronological sense hypermodern and up-to-date, in a historical sense it has retained essentially a pre-modern ethos, safeguarding technologically-empowered medicine from the technological danger. However, is Brassington's view of medicine as being protected from technological danger in accordance with Heidegger's view on medicine and technology?

Brassington is not the first author to link medicine and its practice to Heidegger's philosophy (Richardson, 1993). Moreover, from the year 1959

until 1969, Heidegger himself lectured to psychiatric residents and students at the University of Zurich Psychiatric Clinic and, soon after, in Zollikon. The transcriptions of these lectures were published as the 'Zollikon Seminars' by the psychiatrist and initiator of these lecture meetings, Medard Boss. In the context of discussing the human body, technology and modern medicine, Heidegger says:

There is the highest need for doctors who *think* and who do not wish to leave the field entirely to scientific technicians. (Heidegger, 2001, p. 103)

This phrase, speaking about 'the highest need', does not sound as reassuring as Brassington's conclusions. In fact, it seems to indicate that Heidegger's worries about technology *do* apply to modern medicine and that modern technologically-empowered medicine is not simply safeguarded by any pre-modern ethos or pre-given essence. For if such a pre-given medical ethos would be sufficient, why would Heidegger refer to the need for *doctors* to think? Brassington claims, in short, that medicine "can be conceived as concerning itself primarily with health or the welfare of the human, not simply with the processes of the body" and that "it is simply not in the character of the discipline" to be endangered by modern technology. It is this assumption about the character of medicine that is not reflected in the Heidegger quote. In addition, it could also be argued that precisely because medicine is essentially concerned with the human person as a whole (not just with technical aspects of the body), modern technology poses such a threat to medicine, since it would endanger this essence.

In conclusion, it may well be that modern technology does not constitute a danger to

medicine. However, to arrive at this conclusion on the basis of Heidegger's philosophy is more problematic than Brassington suggests: medicine seems not to be immune to technological danger.

References

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