

ACADEMIA FILOSOFICA DE LA PLATA

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RESEARCH WORK

HUMAN ORGAN TRANSPLANTS

THE INFLUENCE OF ORGAN DONORS –SOULS OR SPIRITS– UPON ORGAN

RECIPIENTS

RESEARCH TEXT: A Change of Heart, Claire Sylvia and Bill Novak.

Claire Sylvia , who was afflicted with a primary pulmonary hypertension disease ,underwent a heart-lung transplant in 1988.The operation was performed by doctor Baldwin at Yale hospital in New Haven in Connecticut .Her donor was an eighteen-year-old boy from Maine ,who had had a motorcycle accident . When his organs were removed, he was being maintained on a ventilator, which breathed for him; his heart, however, was still beating on its own.

Information drawn from the research text (Chapter 1 page 5; Chapter 3 page 38; Chapter 6 page 80; Chapter 7 pages 84, 96, 97)

We have textually taken from Claire Sylvia's book a number of paragraphs that describe the changes she has experienced related to her donor's energy. Besides feeling his presence as another soul sharing her body, she had vivid and accurate dreams about him, whom she had never known. She also had changes in her food preferences, in her dancing style, in her way of walking, etc.These changes she took on after her transplant correlate with her donor's way of living; a fact corroborated by his relatives.

Claire Sylvia's changes match up with other recipients' accounts of their post-transplant experiences .These events, being the rule, not the exception to organ recipients, are not elucidated by scientists, who are unable to provide any satisfactory explanation for these occurrences because the scientific world targets at the physical and not at the spiritual field.

ORGAN RECIPIENT CLAIRE SYLVIA FEELS HER DECEASED DONOR'S PRESENCE AS A

SOUL OR A SPIRIT

“Before long, I began to feel that I had received more than just new body parts. I began to wonder if my transplanted heart and lungs had somehow arrived with some of their own inclinations and memories. I had dreams and experienced changes that seemed to suggest that some aspects of my donor's spirit and personality now existed within me.” (Chapter 1 page 6)

“Although I couldn't yet put this idea into words, I now believe that what made me so confused and disoriented during my early days in the ICU were the first stirrings of another presence within me. I would have the feeling that some aspects of my donor's personality existed within me.” (Chapter 8 page 114)

“My new heart did seem to be affecting my personality. I noticed that no longer I felt lonely, even when I was by myself. On weekdays, when I was separated from Amara and my friends, I didn't miss them much. Sometimes I had the feeling that somebody else was in there with me, that in some intangible way, my sense of “I” had become a kind of “we”. Although I couldn't always detect this extra presence, at times it almost felt as if a second soul were sharing my body.” (Chapter 9 page 131)

“It wasn’t my old self who had dragged me here, but the youthful energy of my now twenty -year-old heart and lungs. In France, more than ever before, I felt as if I were two people who were sharing the same body.” (Chapter 12 page 193)

“How shocking it must have been for Tim’s heart and lungs-and whatever parts of Tim’s spirit that might have come along with them-to wake up in the body of a middle-aged woman. Was I crazy, or were my dreams and my changes suggesting that the human heart was more than a mechanical pump?” (Chapter 12 page 196)

“But now Robbie was forced to consider what had long seemed clear to me- not only that there was a “real” Tim, but that some aspects of him might exist within me. As Robbie wrote:

“I feel a change of viewpoint taking place. My vehement attachment to the psychological point of view about “Tim” is loosening up as Claire comes closer to her desire to meet Tim’s family. I am beginning to believe that some of Tim’s essence has transmigrated to Claire. As a professional therapist, I know that vigor and resilience are part of character, temperament, and identity. If the transplant has somehow passed on elements of his temperament, personality, and identity, then psychological residues of the actual Tim L (not just the image of “Tim”) may now inhabit Claire”(Chapter 13 pages 201-202)

Robert Bosnak (Robbie) – A Jungian analyst at the Jung Institute in Boston.

A RECIPIENT’S ACCOUNT

“Dr.Pearsall’s interest in this subject began after his own transplant. A fellow patient, who was also undergoing his own bone marrow transplant, insisted that he could feel the presence of his donor. Dr Pearsall asked the man what he thought the donor was like.

“Some kind of artist,” he replied. “Maybe a painter or a musician.”

Later the patient was informed that his donor’s hobby was oil painting. (Chapter 17 page 261)

Dr. Pearsall is the author of the book called The Heart’s Code, ISBN 84-414-0467-4.

INFLUENCE OF THE DECEASED ORGAN DONOR TIM AS A SOUL OR A SPIRIT UPON

RECIPIENT CLAIRE SYLVIA, WHO TAKES ON HIS SAME FOOD PREFERENCES

The organ recipient Claire Sylvia claims to have cravings for new foods that coincide with her donor’s (Tim L’s) food preferences. The donor’s relatives confirmed this coincidence.

“Was he a beer drinker?” I asked.

His sisters nodded.

“When I told them how I wanted a beer soon after the operation, there were smiles all around.”

“I asked if he liked green peppers.”

“Are you kidding?” “He loved them,” a sister told me.

“He used to fry them up with a whole kielbasa sausage.”

I explained that I never liked sausages before the transplant.

“But what really liked was chicken nuggets,” said Annie

“Oh, my God!”

“What is it, Claire?”

“I just remembered something I’ve never told anyone. After the transplant, when I was finally allowed to drive again, the first place I went to was Kentucky Fried Chicken. I had this craving for chicken nuggets, which I’d never had before.” (Chapter14 pages 225-226)

“I had just learned that many of the dreams, images, and hunches I’d had about my donor matched up closely with what his loved ones knew about him.” (Chapter 15 page 232)

THE DONOR’S PARENTS WERE INTERVIEWED IN 1991

“Do you believe,” the reporter asked, “that in some way Claire picked up part of Tim’s spirit?” June (Tim’s mother): Yes, I believe it. When she told us about the foods, this was a shock. My daughter said, “Ma, I can’t believe it .That’s the same stuff Timmy liked.”

Carl (Tim’s father): “His spirit is still there in those parts she received.” (Chapter 15 page 240)

MENTAL INFLUENCE OF THE ORGAN DONOR (DECEASED TIM L.) AS A SOUL OR A

SPIRIT UPON RECIPIENT CLAIRE SYLVIA

The recipient's thoughts and the donor's mingle together; and so the donor as a soul or a spirit expresses his own self through the recipient. The donor's relatives confirm this fact.

A SISTER OF THE DONOR'S IS INTERVIEWED ON A TV SHOW

"When we met Claire," said Carla, "we all probed her and asked her questions. It was like she knew Timmy. A lot of things she said were true. How would she know these things? Everything she was saying was right. It was like him, like she was part of him." (Chapter 15 pages 241-242)

"Why do recipients have the memories of a donor they never knew, and whom we can sometimes identify?" (Chapter 18 page 275)

THE ACCOUNTS OF ORGAN RECIPIENTS

MENTAL INFLUENCE OF THE DECEASED DONOR (A SOUL OR A SPIRIT) UPON THE RECIPIENT (A PERSON)

"The day will come, I expect, when cases like mine will be studied in a systematic way. Until then, we will have to do with anecdotal evidence.

"A transplant nurse in Florida told us about a heart transplant patient who, before her operation, had suffered from an extreme fear of water- a fear so debilitating that she wouldn't take a shower. Soon after her transplant, the same woman felt a great desire to go swimming and sailing. A surgical resident, who wasn't authorized to disclose this information, informed the woman's incredulous family that her donor had been an avid sailor who died in a boating accident.

This same nurse also told us about a middle-aged man who received a new heart from a young donor who was killed in a motorcycle accident. The recipient, a born-again Christian, woke up from the operation cursing and swearing, which was completely out of character. Because the donor had died at the same hospital where the transplant was performed, the donor's mother ended up meeting the recipient. She confirmed that the man was speaking just like her son, and was even using some of the same mannerisms." (Chapter 17 page 262)

"A number of physicians come to our institute, and over the years I've heard other stories like this. One cardiac surgeon told me that he has observed this phenomenon, which includes personality changes and cravings for new foods, and that it usually fades a few months after the transplant. It's not something surgeons want publicized, and they keep it very quiet." (Chapter 18 page 276)

MENTAL AND PHYSICAL INFLUENCE OF THE ORGAN DONOR (TIM L. – DECEASED) AS

A SOUL OR A SPIRIT UPON RECIPIENT CLAIRE SYLVIA.

Claire Sylvia says that she has gained some knowledge about certain subjects she did not know before her transplant, which reflects mental influence, while, her new way of walking, the same as her donor's, demonstrates physical influence.

"My personality was changing, too, and becoming more masculine. I was more aggressive and more assertive than I used to be, and more confident as well. I felt I knew things that men knew, things I hadn't known as a woman and that seemed to have come to me from some other place. It was a subtle feeling, as though I'd been entrusted with some secret knowledge that I didn't completely understand."

"Even my walk became more masculine. "Mom," said Amara, "why are you walking like that? You are kind of lumbering, like a football player."

"Then a dance friend said, "Claire, you're really strutting." It was, I realized, the stride of a virile young man..."

"Whatever was going on with this masculine energy, it wasn't limited to my walk. Or perhaps my new walk was a metaphor for the way I now was moving through the world without feeling restricted. I felt a new power that I associated with masculinity, strength, and vibrancy." (Chapter 9, page 132)

SUPPORT GROUP MEETINGS. RECIPIENTS' ACCOUNTS

“Another theme in our conversation was that all of us had some sense after the transplant that we were not alone. And each of us had at some point spontaneously experienced our new heart as an “other” with whom some form of communication was taking place. In a couple of cases, this sense of being with another person was so strong that the recipients became obsessed with learning the donor’s identity.”

“With other participants, the feelings of another presence within were more diffuse and took the form of people talking to their new hearts directly, and sometimes even loud, during moments of crisis.” (Chapter 11 page 166)

“Only one participant, a social worker named Mary, claimed that she never experienced her new heart as “other”. But within the confines of our tight circle, Mary spoke movingly about how, when she experienced an episode of rejection shortly after her transplant, an image came to her of two spirits who were fighting inside her body. “One of them was me,” she said, “and the other, I guess, was the donor, who didn’t want me to have this heart. I know my new heart came from a woman, and this struggle between us felt like a catfight.” (Chapter 11 page 167)

“Sometimes I think about this person whose heart I have,” he said, “but I have to put it out of my mind because it scares me.”....

“I won’t go so far as to say that two people exist in me, but I have been changed. It might be different if I had received a new kidney, but the heart has spiritual, psychological, and emotional attachments. I believe my donor’s spirit is still around, and in that sense he’s still alive.” (Chapter 11 page 169)

“About a year after his transplant, Mario had an experience that really shook him up. He and his wife were visiting relatives in the Boston area, and on Easter Sunday they walked into a little church where, to his astonishment, Mario felt completely at home. Even the priest looked familiar, and Mario instinctively knew his way around. He led his wife upstairs to a certain pew, as if he had been there often.

“Have we ever been to this church?” he asked her.

“Never,” she replied.

“Well, I have,” he said.

“I never knew what part of Boston my guy was from,” Mario told us, “but that morning I had no doubt that this was his church.” Mario found the experience so unsettling that he returned to the little church three more times until he felt comfortable. “I believe there’s another spirit in me,” he concluded, “and that we finally bonded together and somehow made a life for both of us.”

Mario was especially grateful to Robbie for helping him deal with a disturbing image that kept haunting him. Ever since the transplant, Mario sometimes saw the image of a face suspended just below the ceiling. After one of our meetings, Robbie met privately with Mario and asked him to bring the face into view. When it appeared, Robbie guided Mario in bringing the image down, closer and closer to his own face, until the two faces seemed to merge. After this, the mysterious face made no further appearances, and Mario felt that he had fully integrated the new organ into his body.” (Chapter 11 page 171)

OTHER OPINIONS

Deepak Chopra is among those who seem to assume an enhanced understanding of cellular memory. In one of his popular books, he reports that some transplant patients, after receiving a new kidney, liver, or heart, begin to participate in their donors’ memories. “Associations that belong to another person start being released when that person’s tissues are placed inside a stranger.” (Chapter 18 page 269)

According to Gary E. Schwartz, Ph.D., professor of psychology, neurology, and psychiatry, and director of the Human Energy Systems Laboratory at the University of Arizona, and his colleague, Dr. Linda G. Russek:

“Systematic memory predicts that all transplant patients register stored information and energy from the donor’s tissues—certainly unconsciously, and sometimes consciously. In our view, the problem of organ rejection involves not only the rejection of the material of the cells, but also the information and energy stored within the cells and molecules.” (Chapter 18 page 277)

CONCLUSION

ANALYSIS FROM THE PHILOSOPHIC POINT OF VIEW

Man is something else than a body.

Accurately described, each man is a soul or a spirit with a physical body that is the cover of the soul and a working tool for his/her own progress.

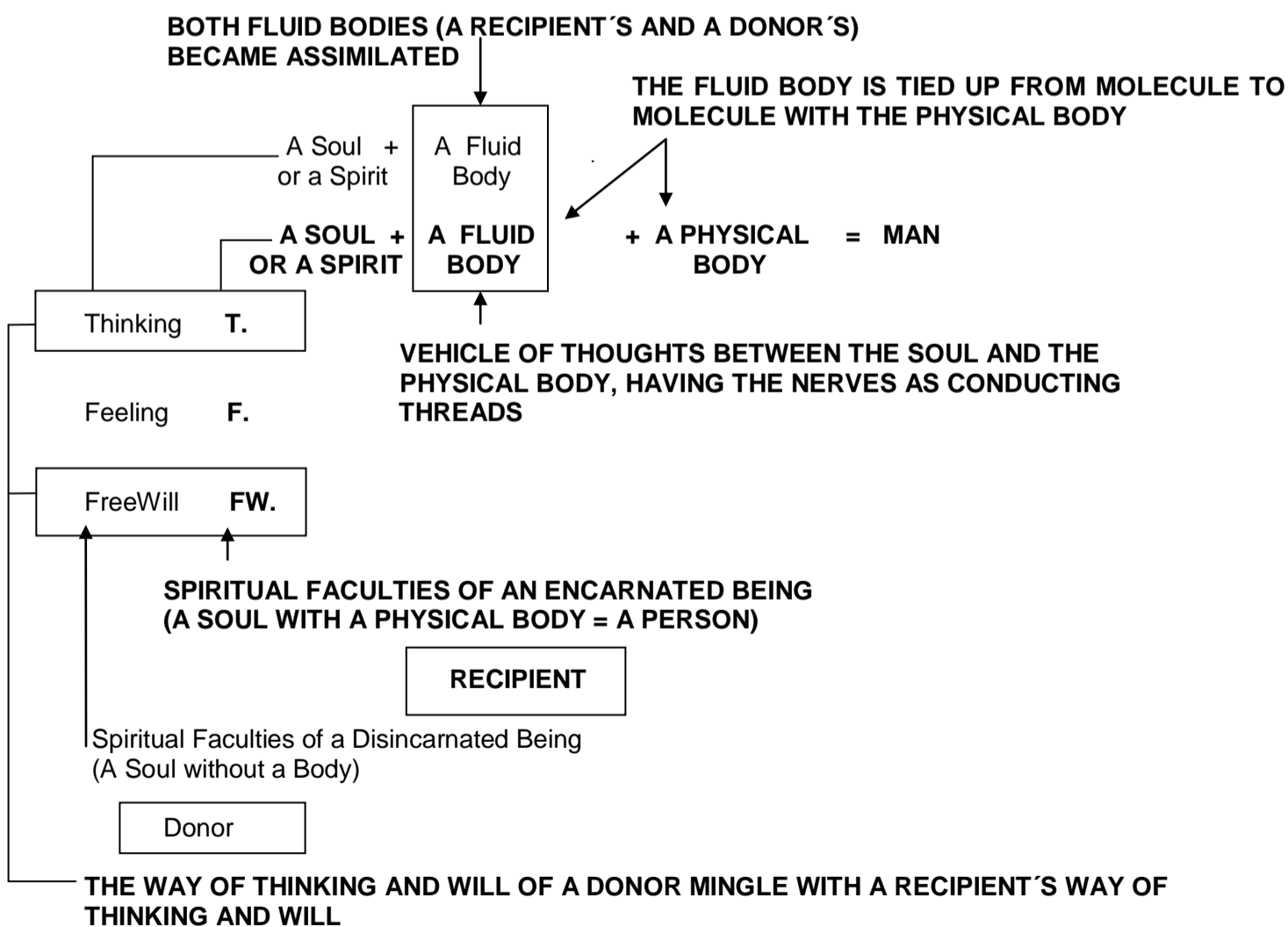
When the body dies, the soul or spirit, as immortal as it is, lives on, keeping the three spiritual faculties: Thinking, Feeling and Freewill.

In order to focus on this study, one should consider the following: man is an essential being with a physical body.

$$\text{SOUL} + \begin{matrix} \text{FLUID} \\ \text{BODY} \end{matrix} + \text{BODY} = \text{MAN (HUMAN GENRE)}$$

We (men) are souls, spirits or essential beings (different names to denote spiritual beings), and each of us has a fluid body and a physical body. Throughout the physical life, the semi-material fluid body is tied up from molecule to molecule with the material body. This fluid body works as the vehicle of thoughts between the soul and the body, having the nerves as conducting threads that send biochemical –neurotransmissor messages to the different parts of the body that react under the impulse of the will.

Beings (souls, spirits or essential beings) whose physical bodies are dead, in some cases, may feel attracted to a same way of thinking, feeling and behaving of their organ recipients. In such a case, each other's ways of thinking, wills and fluid bodies (=corporeal recipients' and non-corporeal donors') mingle together in such a way that donors (souls or spirits) use the body of their recipients to express their own ideas, tastes and inclinations they had before disincarnating (=dying)



FEELING (F) = THE GENERATING CAUSE OF THINKING AND BEHAVING IN ACCORDANCE WITH A PERSON'S SPIRITUAL EVOLUTION.

While the transplanted organ cells remain alive, there is a soul-body attachment established by the fluid body. Being still tied up from molecule to molecule with their physical body, donors as souls or spirits must deeply suffer when their organs are removed, and will probably follow their organs that are now in the recipient's body. This phenomenon occurs because the donors' organs are still imbued with their vital fluid. The influence continues until the transplanted organs are embedded with the recipient's vital fluid, which does not necessarily mean that donors, as souls or spirits, withdraw from the recipient, but they assimilate themselves into the recipient to act together.

Either because of the accident that caused them to be brain-dead or because of their organ removal, donors have violent deaths that plunge them into a state of confusion for a long time, may be for years. Such a condition lead them to believe they are still living with the same way of thinking, the same worries, the same sufferings and the same everyday activities, as if they were living with a physical body. When these beings (souls or spirits) attach themselves to another person (recipient), they may cause physical and mental influence, as the ones mentioned by Claire Sylvia and other recipients.

When their organs are removed, donors are brain-dead, and the natural process of detachment between soul and body, caused by the death of all their cells, is altered.

Man is an essential being, a soul or a spirit with a body that carries the impressions of his/her way of thinking along his/her physical body. Medicine has proved this process to be true from its study on stress.

The evidence for donors' influence upon their recipient reveals itself through the recipient's acquired changes of ideas, tastes, inclinations that coincide with the donors' ways of living.

The influence can be mental or physical. Claire Sylvia's changes of ideas, tastes and inclinations are mental influence, and her change of walking, for instance, is physical influence.

Through mental influence, donors (souls or spirits whose bodies are dead) cause their recipients to think and to act for them, and, at times, cause them even to act weirdly. Reluctantly, the recipient becomes a blind tool for their donor's tastes and inclinations.

It is observed that some recipients are sometimes aware of their ridiculous behaviour, but they are forced to act in this way as if a more powerful being compels against their will.

According to doctor Pearsall, a transplant who worked with other recipients, many recipients feel at first a strong connection with the different aspects of the donor's personality, but eventually they seem to be losing or denying this connection. However, the connection comes back again when they stop repressing it. This strong connection occurs as recipients give up their will to their donors, who express themselves through the recipient's body. This influence is always exerted with the cooperation of the influenced, either because of weakness or because of desire.

It's also observed that when recipients are determined to reject their donor's energy, i.e. they do not give up their will, the influence does not show up, which does not necessarily mean it does not occur somehow.

In many countries, a brain-dead person is regarded as a naturally dead person, meaning that a patient under this state (=donor) is considered legally dead, although he/she is not actually dead.

The necessary condition for any people to become donors of their main organs like heart, lungs, and kidneys is to be brain-dead. Brain-dead patients face the dying of their brain cells, which does not allow anybody under this condition to express themselves. Yet, the remains of their body are still living, even with mechanical means, and, in some cases, they remain in this state for several months. Dead-brain corpses can become ill; have children. In England and other countries, patients are anaesthetized so that they feel no pain while their organs are being removed, and, finally, they die of cardio-respiratory failure or of their organ removal.

In short, this brain death, whose label is made up for utilitarian purposes, allows organ removals from live people.

The reference here regarding the influence of spirits upon men is neither a fake nor a conception by the author of this paper work. Events of influence appear in the Old and New Testament in

the Bible, namely Saint Mathew 17, 14-18 (the demon's influence: "demon" deriving from a word of Greek origin: "daemon" that stands for a spirit, an extra corporeal being).

So far , evidence from patients' experiences, commonly known by transplant professionals, shows that current and future recipients are partly fearful of adopting the deceased donors' personality traits, for example, new preferences and new sexual orientations, and in this issue, they are fearful of becoming promiscuous or completely losing their pre-transplant sexual orientations .Furthermore, since most donated organs come from people struck to sudden and even violent deaths, recipients lodge spirits that are unready to abandon their bodies so suddenly. Another concern from recipients is adopting new religious feelings and beliefs that may be totally opposed to their pre- transplant creeds (page 140-141 from *The Heart's Code*, Paul Pearsall - ISBN 84-414-0467-4)

The Philosophic Academy in La Plata is not against either organ transplants or the people in need of organs to lengthen or improve their lives, but it wonders: with what moral criteria can we determine that one life is more valuable than the other ;let's say that of the dying donor or of the dying recipient?

Life is valuable; however precarious it might be, and must be respected till natural death which means the definite cease of all vital organ functions.

Research conducted by transplant professionals indicates that in order to do a good act there may be also much harm done. The Greek philosopher Socrates held that this happens as we regard man as a body without a soul.

Man is something else than a body; he/she is a soul with a body. In the case of recipients, there exist events they experience that are beyond the sphere of physical science but are within the reach of spiritual sphere. Experience and professional doctors' observations provide evidence for this reasoning.

In Argentina's Buenos Aires province, the application of the article 23 of the national law 24.193 concerning Organ Transplants and Anatomic Human Material violates the article 12 of the province's constitution and the article 13 of the civil code. This national law regards the signs of brain death as those of the death of the person, whereas the province's constitutional article declares man's right to life from conception until natural death.

The status of brain death has been questioned internationally, among which we can cite:
'The big problem in organ donation is the donor's condition. To remove organs that are useful for transplants, the donor must be living; and, in order to have the organs, a condition of brain death has been established. Thus, a brain-dead patient is declared dead, although he/she is not, and finally he/she dies when the organs, vital to keep life, are removed. .This constitutes nothing less than a murder.'

The Facts of Life by Brine Clowes; published in International Human Life, USA.

THE RESPONSIBILITY OF OUR ACTIONS

To foster a human being's death at any stage of his/her existence from conception until natural death is a homicide.

On 25th December 2000 and on 30th January 2001, Pope John Paul urged to defend life at any stage from conception until natural death.

When the heart stops beating (natural death), man's organs are of no use for transplants.

Since the body is the cover of the soul and a temporary tool for progress, to defend man's right to life is an inevitable duty that involves all human beings.

Under this condition, we include: organ removals from brain-dead donors, euthanasia practice, abortion (chemical, mechanical and surgical ones) and genetic manipulation, be it an embryo clonation for therapeutic or reproductive ends, the selection of which determines which must live or die.

An embryo, implanted or not, is a human being (a soul with a physical body) whose life must be respected.

Man bears the unavoidable responsibility for his/her own acts and thoughts and he/she will have to give full account and make up for his/her wrong behaviour in this life, in the spiritual world when he/she abandons the body, or in a new physical life.

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