

# humanlifealliance

"Inform • Inspire • Involve"

The Honorable Samuel Thumma  
Uniform Law Commission  
111 N Wabash Avenue, Suite 1010  
Chicago, IL 60602

July 7, 2023

Dear Mr. Thumma and Members of the Determination of Death Act Committee:

Regarding the potential revision of the Uniform Determination of Death Act (UDDA), Human Life Alliance strongly encourages the **repeal and replacement** of the current UDDA with the model statute below.

The new Act should protect human life until death with no evidence of biological life. Death should be listed as the cessation of a person's life through the natural stoppage of cardiac, respiratory, and neurological activity.

There is no ground for legal presumption or less secure criteria. The right to live is the most basic right. The State is obligated to protect the person's right to live until death.

The public has not been informed that a person declared dead by neurological criteria (DNC), i.e., "brain death" (BD) has a beating heart, circulation, respiration (exchange of oxygen and carbon dioxide) even if using a ventilator. Urine production, digestion, waste excretion, wound healing, temperature maintenance, and homeostasis of interdependently functioning organs and systems are present. There may even be the ability to carry and nourish the baby in the womb if pregnant. The BD patient may be called a "corpse," but is not a corpse nor suitable for burial, cremation, or vital, unpaired organ excision.

BD criteria are based on bedside observation of lack of *functions*, presumed to be "irreversible" or "permanent." Neither can be tested empirically. They do not require **necrosis** or **destruction**.

The apnea test is part of BD testing. During the apnea test procedure, a life-supporting ventilator is disconnected for up to 10 minutes. There are no benefits to the patient, only risks of harm.

A statute ought to protect any person from being declared dead when still alive. Full and complete information about the apnea test and any tests used to declare BD must be provided with freedom, at any time, by patients, surrogates, physicians, and other health care providers, to decline or cease the apnea test, exams, and protocols, for the determination and declaration of BD.

Treatment options ought to be made available that protect and preserve the life of the patient, even if disability is a potential outcome. Treatments should not be denied based on "quality-of-life" judgments by caregivers even though a patient or surrogate may legitimately refuse them.

A **Model statute as listed below**, sets a minimum criterion before death is declared. This fulfills a change in state of the three vital systems to protect living patients from being treated as dead.

**"No one shall be declared dead unless respiratory and circulatory systems and the entire brain have been destroyed. Such destruction shall be in accord with universally accepted medical standards."**

Thank you for your time and consideration.

Sincerely,



Joe Langfeld  
Executive Director