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Engineering English 2/3

30 January 2023

Covert Consciousness Persuasive Essay

Human life is the most valuable thing any person can have and has often been undervalued throughout human history. To make a decision regarding the life of another individual, every option, possibility, and outcome should be weighed thoroughly as well as consideration toward every person within someone's life. With that being said, the most educated people who have their hands on the situation and are fully aware of the facts regarding the situation while also excluding any biases should be the ones to decide whether someone lives or dies when they are in a comatose state. In every scenario regarding someone in a comatose state, the doctor treating them and watching over them is the most knowledgeable about their situation and will be able to make the best and least biased decision regarding their care and future life.

Doctors are unequivocally the best people to make decisions about whether to take people off life support because they undoubtedly know the most about each situation. This is especially true when considering the next closest people to each case are those who love the patient and will be (reasonably) biased regarding that person's life. If it was up to most families, it could be safely assumed that they would keep their loved one alive for as long as possible considering there is always a chance their loved one could develop some sort of covert consciousness as they are in a comatose state. If loved ones are educated on covert

consciousness, then they would be aware that, “The methods may not detect intentional brain activity in some patients who later regain consciousness (Claasen and Edlow).” Loved ones of those who are in a comatose state could be hanging onto hope that the person they are watching over may regain consciousness eventually, even if covert consciousness is not initially detected. This would provide many with false hope and cloud the decision whether or not to keep the one they love alive. This would leave the doctor as the best person in this situation to make a decision about one’s life.

I do think that consciousness should be redefined within the medical community, especially as technology advances to a point where covert consciousness will be able to be consistently identified. It’s impossible to determine a specific timeframe in which a patient should remain on life support before a decision is reached because it is something that should be observed on a case by case basis, not something that can fall under an umbrella. Some patients can recover consciousness or display signs of covert consciousness relatively quickly whereas, “Recovery of consciousness...is quite possible in some patients, even after a prolonged time (Claasen and Edlow).” When considering the amount of technology currently needed to determine whether someone is conscious or unconscious when they are in a comatose state, this begs the question of equality when it comes to affording the tests necessary to determine consciousness. It is well known that minorities often have access to less resources due to systematic reasons and cases of suppression so this would likely lead to less identification of covert consciousness among minorities.

Covert consciousness is still a relatively new concept and it takes careful consideration when determining how to handle seemingly unconscious patients. Leaving decisions regarding

comatose patients to the experts is likely the best course of action as we continue to find out more about covert consciousness everyday.

Work Cited

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