

# From Circle to Square: Integrity, Vulnerability and Digitalization

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## 1. Introduction

The principle of integrity emerges in various contexts and seems applicable to a broad range of entities. For example, one may speak about the integrity of nations (to be safeguarded from external intrusions), about the integrity of lab animals (exposed to animal experimentation and genetic modification) or even about the integrity of species (endangered by biotechnology). We may also speak about integrity as a virtue, pertaining to a human subject, for instance when referring to the integrity of politicians or physicians. In my paper, I will restrict myself to the integrity of one particular ‘entity’, namely the human body, an issue that is complicated and perplexing enough for one paper. Can we, as Peter Kemp elsewhere in this volume phrases it, advance from mere perplexity to complexity? I think we can.

The human body is not an entity that is simply present within our world, not something which is ready-at-hand. We *are* a body, we are embodied beings; our existence is grounded in embodiment (Zaner 1971). Yet, in the course of history, several basic possibilities of experiencing our body have emerged. Therefore, no single explanation of the intriguing phenomena of bodily existence (not even the modern scientific one) can be taken for granted or regarded as incontestable.

The basic contention of my paper is that bodily integrity is an ethical principle in its own right, closely connected with, but still fundamentally different from the principle of personal autonomy. It is to be regarded as one of the basic signifiers or markers of ethics. The meaning of integrity, however, is far from unambiguous. My paper will consist of three parts. The first part entails a concise (rudimentary) conceptual analysis of the term integrity as such. The second part entails a brief historical detour, an overview of the functions it has fulfilled during important epochs in the history of the human body. Finally, I will consider the way in which the principle of integrity currently functions in deliberations concerning organ transplantation. All three parts (the conceptual and the historical part, as well as the part on ‘application’) address the same question: What is integrity? In order to answer this question, we must become aware of the multiple possible meanings (some more apparent, others more hidden) that have become

attached to ‘integrity’ as an ethical signifier. So doing, I will explain why I consider it both legitimate and necessary for integrity to remain available as a basic marker or principle in ethics.

## 2. Conceptual Analysis: Integrity and Vulnerability

Integrity is derived from the Latin verb *integrare* and literally means wholeness, completeness, intactness. The term integrity refers to the body as a meaningful whole, an integrated unity, an intact totality. As Peter Kemp (in this volume) already pointed out, intactness is closely connected with the verb *tangere*, to touch. The word *in-tact*-ness is literally derived from it. *In-tact* simply means un-touched. Integrity refers to an intact (untouched) totality, or rather: something which *ought* not to be touched. The term reminds us of the biblical phrase *Noli me tangere*, uttered by Jesus during his final spooky-risqué meeting with Mary of Magdalene and recorded in the Gospel of John: do not touch me, I am still vulnerable. As we will see, however, there is from the very outset a basic tension between the ontological and the ethical dimension of the concept, between the ontological claim that the human body is in itself an intact totality, and the ethical claim that the human body must be regarded *as if* it were an intact totality, and that the human body *ought* not to be touched (unless conclusive justification is available).

The term integrity can be further clarified by considering its close relationship with the term vulnerability. Unlike integrity, vulnerability must not be regarded as a principle in its own right. Rather, vulnerability refers to the actual state of things. It indicates what we as human individuals really are: vulnerable beings. Our bodies are entities whose intactness will always remain vulnerable, and integrity functions as an ethical principle precisely because we are vulnerable, because our bodily intactness is in danger as soon as we participate in social intercourse. Integrity is a compensating principle that indicates (in general terms) how the interaction between vulnerable, corporeal beings can be organized in a moral manner. In this respect, the functioning of the principle of integrity is quite comparable to the functioning of the principle of autonomy in other areas. Whereas dependence indicates the actual state of things (human beings are actually and inevitably highly dependent upon one another), the principle of autonomy points out (in general terms) how the interaction between dependent human beings should be organized in a moral manner. In both cases, the ethical principle is an explicit negation of the ‘natural’ state of things. Terms like vulnerability and dependence remind us of our initial, original situation. Terms like integrity and autonomy, on the other hand, point out what human

life would look like under ideal conditions. Yet, the basic principles of morality are bound to realize themselves as we allow our actual behaviour to be increasingly regulated by them. This is the moral progress that can be detected in history (if we are willing to consider the recorded facts optimistically enough).

Yet, as soon as we proceed with our analysis, the principle of integrity shows itself to be everything but unequivocal. Several basic possibilities for understanding the principle of integrity present themselves. Again, this is quite comparable with the principle of autonomy. If we interpret autonomy in accordance with the liberal tradition of Locke and others for example (as Tristram Engelhardt and others have done), autonomy is identified with the basic ability of persons to give or withhold their permission or consent. If we interpret it along Kantian lines, however, autonomy will rather indicate the basic possibility of the moral subject to act in accordance with the Law of Reason. And if we interpret it in Christian terms, autonomy is the right not to be impeded in living a religious life. Likewise, there are several basic, more or less equivalent possibilities for interpreting the principle of integrity. In this contribution, two such possibilities will be considered, namely the Liberal and the Christian understanding.

According to the Liberal understanding of integrity, I (the human person) am the owner of my body. No one has the right to intrude upon, or use my body (or parts of my body) without my consent. No one is entitled to violate the integrity of my body without my permission, simply because it is my body. Although still a moral concept, integrity has become a juridical term as well. Ownership and consent are the basic issues. In principle, my body is not at the disposal of others. Within a Liberal perspective, however, a more radical and a more moderate elaboration can be distinguished. In the one case, ownership of the body is regarded as absolute. The human person has full ownership over his / her body. He / she is the owner and has the right to use his / her body as he / she likes. If someone wants to sell parts of his / her body, mutilate it, or drastically change it by means of surgery (in the absence of medical necessity), no one can deny him / her the right to do so. In a more moderate interpretation of ownership, however, to own your body is comparable to owning a work of art. Ownership does not imply the right to damage it, or drastically alter it. Rather, its intactness has to be respected and protected. This is a duty the owner qua owner has. Likewise, although we are the owners of our body, we are not entitled to destroy it, and our moral sway over it is limited.

What basically characterizes the Liberal understanding of integrity is that it emphasizes the duty of *others* to respect the integrity of *my* body. The Christian tradition, however, primarily focusses on *my own* duties towards my body, rather than on those of others. What basically

distinguishes the Christian understanding of integrity from the Liberal one is that the Christian understanding stipulates the obligations I myself have with regard to my own body. I am not the owner, but rather the steward of my body. My basic moral condition is one of stewardship, rather than ownership. The ethical implication of this is that I have to manage and care for my body in such a manner that its integrity, intactness and wholeness is safeguarded and secured. The body is temporarily placed under my guardianship and trust, but the true owner of the body remains He who created it.

Michel Foucault (1994) has explained how the Christian view of body management differed from the Greek and Roman ethic of body-management, in vogue during antiquity. Similar to the Christian view, he tells us, the Greeks and Romans took it for granted that the ethical principles concerning the body indicate the way in which *we ourselves* are to manage our own body, and to make use of the possibilities it offers. Yet, whereas the Greek and Roman ethic was directed at self-mastery and temperance, in the Christian era this ‘manly’ model of body-management (emphasizing self-mastery) gave way to a more ‘feminine’, Christian model (emphasizing the preservation of integrity). From now on, Christians had to preserve the intactness, the integrity of their body. This is clearly pointed out to us, for example, by Paul in his first Epistle to the Corinthians. Our bodies, he tells us, are the organs and limbs of our Lord and master (6:15). We are not to spoil our body, because it belongs to God. The body is God’s temple (3:16-17). It is not for fornication, it is for the Lord (6:13). We do not belong to ourselves, but are to honour the true Owner through the way we keep our bodies (6:19-20).

We are now already entering the history of the moral significance of the body. Three historical models seem to present themselves, namely self-mastery, stewardship and ownership. In at least in two of them (namely Christian stewardship and liberal ownership), bodily integrity functions as a key issue. Let us look into these historical models, these basic possibilities for experiencing the body more extensively.

### **3. Historical overview**

#### **a. Antiquity**

Although Foucault rightly observed that the body ethic of antiquity was formulated mainly in terms of self-mastery, this does not mean that the notion of integrity was completely absent at that time. To begin with, the idea of integrity was artistically visualized in a rather prominent way. The human body was idealized in an unprecedented manner by ancient art-works, ancient

sculptures. The plastic arts of antiquity produced countless statues that portrayed the ideal image of the human body as an intact whole, thus conveying and furthering the idea of physical integrity. Jacques Lacan pointed out that the very idea of human dignity first impressed itself on the minds of ancient Europeans via these statues that were erected alongside Roman roads (1981, 23:3). These statues opened up a moral dimension that had not been there before. They indicated that there is something in human beings, even in their physical appearance, that demands respect. Thus, they inserted a new moral principle into the world. In the course of history, however, a shift gradually occurred from a more or less aesthetical towards a legal, and from an ontological towards an ethical understanding of integrity.

The idea of integrity, in the sense of physical completeness and intactness, was also present in the ethico-medical discourse of antiquity. As Lacan (1994) rightly points out, during antiquity the heavenly bodies functioned as the ideal image and standard of completeness. One of antiquity's basic intuitions was that unimpeded, undisturbed movement would result in a spherical form, a perfectly circular orbit. Under ideal circumstances, human life would be as spherical as the shape and orbit of heavenly bodies, although in real life, human beings meet with all sorts of disturbances and violations, thus experiencing all sorts of intrusions and deficiencies. Our intactness proves rather vulnerable. Yet, the heavenly bodies remained the ancient standard of human perfection. This influential view found itself relentlessly ridiculed by Aristophanes in Plato's *Symposium*, where he took the logic of sphericity to its absurd extreme by arguing that, originally, human bodies must have been completely spherical, which means having four feet, four arms, two genitals (forever united), etcetera. Zeus dissected the representatives of this original race, however, and ever since the human body displays the scars that indicate the loss of this primordial integrity or wholeness. In short, the desire to restore one's physical integrity is but a ridiculous dream, according to Aristophanes.

#### b. Medieval Christianity

Throughout the middle ages, there was a clear awareness concerning the vulnerabilities and deficiencies of the 'real' human body. Nonetheless, the idea of the body as a complete whole flourished as well, amounting even to its glorification. Although we have become used to stories (by Nietzsche and others) that tell us how intensely Christianity despises the body, and how eagerly it endorses a negative view on bodily life, this is a rather one-sided picture. God has established the human body with the best possible constitution, Thomas Aquinas tells us, and we

could not have been better fashioned (1922, Ia. 91,3). According to medieval discourse, the actual integrity and dignity of the body is something which is presently lost, but may be re-established. In fact, the present condition of the human body is situated between two extremely powerful images of bodily intactness.

The first medieval image of bodily intactness pertained to humans *in statu innocentiae*, that is: in Paradise. In his *Summa Theologica* Thomas Aquinas provides us with a charming “theological fantasy” (Bernath 1969, p. 73) of bodily life in Eden, under ideal, utopian circumstances. Like the heavenly bodies (but due to God’s supernatural support), human bodies in Paradise were incorruptible, imperishable, unimpeded, un-intruded (Ia.97, 2). They did not suffer, they only enjoyed. Their bodies did not sweat nor smell, and although they did consume food and therefore defecated, their excrements had nothing disgusting or indecent about them (Ia.97,4). They had intercourse with one another, but without harming their integrity by doing so, while the pleasures they experienced were much more intense than they are at present (Ia.98, 2).

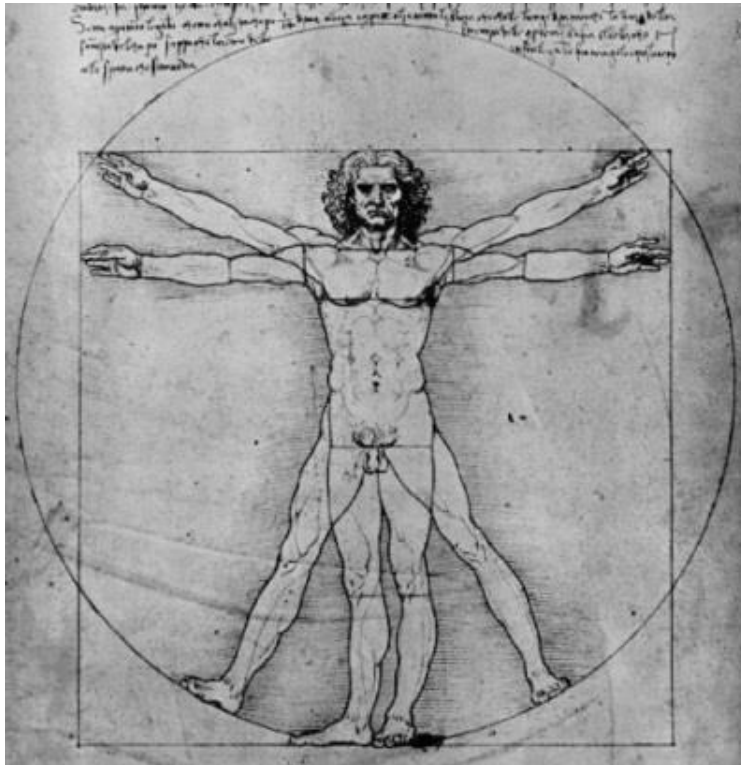
In its present state, the human body is no doubt corruptible and vulnerable. It is indeed a suffering, ageing, smelling, defecating body, damaged by disease and improper food, unable to copulate without endangering its integrity. In short, medieval theology basically subscribes to an image of the body in terms of deficiency and lack. But this does not mean that the body is despised altogether. Rather, we are to guard and protect what is left of its integrity most carefully. Integrity no longer functions as a description of the actual state of things, but rather as an ethical ideal, an ethical demand. While eating and drinking, while having sex and getting married, in short: while performing all the necessities of sublunary life, the preservation of integrity functions as a basic moral standard for proper human conduct.

A second forceful medieval image of bodily intactness and completeness pertained to a future existence of body and soul, forever united, beyond history. As long as the soul, after departing from its earthly existence, dwells in heaven without the body, Thomas Aquinas and other scholastics tell us, its happiness cannot be complete. Christians for many centuries sincerely believed in the resurrection of the body, the glorification and transfiguration of the body on Resurrection Day. Even in heaven we remain incomplete (and cannot experience complete enjoyment) as long as our bodies are not restored to us. Paul, in his first Epistle to the Corinthians, after comparing the splendour of earthly bodies with the splendour of heavenly ones (15:40), assures us that what is sown as perishable will be raised imperishable. At the last trumpet-call, we shall not die but we shall all be transfigured, in a flash. The dead will rise

imperishable and their resurrected body no longer display the injuries and deficiencies of the 'real' one (15: 42-53). It will be a *corpus gloriosum*, resulting from a *restitutio ad integrum*.

### c. The Renaissance

The Renaissance witnesses a remarkable resurgence of the ancient idea that bodily perfection can be realized within the context of mundane existence. By means of self-care and exercise, man is able to improve himself into an elegantly cultivated harmonious body and to realize the typical



grandeur of Renaissance man. The Renaissance quest for bodily perfection basically relied on the idea of ideal proportion. The Renaissance body was both a work of art and an object of science. Its representation of the body amounted to an idealization, an effort to present the body as a perfectly harmonious *Gestalt*. The body as an ideal image thus functioned as a symbol conveying the idea of humanity and human dignity.

A very telling representative of this artistic experience of bodily existence is no doubt Da Vinci, most notably his famous drawing known

as *The proportions of the human figure*. It presents us with an ideal aesthetic image of human perfection (cf. Zwart 1998b). This is stressed by the spherical nature of human form and movement, indicated by the circle. According to the Renaissance ideal, the moving hands and feet of the human body adhere to a circular scheme. Yet, something fundamental is about to change. Another, more modern view of the human body is already visible in the drawing. Notice the presence of the square, moving the body into a different kind of space, one which allows it to become quantifiable, to become determined in terms of spatial extension, a space form that is structured by the coordinate system of Descartes.

Whereas the ancient and medieval body (from Plato up to Hildegard von Bingen and Thomas Aquinas) remained firmly under the sway of the circle, the modern body image will become subjected to the sway of the square. In Da Vinci's drawing, the aesthetical and the mathematical, the circle and the square rival one another for precedence.

In subsequent drawings by Leonardo, the emphasis gradually shifts from ideal proportion to empirical reality. Blood circulation, the respiratory system, the urological system and other 'systems' are carefully disentangled from one another, are dissected separately, removed from the body as a unitary whole. The body is increasingly described in mechanistic terms. In fact, Leonardo's anatomical studies partly coincided with his ingenious hydraulic and mechanical studies and inventions (Zwart 1998b). He increasingly adheres to a mechanical and modern perception of bodily life. The presence of the square (as a symbol of modern topology) in his earlier drawing already announced the emergence of a different, 'Cartesian' gaze.

#### d. Modernity

Once the square (as an emblem of modern mathematics) is firmly established, the circle is bound to disappear. The body's integrity is disregarded and dissolved, the body is measured, dissected, invaded and exposed. In later drawings by Da Vinci, the body is already opened up, and in the body's inside the anatomist Da Vinci does not discover a beautiful, perfect whole, but rather a set of systems composed of tubes, pipes, pumps and passages; something like a hydrodynamic machine. Due to the powerful gaze of modern medicine, the body increasingly falls apart, eventually even pulverizing into chemical substances like proteins and finally the nucleotides of DNA.

Yet, at the same time, the integrity of the body is rediscovered and reaffirmed by modern science. *The Integrity of the Body* is the title of a book published by E.M. Burnett in 1963. It is not about ethics, but about immunity. From the 19<sup>th</sup> century onwards physicians came to understand diseases in terms of specific organisms invading the body from outside. It was discovered that the body contains a series of compensating systems and mechanisms for preserving its integrity and intactness in the face of these foreign intrusions. The natural state of man, Burnett tells us, was not Eden or Heaven. Rather, in their original condition, humans were subject to a wide range of parasitic diseases. At present, however, science can assist the body "in its demand for maintaining its own integrity" (p. 14), interpreted in terms of "chemical and cellular consistency" (p. vi).



And yet, although these scientific insights into the mechanisms of immunity can be used to support the integrity of the body, immunology as such adheres to the basic tendency of modern medical science to dismantle the body's wholeness and reframe it as an intricate compilation of systems, tissues, proteins and particles. Moreover, as medical science advances, the integrity of the body becomes a problem in its own right. Notably in the case of organ and tissue transplantation, the immune system of the body constitutes a serious *obstacle* to transplantation medicine. As bodily integrity is violated by the invasion of foreign tissues, the efforts of the body to restore and maintain its harmed integrity have to be repressed.

Whereas the integrity of the body is reinterpreted and reaffirmed in immunological terms, it finds itself increasingly dissolved by the powerful gaze and intrusions of modern medicine. Simultaneously, it is in ethics as a *compensatory* discourse that the term bodily integrity resurges and reaffirms itself. Integrity has now become a moral concept. The threat to the actual integrity of the body constituted by modern science is counterbalanced by the ethical demand to preserve the integrity of the body in its moral sense. Whereas science increasingly discovers the vulnerability of the body, ethics reaffirms its moral integrity and 'inviolability'.

#### **4. The Case of Organ Transplantation: the Dutch Experience**

In The Netherlands, the principle of bodily integrity is affirmed in the Constitution (Zwart and Hoffer 1998). Article 11 explicitly states that everyone has a right (in principle) to the inviolability of his or her body. One of the reasons for including this article in the Constitution was a public debate on the legal status of prisoners. Although it is generally regarded as justified to intervene in the private life of prisoners, and to force them to participate for example in the daily schedules of prison life, the individuals involved still retain the right to have their physical integrity respected. For this reason, it is regarded as unjustified to submit prisoners to corporeal punishment or to involve them in medical or scientific experiments without their free and explicit consent. Also the emergence of transplantation medicine reinforced the suspicion that in the future, the integrity of the body might be endangered. As a result, a liberal Member of Parliament successfully advocated the recognition of the principle of integrity as a basic constitutional principle in its own right. It is not allowed to intrude upon the integrity of the body without the free and explicit consent of the person involved.

As for organ transplantation, Article 11 discouraged the introduction of a legal system (advocated by some) that regarded the harvesting of organs justified if the person involved had not explicitly objected to becoming a donor, in favour of a system that regarded the harvesting of

organs justified only if the person involved had explicitly consented to it. In those cases in which potential donors had not explicitly indicated their preferences, the next of kin, who could now be regarded as the 'owners' of the body, should be asked for their permission. Recently, however, a new law on organ donation was passed. It enabled the government to introduce a system of central registration. In 1998 in fact, all adult Dutch citizens received a letter from the Dutch Ministry of Health urging them to indicate whether or not they were willing to act as organ- and tissue donor in the event of death. It was also possible to authorize the next of kin to take the decision. This initiative was accompanied by a series of campaigns informing the public about donorship and urging everyone to give 'Yes' for an answer, in view of the limited number of organs available for transplantation medicine at present.

It turned out, however, that for a considerable number of citizens, donorship constitutes an issue of unease. Campaigns that intended to promote donorship presented the public with ideal images of restored intactness, with visions of restored integrity. One particular commercial, for example, was about a handsome kidney patient who, after receiving a donated organ, became perfectly healthy again and decided to get married, instead of suffering a continuous decrease in quality of life and dying a premature death. Images like this one trigger our moral sensibility, no doubt, but arouse suspicion as well. Do they tell the whole story? We know, for example, that after organ transplantation, the wholeness of the body will only partially be restored. Life-time monitoring and continuous intake of medicine (in order to repress the body's immune system) is the inevitable fate of recipients involved. Moreover, the intake of medicine may well in the long run undermine and damage physical intactness.

Furthermore, accounts of family members or health care workers active in Intensive Care units may contain uncanny and unsettling tales about what actually happens to bodies that are being made available for organ donation. Audiences of such tales may be horrified by the inevitable, but often excessive intrusion upon bodily integrity entailed in such stories. On behalf of the harvesting of organs, the body is opened up from collarbone to pubis. In order to justify such drastic interventions, transplantation medicine relies on a process which I elsewhere referred to as digitalization (Zwart 1998b, Zwart and Hoffer 1998). Digitalization demands, for example, that it must be beyond dispute whether or not the donor has consented to the harvesting of his or her organs, and that it must be beyond dispute whether or not the donor has actually died. In order to answer such questions, several techniques of digitalization have been introduced, such as the consent procedure (for instance the Dutch system of central registration), but also the brain death criterium, adopted by the Dutch government. The principle of autonomy also has become an important element within this logic of digitalization, now that autonomy is reduced to the presence or absence of explicit consent.

Yet, there may be a tension between such ‘clean’ procedures of digitalization and concrete experiences of family members. As often happens, before the harvesting of organs, the body of a beloved one still seems to be alive. It is still warm, its complexion is still normal, and it is being taken care of quite intensively. After the intervention, however, they suddenly find this same body to be completely transformed. It has changed into a corpse, it has become cold and deadly pale, and it no longer succeeds in capturing the attention of medical personnel. Even if they are convinced that the patient had died before the intrusion took place, and even if it is beyond doubt that the patient had consented to donorship, instances of moral uneasiness remain. Due to the radical intrusion to which the donor’s body was subjected, its integrity is violated in a radical, yet morally justified manner. Such embarrassing experiences make it quite clear that the principle of autonomy is not the ethical panacea that will take care of all our problems. In order to give voice to a persistent sense of uneasiness concerning organ donation, our moral vocabulary has to be broadened.

A radical liberal perspective may readily advocate the ‘recycling’ of bodily parts. It will even object to the use of term ‘donation’ as such, with its connotation of ‘gift’ and Christian charity. Radical liberalism will rather advocate the commercialization of donorship. In the 19<sup>th</sup> century, a radical liberal Member of the British Parliament already advocated the availability of ‘unclaimed bodies’ - i.e. corpses of inhabitants of workhouses and prisons - for medical research. Yet, the practice of organ transplantation is quite at odds with a basic sensibility of long standing, namely piety - that is: respect for bodily integrity. And this is far from being a ‘natural’ response. For many centuries, Christianity has been combating pagan practices of boiling and burning corpses, or of chopping them to pieces. Notwithstanding the actual vulnerability of the body, its moral integrity had to be respected. This was, for many centuries, a basic item of moral ‘training’ throughout Europe. And indeed, Antigone already regarded the sight of her brother’s corpse, deserted in the field and exposed to wandering scavengers, as intolerable. All of a sudden, however, due to the recent possibility of organ donation, we are urged to re-assess our basic intuitions regarding the body’s inviolability, and this is what causes our uneasiness. Nevertheless, moral traditions such as Christianity and (moderate) Liberalism also contain important notions *in favour* of donorship, such as charity, solidarity and reciprocity. As the Dutch phenomenologist J.H. van den Berg (1961) pointed out, the Christian community had been prepared for the rise of transplantation medicine by certain practices of devotion that for many decades focused on the Sacred Heart of Christ. In the countless emblems and images produced by this religious mass movement, Christ’s merciful heart had already risen to the surface of His body, had already become visible and tangible, available to others: almost ready to donate. And

this emblem of charity compensated for and counter-acted the deeply rooted theological emphasis on the preservation of post-mortal intactness.

## **5. Final Considerations: Real Violability and Moral Inviolability**

Within the concept of integrity, a basic tension exists between its ethical and its ontological dimension. During antiquity, as well as during the Renaissance, the idea of actual physical perfection flourished, but without being incontestable. In antiquity, for example, it was ridiculed by Aristophanes, and during the Renaissance the basic figure of the circle was already eclipsed by the square. In medieval theology, Eden and Heaven were regarded as places where full ontological integrity had been, or will be, experienced. Under mundane conditions, however, individuals have the moral duty to safeguard their body's incomplete integrity. In modern times, aesthetical and ontological understandings of bodily integrity tend to give way to ethical and legal ones. Bodily integrity no longer refers to an actual, complete whole, whose real intactness has to be furthered or secured. Rather, the concept of bodily integrity increasingly adapts itself to the logic of digitalization - everything depends on the presence or absence of consent. Integrity is violated if we are touched without our permission, but secured if permission is forwarded. Several techniques for obtaining such permission have been developed.

In short, the principle of integrity is in danger of being completely identified with the principle of autonomy, while the latter principle is operationalized solely in terms of voluntary consent. If we simply accept this ongoing digitalization of moral principles, however, basic aspects of integrity are bound to be neglected and obscured. This becomes apparent as soon as the principle is applied to recent moral issues like organ donation. If we allow important markers such as integrity to be excluded from the idiom of ethics, or to be appropriated (and eventually eclipsed) by a technocratic ethic of consent, our ability to make sense of important moral sensitivities will dramatically diminish.

The principle of integrity will not allow us to solve all our problems, but it remains indispensable for structuring an important dimension of our moral world. Whereas the strive for actual physical perfection is nowadays regarded as an aesthetical rather than as an ethical pursuit, the ethical insight persists that it is problematic in itself to intrude upon something whose integrity is vulnerable. In short, integrity no longer serves as a model of physical perfection which individuals ought to imitate or copy. Regardless of the actual shape or condition of our *real*, physical / physiological body, integrity or inviolability is something which pertains to our *moral* body. We seem to have two bodies, one violable, the other inviolable. Indeed, it is as if,

besides our actual, physical, vulnerable, violable body we are provided with another, imaginary, inviolable body, namely the invisible, non-empirical, ethical dimension of bodily existence. Regardless of the vulnerable, deficient or even damaged condition of our real body, the inviolability of our imaginary, ethical body maintains itself. The moral, inviolable body is, no doubt, an ethical fiction, but one which is bound to realize itself as we increasingly manage to see its inviolability respected. Whereas the real physical body increasingly loses its integrity - due for instance to the ongoing invasion of artificial bones, teeth, joints, organ parts, etcetera - its moral inviolability constitutes an issue of growing concern. At the same time, new fictions of bodily perfection, new images of complete physical integrity are engendered and encouraged by contemporary medicine. Unprecedented technological possibilities, eventually allowing us to overcome all physical inconsistencies and deficiencies, may effectuate a drastic renewal of our ontological understanding of bodily existence. The question whether this will increasingly allow us to adapt our real bodies to the ideal body images we cherish, of whether the integrity of the actual body (by means of its immune system for example) will continue to offer resistance, remains as yet undecided.

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