

## To Be or Not to Be Immortal

In Book I of the *Republic*, Socrates has a discussion with the elderly Cephalus. Cephalus grumbles that he is unable to visit Socrates and Socrates does not come to see him often enough. They discuss whether or not being old is harder than being young and Cephalus lists some of the complaints of the elderly:

‘They say they miss the things they used to enjoy when they were young . . . as if then they had lived a wonderful life whereas now they’re not alive at all. Some of them also complain about the lack of respect shown by their families to old age and under this heading they recite a litany of grievances against old age.’<sup>1</sup>

But suppose they lived at a time when an immunisation administered at birth made us immortal, preventing illness, with none of the deterioration associated with ageing. Would such a life be preferable?

In this essay, I argue that for most of us it would not. This is partly because immortality is unattractive for many of us, but also because immortality is incompatible with health, even on a narrow conception of what health is. However, there are some people in a specific set of circumstances to whom this would not apply. For them, an immortal life free from illness might be preferable after all.

### Some assumptions

For reasons of space, I ignore wider social implications such as sustainable population growth, environmental impact, the ethics of eliminating disease. Partly for the same reason, I also make some assumptions that I do not justify, some of which I take to make a stronger case against my argument and to pose a more interesting question:

- i. Everybody receives the immunisation.
- ii. The concept of health is a narrow one: health is just the absence of disease.<sup>2</sup>
- iii. ‘Health’ includes physical and mental health.
- iv. There is such a thing as mental illness<sup>3</sup>
- v. There is no afterlife.

### God and Superman

There are two sorts of immortality allowed by the thought experiment:

#### *The Superman model*

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<sup>1</sup> *Republic* 329a-b, Griffith’s translation.

<sup>2</sup> CF Boorse ([1977], p.567, [1997], p.86, [2011], p.27. This is obviously controversial- see Kingma (2007), (2010), (2012), (2012).

<sup>3</sup> Anti-psychiatrists e.g. Szasz (1961) would disagree – for a convincing argument against this, see Papineau (1994).

This is the sort of immortality Superman has. He might live forever, but he might also die if he is exposed to too much Kryptonite. On this model, we require a booster injection and can opt out of immortality by refusing it.

### *The God model*

On this model, we are more like God; the immunisation never loses its potency and we remain alive and healthy eternally.

### Less is more?

Why might we want to be immortal and healthy? There are two sorts of related reasons. The first concern undesirable things associated with mortality and illness that we could avoid if immortal and healthy. The second concern goods that would be available to us if we were immortal and healthy.

The obvious and intuitively plausible argument I consider here is that illness and ageing involve a great deal of suffering, which we would avoid completely in this thought experiment. There would be no fear of dying or exploitation because of age and illness. Nor would we need to care for or worry about the ill or elderly. It would give us more time and the physical and mental ability<sup>4</sup> to do the more of things that we think are valuable well and for longer; pursue projects, cultivate relationships, learn. This would surely be preferable.<sup>5</sup>

There are however a number of possible objections. Among these are that moral positives arise from illness. Without illness, we would not be able to visit or care for the ill and elderly. This objection is easily dispensed with; it uses people's illnesses and the suffering that goes with them as a means to a (selfish) end, which is unpalatable.

It might be argued that being mortal is essential to being human and in losing that we are no longer human beings – to be human is to be mortal, even if to be mortal is to suffer. However, this simply question begs; as Chappell puts it, 'our question here is whether immortality would be desirable even if we were not just finite biological beings.'<sup>6</sup>

We might make a more controversial argument. The above argument assumes that illness involves suffering. However, suppose I am a saxophonist and have synaesthesia, which, without being intrusive or overwhelming, gives me perfect pitch and helps me to improvise. My synaesthesia involves no suffering and allows me access to abilities, pleasant and useful experiences I would not otherwise have. Consequently, there are at least some people whose illnesses are positive enough that they would rather be mortal with their illness than immortal without it. However, it might simply be argued that synaesthesia is not an illness – and having synaesthesia forever would be even better.

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<sup>4</sup> This is important – compare the Struldbrugs in 'Gulliver's Travels'. Their immortality is torturous partly because they eternally age and decline, becoming blinder, deafer etc. – thanks to Daniel Vasquez for reminding me of this example.

<sup>5</sup> E.g. we might think Ivan, on his death bed, yearns for something like this 'to live and not suffer . . . well and pleasantly' (Tolstoy, *The Death of Ivan Illych*).

<sup>6</sup> Chappell (2007), p.35.

Perhaps there are diseases which could be positive, despite involving a lot of suffering.<sup>7</sup> For instance, a breast cancer sufferer might be motivated to offer support to other sufferers. Perhaps she has some secondary gain e.g. receiving more attention from friends. It might also result in her valuing life more. However, it seems counter-intuitive to think that this would be positive enough to make the illness desirable or to outweigh immortality, especially given potential further illnesses – even if a little illness is a good thing, a lot is not. Further, it seems that valuing life more is the result of the realisation that our time is finite and therefore precious. We might think there would be no need for this if immortal; given either infinite time or as much time as we want, we could pursue both those things that really matter to us and those that matter less, without urgency or sacrificing anything.<sup>8</sup>

However, there are other examples involving suffering which might nevertheless be positive enough to sacrifice mortality. For instance, in ‘The Secret Life of the Manic Depressive’,<sup>9</sup> many interviewees say that if they could ‘turn off’ their bipolar disorder, they would not, despite severe bouts of illness and the risk of developing further disability, illness and even premature death. Given that they are prepared to accept all of this in exchange for their illness, it seems plausible that they would choose a mortal life, with all of the illness that might involve, over a healthy immortal one. This might be partly because in these cases, in addition to being positive, the disease is related to identity<sup>10</sup> - whereas cancer *attacks* you,<sup>11</sup> you *are* bipolar.

One response to this might be to claim that these sufferers are simply wrong – and wrong because they are ill. However, many of them are relatively well and can argue perfectly cogently. I suggest that we cannot discount such experiences without being ‘epistemically unjust’<sup>12</sup> - that is, without taking their experience seriously, as a result of a bias against the mentally ill.

This need not prohibit us from claiming that somebody in the grips of their mental illness is wrong. For instance, somebody with severe anorexia might well connect their disease with their identity and choose a life of mortality with anorexia, risking further illness and premature death, over immortality without it. We can maintain that such a choice would be wrong and one that the sufferer would not make if he or she were relatively well.<sup>13</sup>

At least in some cases then, it seems that a mortal life with illness and suffering would be worth sacrificing health and the extra time that immortality begets. In fact, in Strakhov’s account of a conversation with Dostoevsky about his epilepsy,<sup>14</sup> Dostoevsky comes close to close to saying just that:

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<sup>7</sup> See Carel (2008).

<sup>8</sup> But see my objection later.

<sup>9</sup> BBC (2006).

<sup>10</sup> Albeit in a complex way e.g. Hornbacher says bipolar is ‘a rotten guest’ (p.226) but also ‘It and I blurred at the edges, became one amorphous, seeping, crawling thing.’ (p.7).

<sup>11</sup> See Sontag (1978), for a discussion of cancer as metaphor.

<sup>12</sup> Fricker (2009).

<sup>13</sup> Note, we can and should take his or her experiences seriously in the sense of being real, albeit misleading e.g. the fear of weight gain.

<sup>14</sup> Anti-psychiatrists would accept epilepsy as illness, since it has an obvious biological cause.

“I would experience such joy as would be inconceivable in ordinary life – such joy that no one else could have any notion of . . . the most complete harmony in myself and in the whole world and this feeling was so strong and sweet that for a ***few seconds of such bliss I would give ten or more years of my life, my whole life perhaps***” . . . because of his fits he would sometimes bruise himself in falling, his muscles would hurt . . . he would feel utterly broken . . . he could scarcely overcome his anguish . . .<sup>15</sup>

‘In the desolation of Boredom and the clutch of Giant Despair’<sup>16</sup>

The argument above demonstrates that illness and mortality might be preferable for those of us who suffer illnesses that are tied up with identity and positive symptoms like those that can be found in bipolar disorder and epilepsy. What about the rest of us?

Williams’ famous objection to immortality is that it would be intolerably boring and devoid of meaning. He uses the example of a story/opera in which the protagonist, Elina, is given a potion which extends her life, resulting in ‘boredom, indifference and coldness’,<sup>17</sup> not resembling her former self at all, despite apparently being healthy throughout.<sup>18</sup> She refuses to take the potion again, which would extend her life further. Williams uses this example to motivate a discussion of why such a response would be appropriate.<sup>19</sup>

He argues that the state in which I would find myself in when immortal should be consistent with the reasons I currently have for seeking to live any longer. Given infinite time, I would effectively run out of things I want to do, forced into repetition, and like Elina, lose interest and my identity<sup>20</sup> and if possible, opt out of immortality altogether. It is the loss of my character and the sheer repetitiveness and tedium that would make an immortal life meaningless and undesirable.

An objection to this is that I would not remember enough of my previous experiences to ever get bored. This is not convincing. Suppose I tasted broccoli aged two and four and seven and disliked it every time. Despite not remembering any experiences of eating broccoli, at fourteen, I dislike it so much I refuse to eat it. Thus, earlier, repeated experiences can constrain the sorts of things I find enjoyable in the future, even if I do not remember them.

Chappell argues that, despite changes in her interests, there are further problems with Williams’ argument. Firstly, Elina would not lose her identity. This is convincing. After all, what is of the utmost important to us often changes – even aspects of our moral characters. For instance, I might be convinced that euthanasia is morally acceptable at fourteen and

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<sup>15</sup> In Frank J, Goldstein DI. [1987].

<sup>16</sup> Dickens, *Bleak House* p.154.

<sup>17</sup> Williams (1973), p. 82.

<sup>18</sup> Galloway (2012), p.1088.

<sup>19</sup>Note an important difference from my thought experiment– whereas Elina ends up alone, in my thought experiment, everyone is immortal. Despite this, I suggest we would end up in the same situation (see below), contra e.g. the picture that emerges from Borges’ ‘The Immortal’.

<sup>20</sup> As Galloway (2012), p. 1088 points out, Williams suggests that this decimates *moral* character, making the cost higher.

dedicate a lot of time campaigning for it, but change my mind at thirty and lose interest in campaigning for my beliefs altogether. Thus, our reasons for seeking immortality might be completely different at different points in our lives. This happens without losing my identity because I am psychologically continuous with – or at least connected to - my former self.<sup>21</sup> Since our reasons for seeking immortality might be completely different at different points in our lives, we could be immortal without losing our identities.

Chappell's second objection is that boredom and repetition are not concepts that are fleshed out enough. Suppose, I listen to a beautiful piece of music many times. Would it count as repeating the same experience? If not, would we ever get bored of it?<sup>22</sup> As I argued above, not explicitly remembering previous experiences does not prevent us from being bored by them. Thus, even with projects that are very close to our heart and in a community of immortal people, we could get bored of experiences, despite their not being identical. Suppose I alternate listening to Pink Floyd with climbing Mount Kenya with a good friend over and over again for eighty years. It is likely that I would get utterly fed up of listening to Pink Floyd, climbing the mountain and even talking to my friend, despite each experience being slightly different and being the sorts of things that I currently enjoy and value. Thus, what makes Sisyphus' fate so cruel is not just that his task is a difficult, purposeless one,<sup>23</sup> but that he is doomed to repeat similar tasks forever – and it would become excruciating even if he was initially a fitness fanatic and found it an exhilarating work out.<sup>24</sup>

Further, although I can change what is centrally important to me when I get bored, there are only a limited number of experiences, including joint endeavours, that I can enjoy before I get bored because of their similarity, despite experiences not being exhaustible. Thus, I would eventually run out of centrally important things to pursue. Even worse, although a member of an immortal community in my thought experiment, everything would lose its value for me - despite counting as the same person among friends, I end up miserable, wondering why I ever enjoyed spending time with them in the first place.

It seems then that William's argument for the tedium of immortality is convincing. However, we might still think immortality preferable. On the Superman model, I could simply refuse my next immunisation when life loses its meaning, just as Elina refuses to drink the potion again. I would still have more time and health, achieve more and have a better life overall. Surely even immortality that results in eventual meaninglessness is better than dying of tuberculosis aged six? Justifying this on the God model is more difficult, given the sheer scale of time living with meaninglessness and the eventual lack of value attached to everything. However, somebody might just conceivably argue that this is still a worthwhile trade-off because of the period of enjoying and valuing things that matter to me.

However, boredom is not the only problem. Prioritising depends on recognising that our time is finite. For instance, if I only have a day in London, I might decide to see St. Paul's and skip

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<sup>21</sup> Chappell (2007), pp.38-39, Parfit, D. (1984).

<sup>22</sup> Chappell (2007), p.39.

<sup>23</sup> Taylor (1970), pp.262-263.

<sup>24</sup> Contra Galloway (2012), p.1090.

the Tate. Further, death motivates us to pursue things that really matter to us. The closer we get to death, the more the pressure mounts to pursue things that really matter to us.

Conversely, it seems to be denial of our mortality that results in failing to prioritise, or in some cases, to do anything at all, just as failing to acknowledge that my time is finite that allows me to quite happily procrastinate and watch television to kill time or get bored, despite having not exhausted important things to do. Think of the 'bucket list'. Why, we might ask, have people not ticked off items before they are terminally ill? Part of the answer might be practical e.g. saving money for the future. But part of it will often be having ignored their own mortality.

The approach of others' deaths also has this effect, for example, visiting my grandparents in another country only when they become seriously ill, after repeatedly postponing it. Time's finitude motivates us to act and the recognition of the approach of death, both our own and others, encourages us to engage in things that are at the top of our priority list. Ignoring time's finitude and closing our eyes to death allows us to get bored and overlook centrally important things.

Of course, sometimes, as Chappell points out, the recognition of a time limit is not always good; I might write an essay sloppily when faced with an approaching deadline, whereas I would have the time and space to write something well without one.<sup>25</sup> Similarly, if immortal I could spend more time with my grandparents and they, unlike Cephalus, would be healthy enough to visit me. Further, doing things in a particular order simply would not matter; on the God model, I have forever and on the Superman model, as long as I like.

However, imagine there is no deadline for my essay, no time limit on finishing my degree, no pressure to get a job. I might never bother to finish my degree, and even if I really enjoy it, find myself bored or engaged with activities that I do not value - playing computer games, lying in. The same would hold if I imposed my own deadline. The lack of autonomy in choosing the deadline is part of what motivates me to complete projects. If there were no time limits at all for anything at all or only self-imposed deadlines it is not, I suggest, that we *could* not pursue things that really matter to us, but rather that we *would* not. The problem here is not only boredom but apathy;<sup>26</sup> not only would we run out of enjoyable things that matter to us but we would lack the motivation to even seek them.

Someone might argue that if immortal, boredom itself would motivate us to eventually move on to different projects. Apathy would not set in before boredom and we might prefer an immortal life (on either model) simply in virtue of being able to achieve more. However, this does not seem true even while mortal. Even though I know that I have limited time to complete an essay, I procrastinate and get bored, despite knowing that there is something else important and enjoyable I could do, or even while I know I will enjoy writing the essay once I am sitting at my desk and start.

On both models, this looks like a real problem. On the God model, even if we thought we could defend its being preferable in spite of the boredom objection, once we consider the

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<sup>25</sup> Chappell (2007), p.32.

<sup>26</sup> Galloway (2012), p.1089 suggests apathy is the real problem for Elina.

apathy objection, this seems to be implausible. The very reason for finding immortality attractive turns out to be false because we would lack the motivation to achieve more. On the Superman model, the possibility of living forever and the autonomy we would have in choosing when to opt out of this would have the same result.

However, suppose the absence of illness is not only a good in terms of what it can get us, but a good in itself.<sup>27</sup> Might health be a significant enough good to make this a worthwhile trade-off?<sup>28</sup> In the next section, I argue it would not be.

### Immortality - all it's cracked up to be?

Consider the criteria for depression according to ICD-10:

Key symptoms:

Persistent sadness or low mood; and/or\*

Anhedonia\*

Fatigue/low energy\*

(at least two of these, most days, most of the time for more than 2 weeks)<sup>29</sup>

Associated symptoms:

Low self-confidence

Guilt/self-blame<sup>30</sup>

Suicidal thoughts/acts \*<sup>31</sup>

Poor concentration/indecisiveness\*

Agitation/slowing of movements\*

Sleep disturbance\*

Appetite changes \*

Not depressed (<4 symptoms)

Mild depression (4 symptoms)

Moderate depression (5-6 symptoms)

Severe depression (8 or >8 symptoms)<sup>32</sup>

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<sup>27</sup> It is difficult to square this with a negative concept of health, but I grant this in order to make the strongest case for an objector.

<sup>28</sup> For those of us for those of us who would not find particular illnesses attractive.

<sup>29</sup> Given that on the Superman model, we have not exhausted important projects, it is plausible that we would not opt out before two weeks.

<sup>30</sup> Symptoms that we would have if immortal (on either model) marked with \*.

<sup>31</sup> We might think people would not act on their suicidal feelings and opt out on the Superman model. If this is right, it collapses into the God model.

<sup>32</sup> Sources: NICE clinical guidelines [CG90], World Health Organisation [2016] 'ICD-10 5<sup>th</sup> edition'.

On these criteria, the boredom and apathy that immortality could result in would be consistent with a diagnosis of severe depression.<sup>33</sup> In this case, immunisation could not in fact prevent illness.

One objection might be that this is not pathological. However, this is very difficult to justify<sup>34</sup> - on either model, it is not that we have run out of important activities. Thus, it is not comparable with something like hunger strike leading to death, which is directly motivated by an important project.

Perhaps this argument question begs. Recall an objection to immortality being preferable: that mortality is essential for being human. I suggested that this is unconvincing because the very question here is *if* we were immortal, what consequences would that have? Am I not subject to the same criticism here? I suggest not. My claim that health is incompatible with immortality has resulted, not from assuming from the outset that a healthy immortal life is impossible, but rather by arguing that if we were immortal and healthy, certain consequences would follow that show that the two come apart.

Could we avoid this by reflecting further on the thought experiment? What if the immunisation had preventative features built into it so that it could pre-empt depression? The trouble with the objection is that it is the immortality that is doing the work here. If the immunisation results in immortality of either sort, this will not help.

However, we might think we could avoid this on the Superman model, by further reflecting on the thought experiment. Suppose you are the among the first generation of people to receive the immunisation. Nobody knows how successful it will be, or whether and when it will start to fail, although it is in fact successful at prolonging life forever if renewed regularly. If this were the case, the possibility of death that is not self-imposed or predictable might be enough to achieve more on the Superman model than on a mortal life. Another case might be in a set of circumstances in which death is highly likely. Superman, in his high risk job, lives with the possibility of death not of his own choosing, might achieve more than me because he recognises that he might very likely die.<sup>35</sup> In these cases, since apathy would not be such a significant problem, boredom would eventually set in, but only when I have succeeded in pursuing and achieving everything I want to, at which point I could opt out of my next immunisation. Further, the resulting mental state might not count as clinical depression but be more akin to the person nearing the end of their life who is satisfied with what they have done and has no desire to extend their life further, irrespective of health, death of friends etc.

Could we not make a similar argument for the immortal person on the God model? Suppose I do not know that the immunisation will prolong my life forever. I would have the motivation to seek things that are important to me, even if I eventually get bored. However, in this case the mental state I would arrive at would not be one of satisfaction, but of despair and a loss of all meaning and value. Thus, it would still count as being depressed – and eternally so.

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<sup>33</sup> We would also be depressed according to DSM-IV.

<sup>34</sup> Given assumption iv.

<sup>35</sup> This would exclude people who would choose their illness irrespective of extra time.



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It seems then that although healthy immortality might be preferable in specific circumstances, outside of these, for many of us, it is not. This is not only because for some of us, disease is a significant good, but also because the very reasons we have for being attracted to an immortal, healthy life turn out to be inconsistent with it.<sup>36</sup>

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