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Euthanasia is a very controversial and debatable topic in the contemporary medical ethics. Euthanasia, also known as assisted suicide or mercy killing, is defined as painless death available to patients having an incurable disease. Euthanasia is also done if the patient has a condition which leads them suffer extreme misery and pain and about which no known interventions to reverse exist. Termination of life in euthanasia can either be active, or with or without medical intervention by professionals. Euthanasia as stated is being controversial and debatable, due to differences that exist between various societies, cultures, religions and populations. Each of these factors have variations in their social, moral and ethical beliefs. Different people view and value, its pros and cons, differently based on their belief systems. To understand the debate, providing insight into the pros and cons of euthanasia is key—especially understanding in the Catholic Healthcare system their standing on the matter.

Firstly, we should note its history. Euthanasia has been used as a technique to free a patient from an intractable sickness—also from the excruciating pain which several illnesses bring about for example terminal stages of cancer, extreme trauma and a variety of other conditions. Having a look on various cultures from a historical point, civilizations such as Greek and Roman civilizations had no objection to a person terminating his or her life. Euthanasia was therefore established and embedded in such civilizations as a norm. However, with the inception of Christianity, the topic was addressed because of the focus of the religion on God and his will to control the fate of humans. Therefore, it became a taboo topic as taking Gods divine power into hands by people was not considered religiously appropriate.

During the enlightenment era, it brought about concepts encouraging euthanasia; primarily because of the work of many philosophers who thought/researched on the positive outcomes associated with it. In this era, euthanasia started getting some public acceptance. Many people in this era had the notion that although medicines intended to control pain- medicine should be utilized to minimize human discomfort but should not be used to lead to death. The same debate is still active today, different people and or schools have thoughts based on different opinions with euthanasia and medicine.

Across the world today, there are different laws and legislation regarding euthanasia. In United States of America, the laws vary from state to state. In 5 of the states, physicians are permitted by law to prescribe fatal doses of certain medicine to end the life of patients who are terminally sick. Assisted suicide was first legalized by the state of Oregon in 1997 in the way described previously. Euthanasia, however, is still illegal in United States as a whole. In France, euthanasia is strictly illegal-certain laws, however, do permit to limit or terminate a medical treatment which is not of much utility. Germanys scenario surrounding euthanasia actually tends to be associated with the similar practice carried out on political grounds in the Nazi era. Therefore, it is not considered moral or acceptable by the nation; no laws covering euthanasia exist in the country although assisted suicide on strict medical grounds is possible in Germany.

Religiously dominated countries like Kingdom of Saudi Arabia and Israel along with developing countries like India, Pakistan and Bangladesh have no laws regarding the subject and euthanasia, if existent, is carried out under shadow without having ant legal backing.

To understand the sides of this debate, first we will look at the perceived advantages. Euthanasia provides a way to end an indefinite suffering or misery- in cases of trauma leading to head injury, that result in damage to brain, it may be impossible for the patient to reach a full

recovery despite being on all available medical support. A number of medical conditions can also lead to such states such as comatose conditions. For example, incidents such as a stroke can lead to indefinite and potentially irreversible coma. In such cases, life of the patient is considered to be worse than death. The condition is not only perceived to be miserable for the patient but loved ones as well. If we look at Kant's views on a matter such as this, the person in a state such as this would not be experiencing the 'good life' and that the 'quality of life' for this person is severely imposed. This person is not able to fully function in vegetative states such as a coma.

Yes, the sanctity of the human life dictates that the life of this person is holy and must be respected. At the same time if the person had wishes in that if they reach whatever point they cannot function, that they should be taken off whatever support and allowed to pass. If we allow such decisions as this to be made, then why not hold the same acceptance towards Euthanasia. Not only would being in such a state be debilitating to the patient's quality of life, but it would afflict serious traumatic influences towards their loved ones. States such as this can be quite psychologically quite traumatic for the attendants and loved ones of such patients. Often, they wish to seek a graceful and easy way to alleviate their suffering by opting for euthanasia. Similarly, the miserable life of such patients may not match their glorious past or reputation and is thought of as being doing more harm to their existence than being dead with dignity.

Further exploring the perceived positives, we can acknowledge its impact upon healthcare resources along with those aimed at prolonging the life of the terminally ill. These resources are scarce and valuable; euthanasia provides an opportunity to free up these limited resources. This will be for the benefit of those who can get better outcomes from the use of such resources. It takes a Utilitarian view in this case as it will affect the greater good of patients. Perhaps there are terminally ill patients that can recover. These patients would get the resources

needed to have the potential to carry on as those who are in more critical cases are more likely to pass on.

Although this is not much of an advantage, it becomes so in the interest of the community as well as healthcare service providers as it can dedicate the funds, resources, equipment and care to those who can derive maximum benefit from it. Euthanasia provides an opportunity for all people to opt for the termination of their life once things are beyond their control or beyond their hopes. In such cases, euthanasia provides an opportunity to exercise a person's basic right of having control over their lives by choosing death over a poor quality of life.

Addressing the cons of euthanasia, the notion of life having value and its sanctity are undermined by its practice. The sanctity and preciousness associated with human life with euthanasia terminating it creates a form of disrespect for life. Furthermore, healthcare staff and personnel are often reluctant on fulfilling euthanasia in most cases; reason being that they are trained with ethical framework perceiving euthanasia to be against the Hippocratic Oath. This oath they have undertaken advocates preserving and protecting life at all costs, in extreme contexts as well.

Euthanasia also has the risk of being deemed as a technique by healthcare policy makers to curb unnecessary healthcare spending/utilization of healthcare resources. Patients and their attendant's wishes would in this case become secondary to the primary goal of cost-curtailment in hospital management. Furthermore, euthanasia has the potential to be employed by family members to get rid of their duties towards their elderly and terminally ill relatives for the sake of their ease or for morally wrong mindsets. For example, for them to gain inheritance advantages as early as possible.

Many religions advocate beliefs which make it look similar to suicide or homicide as the case may be therefore prohibiting euthanasia in all forms. Looking at the Declaration on Euthanasia, we see the standing on it from a Catholic perspective. The doctrine states that life is a gift from God the creator. It also states that death is in inevitable, and that people should accept it with full responsibility and dignity. Euthanasia removes this dignity and responsibility as it is deemed as a violation of the divine law. The standing is that a person would be afflicting upon themselves a crime isn't life, more so an offense against the human person. In these times of suffering for the person, they wish to find solace and love so their pain will be taken away. The doctrine wishes that healthcare providers embrace their patients who so desire death to provide them with this comfort and warmth. Their pleas are seen as anguished, and truly they desire to have their conscience reassured as it states it can fall in trying times such as these.

Not only in Catholicism but other religious leaders in Islam and of Jewish religion generally tend to oppose active euthanasia and, in some instances, passive euthanasia as well. On the other hand, liberals, philosophers, human rights activists have a generally more accepting approach regarding euthanasia.

It is clearly seen euthanasia is affected with society's and its individuals' social, religious, political and ethical beliefs and values. As already discussed, there is a considerable variation in doctors' beliefs about euthanasia. The doctors who advocate for euthanasia believe it to be the best option for their patient-keeping in mind their quality of life is afflicted On the other hand, doctors who relegate euthanasia consider the chance of miracles in courses of some diseases as well as strictly adhere to the Hippocratic Oath they have undertaken to sustain life.

However, the most controversial point on euthanasia revolves around active and passive euthanasia. Active euthanasia refers to the willful termination of a human life by such a

maneuver which leads to death-example is injection such a medicine or poison which leads to death. On the other hand, passive euthanasia is done by stopping artificial supports that sustain life in vegetative states. In this case, spontaneous survival is not possible. An example of passive would be turning off the ventilator of a patient in coma. The controversy surrounding euthanasia is hypocritical in the sense that many people who consider active euthanasia unethical or unacceptable do consider passive euthanasia acceptable. They perceive that providing passive euthanasia does not lead to a breach of religious, moral and ethical norms as the intervention does not resemble homicide in being passive and in good faith.

In conclusion, the topic of euthanasia is still highly controversial and debatable. Different nations have different laws regarding euthanasia and different cultures have different understanding and acceptance for euthanasia. Countries such as the Netherlands were the first nation to give a legal standing to the practice of euthanasia in 2002. As seen in the doctrine, euthanasia is ‘condemned crimes against life such as any type of murder, genocide, abortion, euthanasia, or willful suicide’. Views on euthanasia will likely change over time as with many aspects and topics in our lives. The topic is highly tied to developments in clinical sciences such as the research and cure of chronic diseases previously considered untreatable, the outcome of the debate surrounding euthanasia is bound to be dictated by advancements in clinical medicine and a greater understanding of human rights across the world.