© 2012 Cenresin Publications <u>www.cenresinpub.org</u> ISSN 2277-0046 EUTHANASIA: AN ACT OF MERCY OR MURDER?

Dr. Adefarasin V.O. Department of Philosophy Olabisi Onabanjo University, Ago-Iwoye, Nigeria E-mail: adefarasinvo@yahoo.com

ABSTRACT

A moral discussion on Euthanasia is not a newly emerging issue. Rather, it has been an age-long problematic in ethical theory that has occupied scholars and non-scholars. In contemporary times however, it is an issue that is debated with a new intensity. Thus, this paper sets out to examine the general conceptual and ethical issues involved in Euthanasia. Euthanasia is the practice or act of killing or permitting the death of hopelessly sick or injured individuals in a relatively painless way for reasons of mercy. An act of Euthanasia may involve killing someone or it may involve refraining from trying to prev

ent death (permitting someone to die). However, the condition of the person undergoing Euthanasia and the intensions of the person(s) performing it are crucial for distinguishing between euthanasia and other forms of killing, such as murder or self-defense. In order to be considered an act of euthanasia, an act must be done in the interest of the person who undergoes it and the goal must be to prevent, reduce or end a patient's suffering to preserve a patient's dignity, or to respect a patient's autonomy. A lot of moral and legal issues are involved in euthanasia. The argument of pro-euthanasia is that the act is meant to end the agony of patients. How valid is this reason? Life, it should be noted could be in pain or pleasure. As Bentham noted, nature has placed mankind under the governance of two sovereign masters, pain and pleasure. Is it possible to abolish pain entirely? Does it follow that any life that is associated with pain should be terminated? However some pains are tolerable and some beyond human tolerance. Thus, human life can be associated with a considerable amount of pain and still be worth-living, also there is a level below which pain and suffering become simply unbearable as well. In this paper, we shall discuss meaning and definition of euthanasia, methods of euthanasia, forms of euthanasia, kinds of euthanasia, euthanasia: an act of mercy or an act of murder. An attempt shall also be made to discuss the problem that arises in euthanasia. The paper concludes that euthanasia is not an act of murder, but rather, it is an act of mercy. Keywords: Euthanasia, mercy, murder, persons, life.

INTRODUCTION

Euthanasia is a topic that has generated a lot of controversy. It is an issue that creates conflict between moral philosophers and theologians. At the extreme ends of disagreement, advocates say euthanasia is a merciful method of death. At the other end the opponents of euthanasia who may be considered this "merciful" method as a form of murder¹. Here lies the controversy in euthanasia. Traditional moralists maintain that human life belongs to God and may be taken only by him. Few moralists hold that life must be prolonged whatever the cost. The most important arguments for euthanasia are the pain and indignity suffered by those with incurable diseases, the burden imposed by persons unable to take part in normal human activities, and the supposed rights of persons to dispose of their lives however they please².

WHAT IS EUTHANASIA?

Euthanasia could simply be called an addendum to final exit. To give it a more concise definition, the term 'euthanasia' comes from the Greek words "eu" which means good and "thanatos" which means death³. Hence, euthanasia could be referred to as good death. The act of euthanasia is today understood as termination of life on request. But it has not always been people's choice. The voluntary decision to terminate the life has been misused during human history especially between 1933 and 1945 during the German Nazi regime in Europe. The criminal regime murdered millions of people because they were disabled, ill, old, or if different ethnic ground. Murders committed were also called "euthanasia". The Sacred Congregation for the Doctrine of Faith defines euthanasia as an action or an omission which if itself, or by intention causes death, in order that all suffering may this way be eliminated. Akpenpuun Dzurgba opines that euthanasia is an act of killing someone who is very ill, badly injured or very old so that one does not have to suffer anymore⁴. Indeed from this definition, death is seen as an alternate to pain relieving. But taking cognizance of the concept of death itself, does it end pain as they claim it does?

METHODS OF EUTHANASIA

The method through which euthanasia is carried out varies. Euthanasia could be in form of the application of lethal injection. Here, some dangerous doses of medication are inserted into the injection to terminate or put an end to the life of the patient. This is the most common of all the methods of euthanasia. Euthanasia could also be applied by starving and dehydration (this is a method carried out in United States of America), withdrawal of medication, withdrawal of respirator to patients, stopping of intravenous feeding and so on⁵. There are extreme cases whereby patients are shot, drowned in order to suffocate the patient. This is often carried out ion the home. The main reason for carrying out euthanasia is to ease the pain on the incurably ill, mentally retarded and those that whose lives are considered as not worth living. The reason for euthanasia could be abused if it is legalized. Having considered the reasons and method of euthanasia we shall now proceed to examine the forms of euthanasia.

FORMS OF EUTHANASIA

The various kinds of euthanasia could take the form of **Active** and **Passive**.

Active Euthanasia: This is taking specific steps to cause the patient's death, such as injecting the patient with poison. In practice, this is usually an overdose of painkillers or sleeping pills.

Passive Euthanasia: This is usually defined as withdrawing medical treatment with the deliberate intention of causing the patient's death. The difference between active and passive euthanasia is that while in the former, something is done to end the patient's life, in the latter something is done that would have preserved the patient's life.

KINDS OF EUTHANASIA

We have three kinds of euthanasia. These are Voluntary Euthanasia, Involuntary Euthanasia and Non voluntary Euthanasia.

VOLUNTARY EUTHANASIA

In 1992, 70 year old Mrs. Boyes persistently requested for euthanasia from Dr. Cox her doctor. Mrs. Boyes was so ill that she screamed like a dog if anyone touched her. Conventional medicine did not relieve her agony. Dr. Cox finally gave her an injection of potassium chloride, bestowing on her the boon of a peaceful death⁶. This is a clear case of voluntary euthanasia. Hence, voluntary euthanasia is when the patient requests that action be taken to end his life or that of life saving treatment be stopped with full knowledge that this will lead to his death⁷. If a fully informed, competent patient has freely consented to undergo euthanasia, it is voluntary euthanasia⁸. The person assisted to die must be suffering terribly and death is chosen as the best means of ending suffering. On the authority of the patient's prior directives, life-sustaining devices may be withheld or withdrawn so that the illness may take its natural course through normal death⁹. It could take the Active form of euthanasia. Life is commonly taken to be a central good for persons, often valued for its own sake, as well as necessary for pursuit of all other goods within a life¹⁰. But when a competent patient decides to forego all further life sustaining treatment then the patient, either explicitly or implicitly, commonly decides that the best life possible for him or her with treatment is of sufficiently poor quality that it is worse than no further life at all¹¹. It could also take the passive form. In voluntary passive euthanasia, a person decides for himself that medical treatment that he is receiving is making his life more unpleasant than the disease, and that he would rather end the treatment and go home. Frank Barker, 50 year old man is dying from mesothelioma will kill him within a few days unless he is given injection of antibiotics to combat it. Barker decides to refuse the antibiotics to die sooner rather than later from the cancer. But could we forcibly shove down drugs down the throat of a patient? Is it morally permissible to comply with the wishes of a competent? If the intention of the competent is to minimize the suffering, then should euthanasia be permitted? How do we quantify the competency of a patience?

NON VOLUNTARY EUTHANASIA

If a patient who is not competent to give or withhold consent undergoes euthanasia, it is non-voluntary. Those in this situation include gravely deformed or severely retarded infants, and people through accident illness and old age have permanently lost the capacity to understand the issue involved¹². This form of euthanasia has generated a lot of controversies. This is because it is believed that it will be abused. Suppose an intelligent person receives a brain injury that reduces him to the mental condition of a contented infant and that such desires as remain to him can be satisfied by a custodian, so that he is free from care¹³. This may be regarded as a misfortune for his relations, friends, even himself. This does not mean that a contended infant is unfortunate. The intelligent adult who has been reduced to this condition is the subject of the misfortune. Is it therefore moral for anyone to terminate the life of this man? It is possible that we might say that the intelligent adult has disappeared, and for the creature it had become, happiness consists in a full stomach and a dry diaper. This form of euthanasia is said to be immoral and thus should not be legalized. Because the patient is incapable of making the decision for euthanasia, someone else must make decisions because the desire of the patient would not be known. The danger that usually arises as a result of this form of euthanasia either active or passive is the fear of being abused because of self-interest.

Hence, if euthanasia in this form still falls under the category of good death, the question that comes to mind is, good death for who?

INVOLUNTARY EUTHANASIA

When a competent patient undergoes euthanasia even though she has not freely consented, it is called involuntary euthanasia¹⁴. On June 30 1979, 57 year old Georgette Mallette had an accident in which she had severe injuries. She was a Jehovah's witness who carried a card stating her firm conviction that no blood products should be administered. Dr. Shulman ignored her card and gave her a blood transfusion which he decided was medically indicated. In June 1980, exactly a year after, Mrs. Mallette brought charges against Dr. Shulman. The judge found that Mrs. Mallette had suffered emotionally and mentally and ordered substantial costs to be paid. If the operation had resulted in her death, her family, if they shared the same faith, would have brought charges against the doctor. Killing can be regarded as euthanasia only when the motive for killing is the desire to prevent suffering of the person. If the doctor had allowed Mrs. Mallette to die without the blood transfusion, the duty and the responsibility of the doctor will be questioned. This form of euthanasia seems clearly immoral whether active and passive. People don't have a right to override someone else's decisions about their own lives and deaths or to substitute their judgement for another's about whether her life is worth living. Involuntary euthanasia whether active or passive is clearly indefensible.

EUTHANASIA: AN ACT OF MERCY OR AN ACT OF MURDER?

Euthanasia could be said to be merciful if the patient involved is incurably ill and has therefore either requested for it or that by choosing euthanasia for that patient is of best interest to the patient. In the realm of theology, euthanasia is said to be murder because it is wrong according to them to ask for death or deciding the death of a living creature of God. Just because some set of people deciding that their life is not worth living does not mean that they should take it as at when due. It is worthy of note to point out that the issue of euthanasia is often considered because of the pain the patient is going through. Often, the pain could be long term or short term. In line with the theologians, pain is seen as a normal thing because Jesus Christ came into the world and carried the path and the burden for us. It is enjoined that Christians should also share in the pain to signify their fellowship with Christ. But, it is worthy of note that everyone wants to be like Jesus in His gentle spirit but no one would love to share in the pain He went through on earth. The declaration on euthanasia issued by the Sacred Congregation for the Doctrine of the Faith states that "when inevitable death is imminent despite of the means used, it is permitted in conscience to take the decision to refuse forms of treatment that would only secure a precarious and burdensome prolongation of life so long as the normal care due to the sick person in similar cases is not interrupted"¹⁵. In such circumstances the doctor has no reason to reproach himself with failing to help the person in danger. Islam categorically forbids all forms of suicide and any action that may help another to kill themselves. The precedent for this thinking comes from Prophet Muhammad (pbuh) having absolutely refused to bless the body of a person who had committed suicide, despite the fact that the person killed himself to relieve severe pain from incurable disease. For the Buddhist, destroying living beings is wrong. Thus, from the Buddhist perspective encouraging a sick person to relax her grip on her life or to give up the will to live would not count as an act of compassion (or mercy)¹⁶. It is wrong according to section 316 (6) of the criminal code

Act to cause the death of, or kill another person. Death is caused by willfully stopping the breath of any person. Hence, euthanasia being the causing the death of another is wrong. Unless the case is taken to court and the fact of the case is stated as based on mercy will euthanasia be accepted. If euthanasia is based on mercy, whose mercy is to be considered? The patient suffering of course. Euthanasia based on mercy is always on mentally retarded patients whose chances of recovery is slim, severely injured patients (young and old), cancer patients, etc. Some people may argue that life is worth living even when the bad elements of experience are plentiful, and the good ones too meager to outweigh the bad ones on their own. But people would not raise their objection to death in so far as theirs will be neither premature not painful.

CONCLUDING REMARKS

As it has been stated, there are different perspectives in which we can view the concept of euthanasia. An attempt has been made to discuss the types of euthanasia and the form it can take. The most problematic of the types of euthanasia is the non-voluntary euthanasia whereby the patient cannot withhold or give consent to the administration of euthanasia. Voluntary euthanasia does not pose much threat unless the patient's mental health is being questioned. The question of the right to take one's life based on the pain one is going through is guite controversial. Since every man has a freedom of choice, then they should, at least when they are of sound mind be able to give consent to euthanasia. This can be done by providing a directive to the physician stating their reason for demanding for euthanasia if the need arises. It should be issued if the patient is at least 18 years of age. At least with this, the problem of whether the patient freely consented will not arise. The issue of providing a directive to any physician as at the age of 18 does not solve problem that arises in the discussion of euthanasia totally. What about those that have never had the ability of being of sound mind and health like infants? On whose shoulder should the mantle of decision fall? His relative or the doctor? Furthermore, being critically ill does not mean it is the end of the world. A problem today can turn out to be a miracle tomorrow. Day in day out, scientists have been concocting chemicals in the laboratory to provide the cure to many of the ailments that have been tagged as incurable. The guestion now is: how long must we wait for our so-called scientists to provide a cure for incurable illness? I would like to conclude by guoting Sidney Shledon in his book. The Other Side of Midnight. He says

> it's interesting how the things other people do seem so horrible and yet when you're doing them they seem so right. When you are reading about the sexual experiences of someone else, its TRUE CONFESSION but when it's you it's the LADIES HOME JOURNAL.

This means that no one would accept euthanasia as murder if one were to be in the position of those suffering. In fact, we will like to dance to the tune of mercy if such happens to us and we are capable to deciding it we want euthanasia or not. I maintain that euthanasia is an act of mercy being given to an incurable patient who is critically ill and is suffering from pain, mentally, psychologically or physically. And it will be termed as murder if the intention of the administrator of euthanasia is not mercy. Hence, the motive or intention of the administrator if euthanasia should be checked.

REFERENCES

- ¹ http://www.firstthings.com/onthesquare
- ² Robert Audi(ed). *The Cambridge Dictionary of Philosophy 2nd* ed. (U.S.A.: Cambridge University Press, 1999) p.101
- ³ Ebun Oduwole and Mabol Olaolu, (eds.) *Fundamentals of Ethics Theories and Issues* (Ibadan: Ben-el books., 2001) p.151
- ⁴ Akpenpuun Dzurgba, *Medical Ethics Conceptual And Practical Issues* (Ibadan: John Achers, (2005) p.57

⁵ Ibid

- ⁶ www.euthanasia.cc/cases.html
- ⁷ http://www.pregnantpause.org/euth/types.html
- ⁸ Emmett Barcalow, *Moral Philosophy Theory and Issues* (Belmont: Wadsworth publication, 1972) p.274
- ⁹ Justin Ekennia, *Biomedical Ethics-Issues, trends & Practical Issues* (Owerri: Barloz publication, 2002) p.275
- ¹⁰ Warner Wick (ed.), *Ethics An international journal of Social, Political and legal Philosophy* (Chicago: Uni. Of Chicago press, 1978) p.65
- ¹¹ Thomas Mappes and Jane Zembaty, *Social ethics morality and social policy* 5th ed. (New York: McGraw Hill Companies, 1997) p.71
- ¹² Peter singer, *Practical Ethics* (U.S.A.: Cambridge University press) p.130
- ¹³ James Rachel (ed.), *Moral Problems A collection of Philosophical Essays* (London: Harper & Row publication, 1971) pp.265-366
- ¹⁴ Emmett Barcalow Op. cit. p.275
- ¹⁵ Justin Ekennia Op.cit. p.253
- ¹⁶ http://www.accesstoinsight.org