

# Euthanasia

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## *The debate*

Medical science and technology have made great strides in recent years. The medical profession has today more power over life and death than it would have chosen to have. It has the power to prolong life where life seems to have lost its meaning and power to terminate life without suffering. There are many points of view on euthanasia -- legal, social and compassionate.

The debate on euthanasia has again become a live issue in India as the supreme court of India recently passed a verdict that attempted suicide is not a crime. This signifies social approval of suicide and euthanasia which is assisted suicide.

## *What is euthanasia?*

Euthanasia is deliberately bringing about a gentle and easy death making the last days of the patient as comfortable as possible. This is to ensure a calm and peaceful death, within the context of relieving incurable suffering in terminal illness or disability. Euthanasia is voluntary, when requested by the sufferer, involuntary or compulsory if it is against the will of the patient, passive when death is hastened by deliberate withdrawal of effective therapy or nourishment.

## *The dilemma*

While I was working in England, I was resuscitating an elderly lady who was admitted in the hospital emergency ward with severe demonstrable cerebral damage. My chief of surgery, an Englishman and devout Christian, told me gently, "I don't want to interfere with your procedures but if she were my mother I wouldn't do all that you are doing and would allow her to die peacefully".

This is often our dilemma. Should one prolong the act of dying in a case of inevitable death or when a life is effectively over? One of the achievements of modern medical technology is the use of artificial life support systems like artificial feeding, dialysis, controlled respiration, pump circulation etc. In some cases it can be so dehumanising, painful, hazardous or costly that other considerations outweigh the aim to conserve life.

Euthanasists raise the question, how long should one sustain life? A patient might say "I do not want a vegetative existence by drips, drugs and dialysis. I want to die with dignity. I have a right to lay down my life just as I have a right to live".

In a well known trial, a Dr. Arthur in U. K. had prescribed an overdose of codeine to a baby with Down syndrome with the object of hastening his death, Dr. Arthur was charged with murder. Many eminent witnesses were tried. Most of

them justified the procedure. Finally the court acquitted Dr. Arthur as his motive was compassion. There is an argument that if a foetus is found to be abnormal and severely handicapped it should be eliminated before birth as such children are socially valueless. Do not the physically handicapped and mentally retarded have as much right to life as others and get the needed care?

## *Death and dying*

The concept of death is changing in the light of new knowledge. It may be obtained by redefining life. Descriptions of life are organised at many different levels of complexity - molecular, cellular, organ, system, corporal, mental, spiritual etc. Human life may be described as the ability, actual or potential to respond to others, or to be self-aware. This is based on cerebral function. Silverman and others in 1969 have established this by extensive studies and confirmed it by encephalogram findings. Once cerebral death is confirmed, there is no chance for survival though heart and lung functions continue. So it would be quite unnecessary to continue supportive measures after cerebral death.

## *The Christian concept*

Almighty God has created man in his image. He is the giver and sustainer of life. He alone has the right to withdraw life. Life is not a right but a gift of God, belonging to God and at all times in His hand. We have no right to take away deliberately a human life, even one's own.

Euthanasia requests may be born of depression and confusion or out of a feeling of worthlessness or due to persuasion of interested parties with ulterior motives. Respect for the person of the patient and concern for the family should lead us to use our resources as best as we can to promote life. The essence of our approach to a dying patient is to give ourselves in loving care to meet his need. A patient is not merely a biological unit but a person before God with social family connections.

## *Suffering*

Suffering can be redemptive and purposeful. It is as much a God-sent opportunity as is health and provides an opportunity for a creative outcome or an amendment of life.

Let me share with you the experience of two of my friends who faced the issue of caring for children with disability. One was a hospital Chaplain. When a child with disability was born to him, he asked God why this happened to him, but he could not get an immediate answer. He loved that child but the child could not respond to his love in the normal way. They helped the pastor to realise how God loves us **inspite** of our not being responsive to His love. The

other was a colleague of mine and a highly qualified Paediatrician when a child with disability was born to him and his doctor wife. They did their very best to sustain her life. The child became critically ill immediately after birth, needing exchange blood transfusions. Though their colleagues questioned the wisdom of taking such an extreme step for such a child, they choose to have the exchange transfusions. The child recovered and subsequently brought a new purpose to their life before she finally died at 4 months of age. Through this the parents realised that God had a purpose in bringing her to their home. This experience was an act of God to make them aware of the need of caring for many neglected children with disability in our society. So they resigned from their clinical work and offered their lives to start a centre for children with mental handicap and special needs. An apparent traumatic experience became the rallying point for a new mission and for compassion.

### ***Our guiding principle***

Ever since the time of Hippocrates in the fifth century BC, the medical profession has been guided by the concept of the worth of each individual human life. This was recently reaffirmed by the Geneva code in 1948, which states, "I will show the utmost respect for human life from the time of conception."

Hitler had a utilitarian philosophy of life. He preserved any person who had utilitarian value. The others he eliminated. We respect the unique value of human life. Life should be cherished, supported and cared.

### ***Some practical steps***

1. Doctors should serve and care for their patients in love.
2. Deliberate attempt to end or shorten life, whether by omission or commission, is wrong and should not be done.
3. Our society should proclaim the way of righteousness and truth and provide compassionate care. It must take a stand against taking innocent lives.
4. Medical personnel and the people at large must be educated in moral and spiritual values. These should lead to sound legislation.
5. Bring in the principle of love as the mainspring.

### ***Conclusion***

Views, ideas, even concepts of ethics are fast changing in the context or the progress of science and technology. The traditional institutions in our society, which protect human life and spiritual values, are gradually being pushed aside or getting eliminated. Love is the foundation of ethics. Loving our God with all our heart, soul and mind and loving our neighbour as ourselves, are the two foundations for our ethical practice. Only a code of ethics based on sound principles can lead our society to lasting happiness, harmony and peace.

## **Oath adopted at the 1992 Annual Convention of the American Association of Naturopathic Physicians**

I dedicate myself to the service of humanity as a practitioner of the art and science of naturopathic medicine.

I will honor my teachers and all who have preserved and developed this knowledge and dedicate myself to supporting the growth and evolution of Naturopathic medicine.

I will endeavor to continually improve my abilities as a healer through study, reflection, and genuine concern for humanity.

I will impart knowledge of the advanced healing arts to dedicated colleagues and students.

Through precept, lecture, and example, I will assist and encourage others to strengthen their health, reduce risks for disease, and preserve the health of our planet for ourselves, our families, and future generations.

According to my best ability and judgement, I will use methods of treatment which follow the principles of naturopathic medicine : first of all, to do no harm;

to act in cooperation with the healing power of nature;

to address the fundamental causes of disease;

to heal the whole person through individualized treatment;

to teach the principles of healthy living and preventive medicine.

I will conduct my life and the practice of naturopathic health care with vigilance, integrity, and freedom from prejudice.

I will abstain from voluntary acts of injustice and corruption.

I will keep confidential whatever I am privileged to witness, whether professionally or privately, that should not be divulged.