

20+21

Euthanasia



Definition: Euthanasia refers to the practice of ending a life in a painless manner. Or It means the termination of life by a doctor at the express wish of a patient. The request to the doctor must be voluntary, explicit and carefully considered and it must have been made repeatedly. Moreover the patient's suffering must be unbearable and without any prospect of improvement. Pain relief administered by a doctor may shorten a patient's life.

History:

Hippocrates mentions euthanasia in the Hippocratic Oath, which was written between 400 and 300 B.C. The original Oath states: "To please no one will I prescribe a deadly drug nor give advice which may cause his death. Despite this, the ancient Greeks and Romans generally did not believe that life needed to be preserved at any

cost and were, in consequence, tolerant of suicide in cases where no relief could be offered to the dying or, in the case of the Stoics and Epicureans, where a person no longer cared for his life As is the case in other countries, this is seen as a normal medical decision in terminal care and not as euthanasia.

Due to outrage over Nazi euthanasia, in the 1940s and 1950s there was very little public support for euthanasia, especially for any involuntary, eugenics-based proposals. Catholic church leaders among others, continued

speaking against euthanasia as a violation of the sanctity of life. In 1957 in Britain, Judge Devlin ruled in the trial of Dr John Bodkin Adams that causing death through the administration of lethal drugs to a patient, if the intention is solely to alleviate pain is not considered murder even if death is a potential or even likely outcome. In 1993, the Netherlands decriminalized doctor-assisted suicide, and in 2002, restrictions were loosened. Some forms of euthanasia are legal in Belgium, Luxembourg, The Netherlands, Albania, Switzerland, Sweden, the U.S. states of Oregon and

Washington the Autonomous Community of Andalusia (Spain), and Thailand.

TYPES:

- Euthanasia may be conducted with consent (voluntary euthanasia)
- or without consent (involuntary euthanasia). Involuntary euthanasia is conducted where an individual makes a decision for another person incapable of doing so. The decision can be made based on what the incapacitated individual would have wanted, or it could be made on substituted judgment of what the decision maker would want were he or she in the incapacitated person's place, or finally, the decision could be made by assessing objectively whether euthanasia is the most beneficial course of treatment.
- Non-voluntary: done with the consent of a surrogate of an incompetent person

Five Individually Necessary Conditions for Candidacy for Voluntary Euthanasia

Advocates of voluntary euthanasia contend that if a person

(a) Is .

(b) is for that illness during what remains of her life expectancy.

(c) is, as a direct result of the illness, either suffering intolerable pain, or only has available a life that is unacceptably burdensome (because the illness has to be treated in ways that lead to her being unacceptably dependent on others or on technological means of life support).

(d) Has an enduring, voluntary and competent wish to die (or has, prior to losing the competence to do so, expressed a wish to die in the event that conditions (a)-(c) are satisfied).

Opinion with voluntary euthanasia:

- Choice: Proponents of VE emphasize that choice is a fundamental principle for liberal democracies and free market systems.

- Quality of Life: The pain and suffering a person feels during a disease, even with pain relievers, can be incomprehensible to a person who has not gone through it. Even without considering the physical pain, it is often difficult for patients to overcome the emotional pain of losing their independence.

- Economic costs and human resources: Today in many countries there is a shortage of hospital space. The energy of doctors and hospital beds could be used for people whose lives could be saved instead of continuing the life of those who want to die which increases the general quality of care and shortens hospital waiting lists. It is a burden to keep people alive past the point they can contribute to society, especially if the resources used could be spent on a curable ailment.
 - suffering from a terminal illness
 - unlikely to benefit from the discovery of a cure
 - is unable without assistance to commit suicide.

Opinion against voluntary euthanasia:

- Professional role: Critics argue that voluntary euthanasia could unduly compromise the professional roles of health care employees, especially doctors.
- Moral: Some people consider euthanasia of some or all types to be morally unacceptable. This view usually treats euthanasia to be a type of murder and voluntary euthanasia as a type of suicide.
- Theological: Voluntary euthanasia has often been rejected as a violation of the sanctity)of human life. human life ultimately belongs to God, so that humans should not be the ones to make the choice to end life.
- Feasibility of implementation: Euthanasia can only be considered "voluntary" if a patient is mentally competent to make the decision, i.e., has a rational understanding of options and consequences.
- Necessity: If there is some reason to believe the cause of a patient's illness or suffering is or will soon be curable, the correct

action is sometimes considered to attempt to bring about a cure or engage in palliative care.

- Wishes of Family: Family members often desire to spend as much time with their loved ones as possible before they die.
- Consent under pressure: Given the economic grounds for voluntary euthanasia (VE), critics of VE are concerned that patients may experience psychological pressure to consent to voluntary euthanasia rather than be a financial burden on their families. Even where health costs are mostly covered by public money, as in various European countries, VE critics are concerned that hospital personnel would have an economic incentive to advise or pressure people toward euthanasia consent.

Euthanasia and religion

Catholic teaching

Catholic teaching condemns euthanasia as a "crime against life".

Islamic policies

Islam categorically forbids all forms of suicide and any action that may help another to kill themselves. It is forbidden for a Muslim to plan, or come to know through self-will, the time of his own death in advance. If an individual is suffering from a terminal illness, it is permissible for the individual to refuse medication and/or resuscitation. Other examples include individuals suffering from kidney failure who refuse dialysis treatments and cancer patients who refuse chemotherapy.

A euthanasia device invented by Dr Philip Nitschke that facilitated euthanasia through heavy doses of drugs. The laptop screen led the user through a series of steps and questions to ensure he or she was fully prepared.



Euthanasia can be accomplished either through an oral, intravenous, or intramuscular administration of drugs, or by oxygen deprivation (anoxia), as in some euthanasia machines.

In individuals who are incapable of swallowing lethal doses of medication, an intravenous route is preferred. The following is a Dutch protocol for parenteral (intravenous) administration to obtain euthanasia: Intravenous administration is the most reliable and rapid way to accomplish euthanasia. A coma is first induced by intravenous administration of 20 mg/kg sodium thiopental (**Nesdonal**) in a small volume (10 ml physiological saline). Then a triple intravenous dose of a non-depolarizing neuromuscular muscle relaxant is given, such as 20 mg pancuronium bromide (**Pavulon**) or 20 mg vecuronium bromide (Norcuron).

These are NOT euthanasia:

- Not starting treatment that would not provide a benefit to the patient.
- Withdrawing treatment that has been shown to be ineffective, too burdensome or is unwanted.
- The giving of high doses of pain-killers that may endanger life, when they have been shown to be necessary.

Discussion:

Firstly, consider the fundamental question, for the moment outside the boundaries of law and ethics: "do people have a right to choose the option of death?"

What is your opinion in Euthanasia? Would you agree to be applied in your region or country?

Conclusion:

The assisted suicide/euthanasia debate is still in its infancy, with the ultimate outcome very much in doubt. Public opinion vote show solid majority support for limited legalization, but the votes also demonstrate that popular support drops significantly when specific details of legislative proposals are examined. One thing is clear: euthanasia/assisted suicide controversy is likely to be a significant source of societal contention and political argument for many years to come. Also religion and faith and believe for the day after all is an important issues and categories to prevent people to do euthanasia.