

# EUTHANASIA AS A TABOO AND ITS ETHICAL IMPLICATIONS IN PUBLIC

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## **Abstract**

*The problem of euthanasia is a problem that leads to a dilemma not only science, but also the entire public. Insufficiently illuminated term leads to fear and complete diversion from the real issues when it comes to this topic. It is necessary to make a clear distinction between murder, assisting in the murder or incentive, suicide and euthanasia. In particular, it is necessary to decipher the motives, intentions, and what follows as a consequence of a personal decision. Also, in the first place it should put a patient who is not only homo patient but moral entity with all his rights and freedoms.*

**Keywords** euthanasia, dignity, murder, suicide, physician, patient

Euthanasia itself causes different attitudes in the public primarily because it's associated with a murder or suicide, or with assistance (even instigation) in it, which is morally and legally punishable act in almost all social systems in the world. It is not rare event to look on euthanasia as a "legally allowed murder". Relying on existing and deeply rooted ethical standards that are socially, religiously and legally accepted, the society of the modern world, despite scientific rebounds and modernization of medical biotechnologies, is not ready to give its final judgment on euthanasia and its justification. This raises the question of the right to life of an individual<sup>1</sup>, which is a fundamental right of every human being and there is a fear of "playing God and disruption of his order" by doctors and bioethicists, not only in religious circles, but in all segments of the population regardless of social class, level of education and political orientation.

Actually, what is euthanasia?

One of the most important authors who deal with this issue, the American philosopher James Rachels tried to make a parallel in the definition of *active and passive euthanasia* trying to bring its meaning to the public through his famous examples of *Jones and Smith*<sup>2</sup>. I have to note that most people wouldn't make a difference to the moral justification of active and passive euthanasia through plastic cases that presented Rachels. I would also state, after the interpretation of these examples, problematic of intentions in all this. Rachels writes about the case

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<sup>1</sup> Universal Declaration of Human Rights of the EU

<sup>2</sup> Rachels, James. "Active and Passive Euthanasia" in *What's Wrong: Applied ethicists and Their Critics*, ed. David Boonin and Graham Oddie (New York: Oxford University Press, 2010), 46-50.

when the imaginary character Smit kills with the intention his six-year relative in the tosh, because with his death he becomes heir to his fortune. He arranges everything to look like an accident. In another example Jones accidentally witnesses the fall in the bathroom of his six-year relative who bangs his head on the edge of the tub facing the water and drown. He's totally indifferent and is even enthusiastically watching the scene and doesn't help the child. Logically speaking, the case Smit is immoral because he's a cold-blooded killer, while Jones isn't directly to blame for the death of his relative. My view is that both are immoral and it is supported by the intention which is the same in both cases, while only the means are different. So, in this case I'm close to the theory of consequentialism.

The question is how does this imply to euthanasia?

I'll be free enough to say, it seems to me that these examples are not the best examples. **Active euthanasia** would present a procedure when the medical staff, family member or the patient does something to end the patient's life (transcription or taking a lethal dose of drugs most often). **Passive euthanasia** represents the case when the medical staff ceases to maintain the patient's life (exclusion of apparatus that hold vital functions, ending the drug therapy that maintains the patient in life, failure to perform an operation that would extend the life of the patient, failure to feed the patient, etc.). After this, why am I of the view that examples of Rachels, Jones and Smith aren't the best? Primarily because by these examples Rachels automatically covered euthanasia under the act of murder that brings benefit to the one who has done this act and carries numerous moral and legal implications. Completely forgotten is the role of the one whose life is disrupted. Six year old cousin or the patient is the source of some benefit, and his will was subsumed under a non-existent will and unconsciousness. The patient in the older traditions of medicine or traditional medical ethics was defined as *homo patient* or a person who has some pain and whose health and therapy will be in charge of the undisputed authority in the form of a doctor who decides on everything. The twentieth century as the century of science and flourishing liberalism, brought a new approach to the patient who is not the only one who is suffering and in whose name decides the authority embodied in the form of a doctor, but he is a person with his moral subjectivity that has an absolute right to be familiar with his health situation, how he'll be treated by therapy that will be prescribed to him, as well as with the freedom to dispose of his life with the whole will. The willing moment is what completely leveled example of Rachels, Jones and Smith. Is it in this case, that a six-year cousin willingly ended his life to provide riches to the older careers and whether his wealth was the source of his immeasurable suffering? It is not, and it cannot be because he is just a kid. Also, in some cases when the patient is unable to make decisions about his health, therapy

or termination of life (state of deep coma, neuro-psychiatric disorders, people who abuse psychoactive substances) relatives decide about his life, or about the best therapy. I again ask the question - what benefit doctors, family or other medical personnel would have from someone's death?

Also, I try to look completely objectively at the concept of euthanasia, dealing exclusively with its ethical aspect and therefor trying to remove it from the classic murder or suicide. Also, there are different motives and the will. When it comes to suicide, it is usually an act of self-destruction that is very close to the murderous impulses. In psychiatric encyclopedias it is stated that suicide, regardless of race, gender, religion, is actually an expression of *sadism of super-ego that is in conflict with himself*<sup>3</sup>. Also, according to Freud (Sigmund Freud)<sup>4</sup> and his famous *theory of instincts*, suicidality is associated with man's instinct for self-destruction, or human death drive. Euthanasia has nothing to do with self-destruction, but with a final decision when there all the possibilities of pharmacology, surgery, alternative medicine and so on are exhausted. A patient for his peace is choosing to live in pain and suffering or will terminate their lifetime before such a situation arises. One should also address the definition of health that stands in the Geneva Declaration, i.e. in the modernized code that was written by Hippocrates many centuries ago. Health is not only a harmony of mental and physical condition of the individual, but also the quality of his life. Although the Hippocratic Oath states that a doctor can't prescribe medication that will kill the man, it also says that no patient must not tolerate the suffering and pain. Up-story on euthanasia and on public attitudes that still does not have a clear idea of whether euthanasia is murder, suicide or complicity in it, is imposed upon the case of British writer Terry Pratchett. Terry Pratchett became ill from a severe form of Alzheimer's disease that draws the consequences that this author will disable to function in a manner that creates novels on which he's recognizable around the world. Because of the laws that apply in the UK, which prohibit euthanasia explicitly<sup>5</sup>, Pratchett began the process of collecting the documents, which would be conducted in a Swiss clinic "Dignitas", although his wish is to die in England. With the aim of the campaign for approaching significance of euthanasia in the public, Pratchett filmed a documentary on euthanasia "Terry Pratchett: Choosing to Die," which was broadcast on the BBC channel in 2011. The documentary shows the entire process

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<sup>3</sup> Lečić 3-D Toševski, Curcic V, Grbeša G, et al. Mental health care in Serbia - challenges and solutions. Psihijat Day 2005; 37 (1): 9-15 Lečić-Toševski D, V Curcic, Grbeša G, et al. Mental health care in Serbia - challenges and solutions. Psihijat Day 2005; 37 (1): 9-15 2002, 14 (1): 34-41, Jenkins R, Kövess V. Evaluation of suicide prevention: A European approach. International Review of Psychiatry, 2002; 14 (1): 34-41.

<sup>4</sup> Sigmund Freud The Ego and the Id (German: Das Ich und das Es) 1923

<sup>5</sup> There is permitted to the doctor injected a lethal dose of morphine to a patient, under the pretext that it relieves pain patient.

when Peter Smedley, seriously ill British millionaire (*motor neuron disease*) in front of cameras drinks pills in the presence of his family and "dignified leaves this world" at its own discretion. The film has stirred the public in the UK and there are a large number of those who still protest efforts on the subject of euthanasia by Pratchett.

Even the legislation in different countries of the world has different views on this issue<sup>6</sup>. In some countries passive euthanasia is legally tolerated, as is the case with Norway, Germany and Austria. The Netherlands and Belgium have legalized active euthanasia, while in Denmark stipulates a "health testament" of the patient, and in Spain, despite the extreme religious domination, it allows the patient to arbitrarily refuse treatment. The strictest legislation on euthanasia exists in Greece, Romania, Poland, Ireland and Croatia where doctors could be sentenced to 7 and 14 years in prison. In Serbia and Bosnia euthanasia is considered as murder and as such is also sanctioned.

If you look at the human rights and moral subjectivity of a man who decides on himself and his life, even as a patient, it would open the problematic question of whether the legislation that euthanasia, as a willing to act every conscious individual<sup>7</sup> (or a testament to the state of consciousness, as is the case with Denmark, or personal example Terry Pratchett) ranks along with a murder, although a murder and a suicide are completely separated from it by the motives, psychiatric history and other factors, is actually an attack on human freedom and the right to decide freely? Is this also an unfair treatment to medical personnel who in this case is treated as a criminal and a cold-blooded killer? Attitudes of religion are certainly important for every individual whose willing moment decides a way to make his life more dignified, better, or how it will facilitate his life by religion or some other form of removal of suffering.

However, is it up to every man as a moral entity to choose, and a state and society, as well as the achievements of a modern human civilization should enable him or his life ending to be dignified and better, and ultimately in accordance with his personal preferences.

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<sup>6</sup> De facto and de jure

<sup>7</sup> If we exclude the experiments that were carried out by the Nazis against Jews, Roma and other "neraijevcima" in their death camps

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