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AP Language

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Is Euthanasia Merciful or Abusive?

 Imagine being in so much pain, you don’t want to live. Your body is failing you; your spirit is dimming. It is clear you have little time left. You have given it your all, but illness has simply taken away all of your strength and desire to go on. Your family has the tragic and difficult task of arranging your funeral. Difficult questions arise. This scenario is all too common for people today. Instead of allowing the ill to choose when they want to end their suffering, in 49 of the 50 states, this liberty is denied from them. As Americans, we are guaranteed

Euthanasia is mercy. Instead of suffering needlessly, assisted suicide allows for a fast and painless death. When one’s quality of life is non-existent, they should have the right to stop their incessant suffering.

Ordained priest Dr. Hans Kung agrees. In his article “A Compassionate God Would Not Deny Euthanasia,” he says:

In Christian belief, human life is ultimately God’s gift, and is surely not owed by Man to himself. At the same time, life according to the will of God is also Man’s duty. At such it has been placed at our responsible disposable (and not [at the disposal] of others!). This holds true too for that final stage of life which is dying. Assisted death is thus to be understood as the final assistance of living, an expression-for the believer-of an autonomy grounded in theonomy [God’s law]. (15)

Allowing someone to put an end to the pain that will inevitably take away their life regardless of how long they suffer is not murder. It is compassion. It is mercy. It is the basic understanding that life is a gift, not a duty. A gift should not create pain. Life should be enjoyed, not agonized.

 Kung also states “No one should be urged to die, yet no one should be compelled to live. The decision- made out of conscience, not arbitrarily-must be left to the suffering person.” (18) He continues by saying “Both the Bible and Traditional Catholic concepts hold that ‘Life is, of possessions, not the highest.’ The Idea that life is beyond our power of disposal id by no means unconditionally valid…” (19). There is truly no need for purposeless torment of a terminal illness.

 Alois Geiger addresses the elephant in the room.

And what if there is no God? The social rejection of suicide does not so much derive from the Hippocratic Oath but rather Christian traditions. Suicide is abhorred by all monotheistic religions. The Christian religion, which has influenced most of us, trusts to God’s will in all of life’s difficult moments. Only God who gave us life is entitled to take it away, runs the argument. So suicide becomes a sin. But what if this God doesn’t exist? (Assisted suicide Is a Valid medical Decision, 72)

 Death is a permanent choice. It is indelible. Once your heart stops beating, you are gone. There is no hope for a cure for your suffering. There is no second chance. You are gone forever, until the world stops spinning. Who are we, as human beings, to decide when a life has no purpose? We do not hold the answers to the meaning of the universe, and we do not truly know what our reason is.

 Many people would disagree with euthanasia being legalized would base their opinion on

a moral or religious principle. Some feel that with euthanasia being legalized, it is giving human

beings the right to play God and decide who should die and when. John Burns, a doctor residing

in Citrus Heights, California concludes that “euthanasia is a form of murder that should never be

accepted or encouraged” (Euthanasia Is Murder, 13). Many feel that a doctor has an

obligation and a responsibility to keep his patients alive as long as possible. When doctors take

the Hippocratic Oath, they have become bound forever to making sure their patients well-being

and livelihood are never in jeopardy. Others feel that if doctors and physicians are granted the

ability to essentially “kill”, they will lose trust and admiration for their profession in the public’s

eye. Bernard Baumrin, PhD, MD, Professor of Philosophy at the City University of New York,

stated the following in his 1998 article "Physician, Stay Thy Hand!" in the book Physician

Assisted Suicide: Expanding the Debate:

"Doctors must not engage in assisting suicide. They are inheritors of a valuable tradition that inspires public trust. None should be even partly responsible for the erosion of that trust. Nothing that is remotely beneficial to some particular patient in extremis is worth the damage that will be created by the perception that physicians sometimes aid and even abet people in taking their own lives."

Another argument against euthanasia is that it devalues life, and normalizing it would

destroy a sense of the unfathomable mystery of life and seriously damage our human

spirit, especially our capacity to find meaning in life. Others feel that instead of investing in

euthanasia, that we should instead focus on palliative care, care that makes patients more

comfortable as death approaches. Increased focus on care for the elderly is more difficult, but it

is the humane thing to do. Euthanasia would have a consequence on society, that

“We as patients, the medical profession and society as a whole stand to lose if this become the norm. Instead, I would prefer to see us demand better services for the elderly and the dying, services which recognize the needs of the whole individual-medical, physical, spiritual.” (Euthanasia, 48)

 In fact, to encourage a terminally ill person not to suffer is extremely condescending. It is not fair to tell them that because they have an illness that they cannot control, they should want to die. To tell someone that their life, even if it does have a higher amount of pain than most, is not worth living is extremely conceited. Their life still holds value despite their suffering.

Amanda’s View:

 I have extremely strong convictions towards euthanasia. My grandmother suffers from two terminal illnesses: scleroderma and pulmonary hypertension. Both diseases cause extreme discomfort, and will inevitably lead to her death. She has suffered for over twenty years. At her worst, she had to use an oxygen tank 24/7/365, was unable to walk, eat, dress, or bathe herself. She had no energy, nor happiness. The doctors told her she had only a month, at maximum, to live.

 This was ten years ago. She is still alive, and is better than she has ever been. It is a medical anomaly that no doctors are able to explain.

However, I still support euthanasia. While this may sound coldhearted or spiteful, it is not. Those months where my grandmother’s life was hanging on a delicate thread, it was so painful to watch her fight to take breaths- breaths that she did not really want to take. It is not fair that she had to suffer. While she is alive and well today, this is more often than not an occurrence that simply does not happen for the terminally ill.

Palliative care, which many argue is a much more merciful and moral alternative to assisted suicide, is a burden. It is a burden for the suffering, it is an unwanted expense for the family, and it is in fact a deathbed. Watching the time tick by as you wait to die is in no way a comfort. If you love someone, let them go, the old cliché tells us. I think that this is an applicable statement for the terminally ill. You are not helping them by allowing them to slowly wither away. Likewise, you are not showing them affection by allowing them to watch death loom over their heads.

However, I do not think that mental illnesses should be allowed to have assisted suicide as an alternative treatment. While many who suffer from afflictions like depression, bipolar disorder, or schizophrenia should not be allowed to choose euthanasia as an alternative treatment. As someone who personally suffers from major clinical depression, I can testify to the fact that recovery and treatment is not only very effective, it is very much work it. It may take a while, but it will be worth it. I am glad that I am here to type those words, and that my previous wishes to end my life were not granted. According to the Anxiety and Depression Association of America, 18% of the US population suffers from an anxiety disorder. Additionally, mental illnesses are extremely treatable, but only one-third of those suffering are getting proper treatment.

This does not mean those suffering must resort to drastic measure. Instead, we must, as Americans, find ways to help the afflicted. The medical field must find an effective way to treat the suffering, and not simply give up.

Nick’s View

In my opinion, I feel that euthanasia should be legalized but only applicable to those who

are suffering from terminally ill diseases such as Lou Gehrig’s disease or pancreatic cancer.

people deserve to live life to a certain degree of quality, and not have to suffer through the

excruciating pain that is experienced when one is diagnosed with such diseases. Also, people

should not have to see their loved ones suffering and not being able to find a way to escape the

pain. If euthanasia was legal, it would provide the cure to all of a person’s pain and suffering. If

someone is suffering from depression, mental illness or other similar illnesses that do not

cause intolerable physical pain though, they should not be given the option of euthanization. The

American Civil Liberties Union stated in its 1996 amicus brief in *Vacco v. Quill* that:

The right of a competent, terminally ill person to avoid excruciating pain and embrace a timely and dignified death bears the sanction of history and is implicit in the concept of ordered liberty. The exercise of this right is as central to personal autonomy and bodily integrity as rights safeguarded by this Court's decisions relating to marriage, family relationships, procreation, contraception, child rearing and the refusal or termination of life-saving medical treatment. In particular, this Court's recent decisions concerning the right to refuse medical treatment and the right to abortion instruct that a mentally competent, terminally ill person has a protected liberty interest in choosing to end intolerable suffering by bringing about his or her own death.

A state's categorical ban on physician assistance to suicide -- as applied to competent, terminally ill patients who wish to avoid unendurable pain and hasten inevitable death -- substantially interferes with this protected liberty interest and cannot be sustained.

It is rational and morally acceptable to end someone’s suffering if the pain inflicted upon them is

too unbearable. Also, there is an economic factor involved with maintaining someone’s life who

does not want to remain living. The cost of maintaining someone’s life could be a great burden

on low-income families, which is why euthanasia is also a viable option because it is cost

effective, and a merciful way to help someone with a terminally ill disease who has no desire

to suffer anymore. Put yourself in someone else’s place, perhaps their hospital bed. You’ve just

been diagnosed with Ebola Hemorrhagic Fever, and the doctor says it’ll last three weeks and the

pain you will experience during this period will be horrific, and there is only a 2% chance you

live. If I was diagnosed, there is no way I would want to suffer through that pain. There isn’t any

other option though, and I will have to live with Ebola. Now with Euthanasia as an option, I am

able to pass away painlessly and easy, and my family can remember me as a healthy, strong

individual who lived a happy life, not one who suffered tremendous amounts of pain in their

final moments.

Conclusion

Euthanasia is a liberty that must be granted to the terminally ill. If dying with dignity will give the sufferer final happiness, they should be granted that wish.

“The unexamined life is not worth living,” Socrates tells us.

Likewise, we should be allowed to have control over our own lives. Life should not be defined by the presence of brain activity or a pulse. Life is much more than that, and it should be treated as such. This includes how and when it ends. Euthanasia gives all humans that right.

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