

Destinee bridges

[Health & Medicine](#), [Euthanasia](#)



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Bibliography- Final Draft 16 October 2012 Physician Assisted Suicide Public

opinion on suicide acceptability through a physician has become a very controversial topic in today's world. In the following, six scholarly articles will be reviewed. In each article one will give their opinion to the matter of physician-assisted suicide and provide arguments to back up their claim.

Most of these articles are from physicians themselves and others close to their field to give insight. Dieterle, J. M. (2007). Physician-assisted suicide: A new look at arguments. *Bioethics*, 21(3), 127-139. Dieterle is a professor at Eastern Michigan University in the department of history and philosophy. In this paper he reviewed the arguments against physician assisted suicide. He discusses the Oregon's Death with Dignity Act and their practice with PAS.

Dieterle does not provide positive arguments for physician-assisted suicide because he believes that no anti-PAS argument has value. Consequential arguments were analyzed throughout this paper. After reviewing some of the arguments, Dieterle stated that statistics based on Pas does not agree with the consequential predictions. Fass, J., & Fass, A. (2011). Physician-assisted suicide: Ongoing challenges for pharmacists. *American Journal of Health-System Pharmacy*, 68(9), 846-849. Jennifer Fass is a clinical assistant professor and Andrea Fass pharmacy assistant professor. They open this paper with an eye catching statement, " The pharmacist on duty at a community pharmacy in Oregon receives a phone call from a local physician who says he intends to write a prescription for a lethal dose of secobarbital to end a patient's life (Fass & Fass, 2011, p. 846). " They review the Death with Dignity Act that was created in 2008. This states that a terminally ill

patient with less than six months to live and 18 years or older has the right to request aid from a physician to assist in suicide. The code of ethics for pharmacists does not discuss physician-assisted suicide and because of this pharmacists believe that it is okay to help aid in death in order to help one die with their dignity. " A pharmacist is dedicated to protecting the dignity of their patient, " and " A pharmacists promises to help individuals achieve optimum benefit from their medications, to be committed to their welfare, and to maintain their trust (Fass & Fass, 2011, p. 848). " This article was useful due to the information and informative way of giving information. Also by using some form of statistical data (more so of percentages). Lachman, V. (2010). Physician-assisted suicide: Compassionate liberation or murder? Medsurg Nursing, 19(2), 121-125. Vicki Lachman, a clinical associate professor at Drexel University is the author of this investigation of physician-assisted suicide and if it is considered compassionate liberation (right) or murder(wrong). Opening with a study from Joyce Fontana grasped the reader's attention. " A researcher by the name of J. Fontana claimed that the right-to-die movement is gaining momentum and nurses will care increasingly for terminally ill patients who are considering suicide (Lachman, 2010, p. 121). " Lachman focuses closely on the three states (Oregon, Washington, and Montana) that have legalized physician-assisted suicide. Evidence from a survey in 2005 showed that 70 percent to 29 percent of U. S. citizens are in favor of a law that would give doctors the right to aid in suicide. This article was useful with the charts and statistical data provided to back up all claims. Lesser, H. (2010). Should it be illegal to assist suicide? Journal of Evaluation in Clinical Practice, 16(2), 330-334. Harry Lesser is a

retired lecturer in philosophy from the University of Manchester. His view comes from a philosopher's perspective based on politics. He takes a stance in the battle over the legalization of physician-assisted suicide. Lesser argues the facts about if assisting in death should be considered morally wrong or right. Lesser takes the viewpoints and reasoning from others and include them in his study to verify each argument. He poses arguments in his assessment and observes each of them closely. Two of the main arguments include: The moral right to choose one's own death, or at least to die with dignity and that the law is created to prevent harm but not to prevent doing good. This article is useful based on the main arguments brought about in it. They each give insight and answer questions to one's viewpoint. Seale, C. (2009). Legislation of euthanasia or physician-assisted suicide: Survey of doctors attitudes. *Palliative Medicine*, 23(3), 205-212. Seale has a Ph. D from Barts and The London School of medicine and dentistry. This paper focuses on surveys studied over the years. Surveys are some of the main facts known to support one's studies, and using them helps build his case. " A total of 176 doctors wrote qualitative comments about a policy of allowing medically assisted dying, of which 31% were favorable to such a policy, 36% opposed and 33% neutral" (Seale, 2009, p. 208). This paper looks at the legal and ethical issues that go hand in hand with physician-assisted suicide. Right now there are three states that currently support PAS. Patients who commonly request aid in dying are people who are terminally ill with diseases such as AIDS and cancer. Ziegler, S. J. (2007). Physician-assisted suicide and criminal prosecution: Are physicians at risk? *Journal of Law, Medicine, & Ethics*, 33(2), 349-358. Ziegler is an assistant professor and in

the school of public and environmental affairs at Indiana University Purdue University Fort Wayne. In this article he focuses on physicians rights and if they are at risk. Many studies are used to back up claims. He uses a case-study of a 55 year old lady to back up his information. The 55 year old lady wished to speed up the process of her death, and with the approval of her husband, the physician agreed. The problem he brought up came from the physician signing the patient's death certificate stating that she died of natural causes. This type of physician-assisted suicide and covering it up can be punished. This article is useful because of the examples and data used to support evidence of PAS. References Dieterle, J. M. (2007). Physician-assisted suicide: A new look at arguments. *Bioethics*, 21(3), 127-139. Fass, J., & Fass, A. (2011). Physician-assisted suicide: Ongoing challenges for pharmacists. *American Journal of Health-system Pharmacy*, 68(9), 846-849. Lachman, V. (2010). Physician-assisted suicide: Compassionate liberation or murder? *Medsurg Nursing*, 19(2), 121-125. Lesser, H. (2010). Should it be illegal to assist suicide? *Journal of Evaluation in Clinical Practice*, 16(2), 330-334. Seale, C. (2009). Legislation of euthanasia or physician-assisted suicide: Survey of doctors' attitudes. *Palliative Medicine*, 23(3), 205-212. Ziegler, S. J. (2007). Physician-assisted suicide and criminal prosecution: Are physicians at risk? *Journal of Law, Medicine, & Ethics*, 33(2), 349-358.