

Acute euthanasia

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The debate for and against euthanasia has resurfaced after an elderly couple filed a complaint after getting evicted from an assisted living facility. Armond and Dorothy Rudolph were members of Compassion and Choices, the country's largest organization aiming to increase end-of-life options – “ a legal way to hasten death without drugs or violence” (Span). The Rudolphs decided to voluntarily stop eating and drinking (VSED), a method they have learned from the organization. “ The New England Journal of Medicine in 2003...reported that most [the] terminally ill patients who had deliberately refused food and fluids had a ‘ good death’, with low levels of pain or suffering” (Span).

Neil Rudolphs protested that the facility evicted his parents on the fourth day of their fast, without giving them the 30-day notice of discharge. The next day, the administrators of the facility called 911 to report a suicide attempt and asked the paramedics to take the elderly couple. “ They said, ‘ That’s what we want to do’...We all discussed what it meant and whether they were sure” (Neil Rudolphs in Span).

Dr. Drew Harrell who was on call at the time related why the facility called their office: “ They were stuck between divergent opinions and said “ We need some guidance” (Span) so Dr. Harrell drove over to assist.

The incident with the Rudolphs is an illustration of the opposing views about VSED, a form of euthanasia which is legal in all states in the US. Despite the support of the law, many citizens still oppose the practice. In a statement released by Charles Sabatino, director of the American Bar Association on Law and Aging, “ While the theory may be clean, the execution can get messy” (Span). The aging facility may have been uninformed of the ramifications of the Rudolphs’ death and were afraid of facing investigation if

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they do not interfere.

John Harris defines euthanasia as “ the implementation of a decision that a particular individual’s life will come to an end before it need do so”. It is found in several forms – active and passive, indirect and assisted suicide. It is meant to provide people who have incurable and unbearable diseases with a way to relieve their afflictions, to enable them of a good death. Yet, as practice shows, this belief can sometimes be abused and can lead to denial of medical treatment, such as in a case of a 15-month old boy whom was refused by Canadian hospitals to undergo tracheotomy.

It must be noted, however, that all over the country, there are initiatives calling for laws legalizing active euthanasia. For example, in 2000, Maine citizens were asked to approve the Maine Death with Dignity Act through a ballot. The ballot question was: “ Should a terminally ill adult who is of sound mind be allowed to ask for and receive a doctor’s help to die?” (Marker). California, Michigan and Washington had the same votes, and received the same results – their residents were not yet ready for legalizing assisted suicide. Meanwhile, Oregon was successful in passing the country’s first assisted suicide bill. It even had a provision where the Oregon Medicaid program will pay for “ assisted suicide for poor residents as a means of comfort care” (Marker).

The debate on euthanasia may very well never be settled. Both supporters and opponents of the practice have strong arguments John Harris believes that the significance of euthanasia is connected with how we value life and how we uphold that value. He says: “ the real problem of euthanasia, its scale and also its real horror is not only misunderstood but largely ignored.” Meanwhile, John Finnis says: “ Denial of euthanasia is wrong, not because it

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involves the frustration of critical interests but because it is simply a form of tyranny; an attempt to control the life of a person who has her own autonomous views about how that life should go”. Whose choice it is to die anyway? Why do it at all? At the end of it all, it all depends on an individual’s belief and preference.

Works Cited

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