Is euthanasia immoral is letting die the same as killing term paper example

Health & Medicine, Euthanasia



Euthanasia comes from an ancient Greek word signifying " death that may be good". Euthanasia may be ' the deliberate putting to death of an individual with a painful or fatal disease. The argument surrounding Euthanasia may be controversial and emotive, with some labeling it as merciful and others as murderous. There may be strong arguments both against and for this practice. This essay will examine both sides/position including arguments, and then finally demonstrate that euthanasia is not murder and letting die may not be similar to killing.

Cultural and Religious perspectives may generally be at the forefront of arguments concerning this controversial topic. Leigh Turner, in his article "Euthanasia and Moral Reasoning", explores the modern presence of numerous accounts of the gist of human life, of autonomy and also suffering. He acknowledges that considering the topic of euthanasia, diverse social world's crash. Mainly, the religious rhetoric has fronted arguments for both condemnation and justification of euthanasia. Religious communities that oppose euthanasia stress the inviolability of the soul, where life may be interpreted as a gift that is God-given and that ought never to be renounced. Inside these religious practices, the self has no assert to decisions regarding life and death. For instance, the 6th Commandment states that "Thou shan't murder". Bott defines murder as 'the deliberate act of taking guiltless human life', argues that, euthanasia may be a deliberate action of taking innocent human life, and may therefore be a violation of Godly law.

On the other hand, others argue through religious rhetoric that, choice may be a basic human right, and a gift from God. This argument places emphasis on personal autonomy and freedom. Michael Laws argued that, mainly one of God's gifts that may be fundamental to humankind is the free will; hence, euthanasia may be one of those moral choices taken freely and individually (Bott). This demonstrates that there must be a much-deserved individual freedom gained with the alternative of chosen euthanasia. In addition, Law suggests that from a terminally ill individual has already received a "death sentence" from his creator God; hence, euthanasia may be an option to simply effectively manage an individual's passing.

Another important aspect of euthanasia to consider may be medical care advancement. With enhanced capacity to extend the dying process, the ' unalterable' and 'natural' to a certain extent, can become 'manipulable' and 'measurable' McCue asserts that, dying was once viewed as expected and natural, has become 'medicalized' into an unrecepted branch of Medicare. It has been disfigured from a "natural occurrence" of great implication into the end-point of inadequately treated or untreatable injuries or diseases. This sprouts the argument that, advancements in technology in Medicare have made death to be spartanly an unnatural occurrence that can dispossess the dying person, of their autonomy. However, the question of whether euthanasia may be an option of increasing personal autonomy arises. Bott states that, the legalization of voluntary euthanasia may sprout great pressure to the unwell and elderly to exercise their freedom and end their lives. This may be a huge concern, bearing in mind that euthanasia consent can be prearranged under psychological pressure, to patients who may have the worry of financially burdening their relatives with huge Medicare. Even though these costs may be covered through public funds,

there may be a concern that personnel in hospitals would have incentives economically to pressure or advise unwell and elderly people in the knowhow of euthanasia consent.

Another sector under fire in the debate over the matter of euthanasia may be Health-care system bureaucratization. McCue describes modern clinicalcare as being 'fragmented' and 'impersonal' with health-care practitioners operating in institutional settings that may be termed as large-scale. A great deal of their own individual autonomy may be lost in the middle of the regulatory processes. Private and consensual agreements amongst patients and physicians may be restrained significantly, and Turner argues that, the need for the resolution and examination may increase on the subject at the public policy level. Moreover, a pro-euthanasia option may be offered in the Death as a Pill. This proposal of self-administering pills may also be put to the fore as an option, yielding a painless death upon one's choice. It may be argued that these 'nonviolent pill' offers immense comfort and peace of mind and provides the owner power over death and their lives. However, processes concerning the theoretical pill regulation have been examined, and fears have emerged that it may provide too easy options; hence, creating unwarranted deaths for suicidal and depressed individuals whom the pills were not designed for.

On the other hand, there may be arguments in the Medicare field that there may be other options of managing death, regarding to the hospice culture and passage rites. Froggatt spreads a very optimistic picture of hospice-care, and stresses its holistic and spiritual outlook, and also the nature of being family orientated. Froggatt argues that within the sanatorium movement,

death may be managed in an honest and open manner, offering better alternative and approaches to the changeover of death and life. Hospice care may be portrayed as being ephemeral, using the notion of dying as a passage while also providing pain relief to eliminate or reduce distress and suffering, in addition to offering an environment that may be psychologically, socially, spiritually, and emotionally compassionate towards the patient and also the family. Frogatt believes that one may be able to die devoid of intervention in a spiritual and supportive environment and also without pain.

Euthanasia may not be murder

Euthanasia takes place and may be selected of own free will by patients that may be in great pain because of an incurable illness such as cancer and AIDs. More often than not, the decision may be made to heave the plugs of mechanisms that prolong life or to stop treatment. For the reason that patients choose to die, their suffering and there may be no intention to cause injury, physician-aided euthanasia cannot be thought as murder. Murder may be defined as the act of brutality which may be perpetrated towards a victim. For instance, a man shot three times and stuffed into a car may be a murder victim. The victim dies at a time that may be forced by the killer whose intent to may be to harm her or him. A good example may be the strangler who killed women in Boston; he terrorized them first, before killing them. Often murder may be painful and the victim who may be dying may not do so voluntarily or have a choice of whether to take part in her or his death. Murder may be death through violence caused by the killer rather than being caused by natural circumstances.

Different from murder, euthanasia may not be an act of violence. Doctors

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state that patients that may be worn-down by pain, depression and extensive testing, will be without difficulty persuaded to request aided suicide. Besides, modern medical expertise has permitted doctors to extend life beyond the point of natural death in a patient. Considering euthanasia, the doctor could do with ending suffering from AIDS or cancer and aid the patient to die contentedly. Patients may be beginning to affirm their right of death sooner than being reserved alive compulsorily. For instance, Dan Cowart, a Texan who endured burns from a gas explosion, wanted to die though he had survived the horrible accident; he believed that there was a violation of his rights by doctors in preventing his death via a life-supporting treatment. Death becomes a diplomatic reward in cases where patients like Cowart may be in continuous pain.

Doctor-aided euthanasia may only be performed with complete patient's consent. Murder may be viewed as stealing life, while euthanasia may be viewed as providing the patient release. A patient with a neurological condition that may be degenerative may beg for assistance to die (Manning). On the other hand, murder typically takes the victim in surprise. The murderer decides when to murder his/her victim through whichever method; however, the slain victim has never gives consent on whether or not to be killed. Murders may be committed with harmful or malice intent. People may be killed for various reasons such as; to steal money, keep secrets or even for power, and other reasons that may be criminal in nature. Other reasons may include killing out of hatred, political affiliation or ethnic groups. For instance, hate crimes such as murdering Jews and African-Americans, may be done with the objective to harm and injure these people,

and to do away with them. Genocides similar to those done by Hitler may be termed as wholesome murders. Unlike murders, doctors who help patients to end their lives aid people in ending suffering and pain. Part of the oath a doctor takes may be to offer relief to patients (Bioethics, Euthanasia, and Physician-Assisted Suicide). Therefore, when patient choose to avert artificial prolongation of their lives on machines or even terminate the pain caused by terminal diseases such as cancer; they seek aided suicide as a justifiable means to end their pain. Opponents to euthanasia may view aided suicide as murder. However, doctors have an obligation to save lives and provide relief to their patients (Manning). A number of patients are kept in life-supporting machines and after going through a lot of pain they succumb to death. In addition, when a person is half dead, lawfully that person may be biologically dead and it may not be murder to bring to an end life-support. In conclusion, the debate that surrounds euthanasia provides a serious predicament to both health care providers and patients. Euthanasia may be centered on the conflict sandwiched between the health care provider's ethical duty and the patient autonomy. Given that patient's unrelieved pain and severe illness cannot be mitigated, euthanasia comes in handy to end the patient's misery; and since there is patient's autonomy; euthanasia may not be termed as murder.

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