

# Euthanasia

Sociology



Euthanasia (Add (AddTutor's Name)

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The article ' Physician-assisted suicide as a real option' by Leo Chan and Donald Lien looks into the economic costs and benefits of euthanasia. The work, in the introduction, makes the realization that for a terminally ill patient, the only certainty that lies ahead is death. Other certainties that can be identified are physical pain and mental suffering along with some financial burden. So, the decision to end life is of benefit to all the parties involved. On the other hand, if it is decided that the life should be prolonged beyond the limits set by nature, there can be extra expenditure involved along with emotional costs. In the opinion of Chan & Lien (n. d, p. 2) the scholars claim that if the benefits outweigh the costs, then selecting euthanasia is a rational choice.

The scholars point out that the benefits of euthanasia are zero pain, zero mental suffering, and reduced economic costs. On the other hand, continuing treatment means increasing pain as the disease progresses, increased mental and physical suffering, and medical cost of pain management and other medical services. Thus, it is pointed out that under the given circumstances, continuing treatment is more expensive than adopting euthanasia. In other words, if any society wants to reduce the demand for euthanasia, it should reduce the expenses involved in medical services and pain management.

Thus, one gets a clear idea about what is meant by Mills as the confusion  
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between personal troubles and public issues. In the case of euthanasia too, the same situation arises. On the one hand, it is a personal trouble as the patient is the only one suffering. On the other hand, a large number of factors come into play while deciding whether Euthanasia should be adopted or not. They include religious and social values, medical costs, and so on (Infed, n. d).

Thus, the scholars point out that as the fruits of euthanasia come from reduced pain and suffering linked to additional treatment and medications, if medical services succeed in making life painless for terminally ill people, there will be a considerable decline in the demand for euthanasia. According to Chan and Lien (n. d, p. 6) yet another strategy as suggested by the scholars is to increase the cost of euthanasia which can be achieved by political and religious condemnation.

Another important claim from the scholars is that euthanasia can be used as an altruistic act. This can be achieved by using the medical and financial resources saved through euthanasia to treat those who are not terminally ill. That means, by adopting euthanasia, the society can save money and other resources to help those who can be cured.

However, a matter of serious concern here is that as Sally Sheldon and Michael Thomson point out, euthanasia is every person's right, and hence, while the economic side of euthanasia is considered, the personal preferences of the patient is likely to take the back seat. That means, if the decision proceeds in the economic line, the person may be killed even against his or her will because of the economic benefit involved. In the words of Biggs (1999, p. 295), instead of a time for relaxation and quiet enjoyment, the old age will become a time to meet the pressures and expectations of

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the near and dear ones by adopting an immediate death.

Chan and Lien continue to opine that it is irrational to believe that a sudden death will occur in the case of terminally ill people, thus making the cost of adopting euthanasia higher than not adopting it. Some other possibilities as opposed by the scholars are possibility of wrong diagnosis and possibility of new treatments coming up in the immediate future. However, the scholars point out that euthanasia is the result of unbearable pain and suffering that has nothing to do with diagnosis. So, a decline in the demand for euthanasia from the part of patients is highly unlikely.

Thus, the scholars prove that adopting euthanasia is beneficial when the economic side of the issue is considered. In addition, it becomes an act of altruism too. Firstly, it reduces pain and suffering for the patient, and secondly, it saves money, resources, and time by avoiding continued treatment, which can be used to treatment the patients who are not terminally ill, or who can be cured. However, the danger lies in the fact that while the economic side is considered, the personal interests of the patient may be hurt, thus making old age and terminal illness a burden.

#### References

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