

## Euthanasia: Is there a place for mercy killing/assisted suicide?

### Introduction

With the assisted suicide issue flying round South Africa right now, it seems appropriate this month to explore the evocative and emotive topic of euthanasia. Some call it “mercy-killing” or “physician-assisted suicide”. Initially it would seem to be a subject relevant only to those near the end of life or to the loved ones of people in such a predicament. But it cannot be separated from the wider issues of the purposes and ends of life, plus the whole issue of God, His sovereignty over life and death and His relationship with humans.

Some countries, like the Netherlands, Belgium and Colombia, have already legalised euthanasia. In the Netherlands the Euthanasia Law even states that persons sixteen years old and older can make an advanced “written statement containing a request for termination of life” which the physician may carry out in a medically appropriate fashion. Children twelve to sixteen years old may request and receive euthanasia or assisted suicide. In this case a parent or guardian must “agree with the termination of life or the assisted suicide.” A person may qualify for euthanasia or assisted suicide if the doctor holds the conviction that the patient’s suffering is lasting and unbearable.” There is no requirement that the suffering be physical or that the patient be terminally ill. This in my view is unconscionable. Even the prospect of “euthanasia tourism” exists. The law does not prohibit doctors from administering euthanasia to nonresidents (from “Patient’s Rights Council” website).

Here in South Africa now there is also a pro-euthanasia movement afoot which the SA Medical Association thankfully opposes. Perhaps the key problem relates to the basis in all countries for their decisions, because in western countries, anyway, there is no current consensus about the basis for ethical decisions. This shattering reality means that less and less is there any core set of values with wide assent which can be invoked to regulate our culture’s competing voices, interests and practices as they jostle one another for supremacy. In consequence we are ethically adrift. This aggravates our problem.

### What is Euthanasia?

The Oxford Dictionary describes it as “the act of causing somebody to die gently and without pain, especially when they are suffering from a painful, incurable disease.” Euthanasia proper does not in essence include the removal of a person from a life support system although some call this “passive euthanasia”, in contrast to “active euthanasia”. Perhaps it is less confusing in a layman’s essay to confine the term primarily to acts which hasten the death of someone who would otherwise still live. Even so, we note that much secular ethical discussion focuses on whether there is a morally significant distinction between causing death (active euthanasia) and allowing death to happen (passive euthanasia).

So what does “alive” mean when modern medical knowledge can keep a body alive when the brain is dead? In the view of missionary doctor Gerrit ter Haar: “One cannot speak of life anymore in such cases. Physiological brain death is irreversible and a person with a flat EEG (electroencephalogram) is no longer alive.” The key factor here is that if it is scientifically and medically established that “the brain death” is irreversible and that breathing and heartbeat can only be maintained artificially, then lifting life support systems on “the living dead” should not be considered as euthanasia proper.

We know that the doctor is the servant of life, and the trust of both patient and relatives rests on this assurance. The patient knows the doctor is on his or her side. But is there a point with a person who is not brain dead when the doctor’s “life” obligation ceases, as in an intolerably painful illness with no cure in sight? And what if the patient asks to be released from a living death? Some introduce the distinction between the prolongation of life and the prolongation of the act of dying. Yes, we

are in a minefield.

### Christians and Humanist World-views

We must, as with the abortion issue, start in the presuppositional world-views of those seeking answers. Basically we have two world-views: the secular humanist-materialist (where matter in an accidental godless universe is the final reality) and the biblical (where final reality is the infinite personal Creator God who has revealed Himself to humanity in Jesus Christ and the Bible). These two world-views, with their different “final reality” perceptions, stand in antithesis to each other. And being two totally different concepts, they will bring forth two morally different conclusions both for society and for the individual. Starting with man and with no knowledge except what fallible human reason can conclude, the secular humanist can have no standards outside of him or herself.

“Utility above life” can then come in as a key principle to help decide life or death by euthanasia according to perceived usefulness. The celebrated Joseph Fletcher, of *Situational Ethics* fame, affirmed in his book, *The Right to Live and the Right to Die*, that quality of life supersedes right to life. Therefore, imperfect new-born babies and suffering

adults may both be considered “monsters” whom doctors should not allow to continue living. Such an unconscionable view is not illogical for ideological humanism where man is the measure of all things.

This kind of contemporary humanism also goes well beyond the old justification for euthanasia giving a good and quick death to the incredibly ill and suffering. Here mercy killing was for the sake of the sufferer. Now it can be considered in utilitarian categories for the convenience of those who are alive and left behind.

So, unless the Church rises as a contrary voice, the day will be progressively carried in our neo-pagan age by **utilitarianism** (is this death useful to us?), or **sentiment** (is this suffering too much?), or **choice** (do you want the option to die now or to suffer on?). But the Christian, starting with God and His Word, operates under Divine principle and moral law, the Creature under the Creator. The questions then are theological. “How does God see this? What does He want? What biblical principles are there to guide us in this matter? How can I obey my Lord and His Word?”

### Motivations behind the Euthanasia Impulse and our Response

#### *Fears producing the desire for euthanasia*

- i) Fear of pain: All people feel death is a painful reality. But actually in this day and age, there is little reason for a dying person to experience excruciating pain. The palliative care system in more developed countries has become so effective that there are few maladies from which much of the pain cannot be very significantly alleviated. Even so, we tend to fear any pain.
- ii) Fear of abandonment: If treasured relationships for the elderly are not maintained or they feel abandoned, then many would sooner die than exist in isolated suffering.
- iii) Fear of being a burden: For some, the idea that they are now going to need extensive and inconvenient help after a lifetime of being a provider is an absolute nightmare. “I’d rather die than land on my kids”, say many.
- iv) Fear of the process of dying: Because of this fear some feel, “Please accelerate the process.”

All these fears are very real and valid.

#### *Compassionate Concern towards the Sufferer*

If alleviating pain, suffering and sickness is the main negative duty of medical practice, then serving the patient’s highest health interests is the positive rationale of all medical treatment, and the central obligation of caregivers to their patients. Beneficence is the technical term in medical ethics. It is the easiest of all principles to ground in Christian faith, as part of the universal Christian obligation to love the neighbour, and surely your dying neighbour.

**“Euthanasia cannot be separated from the wider issues of the purposes and ends of life.”**

## Autonomy and Rights

In a society preoccupied with individual rights and personal autonomy, it does not surprise us that the debate over physician-assisted suicide focuses on the right to die. The word in medical ethics is autonomy. Interestingly enough, the US Supreme Court ruled on 26 June 1997 that “there is no constitutional right to die”. We might want to die or to be helped to die, but that does not create a right to die. Medically, respect for autonomy is most primarily expressed in the requirement of free and informed consent for medical procedures affecting one’s life, health and well-being. In most countries this is enshrined in law and professional ethics. However, amid all the pleading of rights we reiterate that this is not problematic for the Christian provided all remember that our human rights are not self-defined or determined by majority vote. They come from God, are inherent in our creation, and to be exercised under Him and according to His Word. And our wants are not automatically our rights.

## Rights

It is perhaps at this point instructive to note some of the rights claimed in this matter:

- i) *The right to refuse treatment:* The concern expressed in this cry is that people do not want to be forced to take pharmaceuticals or undergo massive, painful and disfiguring treatment against their will. I believe as Christians we can accept this, unless there is an obvious chance of possible recovery. Beyond that, many ethicists feel that even with the irreversibly brain-dead, only the family, not the doctor, should have the final right to decide whether support systems be removed or not.
- ii) *The right to die with dignity:* The desire for this is deep, God-given and to be honoured.
- iii) *Right to control:* A lot of euthanasia debate is about control. We want as much as possible to control our own destinies, even when and how we die. However, most Christians would contend that sanctioning active euthanasia would have the reverse effect. Instead of allowing individuals to make choices, it would rob the right of choice from those most vulnerable. And once legalised, it can easily be manipulated by the powerful. More than that, suggestions to the weak or unwilling that their time on earth should come to an end could be so firmly asserted that they would be pathetically acceded to. The perils are obvious and awesome. Beyond that, the Christian must assert that final and ultimate control is to be left in God’s hands.
- iv) *The right to affirm sanctity of life:* This is one of the foundational principles for those who oppose euthanasia, just as for those actively opposing abortion. Being created in God’s image not only provides a person with dignity, but also affirms the notion that the sanctity of life has strong biblical affirmation. For medical people, the sanctity of life principle makes motivation a critical factor in the euthanasia debate. Thus if a doctor with the sole motivation of alleviating pain allows doses of morphine or whatever which he knows in cumulative terms will finally be fatal, he would surely not be violating the sanctity of life because he is not trying to bring about death but alleviate pain. But if, playing God as it were, he or she administers the lethal dose with a clear motivation of killing the patient, that indeed violates the sanctity of life because the purpose is to terminate life. The distinction may be subtle but is critically important, the one motivation being morally valid and the other morally perilous.

## Key Biblical Principles to Underline

Obviously euthanasia was not an issue that directly confronted those who lived in biblical times, so we have no scriptural references specifically addressing the issue. However, let’s underline some relevant principles:

### 1. The sovereignty of God in Christ over life and death

This speaks of the final “in-charge-ness” of God as the one who gives life and who takes it. “This is God’s call”, said a doctor to me when my mother was dying. Said the Lord to Hezekiah, “I will add fifteen years to your life” (2 Kings 20:6). The time of his birth and death was God’s call. The Psalmist knew this when he affirmed, “My times are in Thy Hands” (Psalm 31:15). In other words, “you, Lord, know when I will die”. In the New Testament we also have Jesus saying, “I have the keys of life and death...” (Rev. 1:18). And Peter could even call Him “the Author of Life” (Acts 3:15). In other words, both our life destiny and our death destiny are in His hands. To interfere with this is no light matter.

### 2. Divine plans and will

A corollary of the above is that God has plans for us which we should not

prevent from being accomplished. Said the Lord through Jeremiah, “I know the plans I have for you” (Jer. 29:11). “You are not your own,” says St Paul (1 Cor. 6:19). This means we cannot take our lives or wilfully take the innocent life of another. Self-defence and capital punishment are, of course, separate debates.

### 3. The dealings of God with the dying

A senior nursing sister told me of the deep sense she had when her husband was dying that God was doing deep things with him and he was doing deep things with God. Spending hours and days some years ago at the bedside of my dying mother, I had the profound sense of eternal things happening with her right up to the last minutes though both she and I were longing for weeks beforehand for her release. But God had His time and was dealing with her and she with Him to the very last. To interrupt the eternal business prematurely is no province of man’s. Says St Paul, “Everyone who calls on the name of the Lord will be saved” (Romans 10:13). To terminate someone’s life prematurely could be to prevent the possibility of that call. We cannot do it.

### 4. The role in the Christian life of suffering

No one says suffering is good. It is evil. It is part of our fallen estate. But it is not a biblical principle to avoid all suffering at all costs, because our faith is often deepened and matured by the trials and sufferings that come our way (see James 1:12, 1 Peter 1:6 etc). Take the seemingly

inexplicable sufferings of Job. We now know that these had meaning in God’s plan. Yes, we could seek to end suffering with the sufferer by ending life, but doctors might make a breakthrough cure, or God might supernaturally heal them on their death-bed! I have known such cases.

### 5. The ministry of the dying

While we may major on what we think we could or should be doing for the dying person, we also need to register what the Lord may still have for the dying person to do under God for us! “His ways are not our ways” (Isaiah 55:8), and it seems the Lord will often do extraordinary, supernatural, eternal things through the dying person in the lives of his or her friends and family or nursing staff. Aying we aren’t interrupt God doing His thing in His way for His purposes.

## The Dutch and Swiss Experiments

We alluded earlier to the Dutch experiment, the Netherlands being the country most daring in its euthanasia programmes. How have things fared there? Herbert Hendin, in his book, *Seduced by Death*, provides us with dire warnings concerning the consequences of crossing the euthanasia boundary, as happened in the Netherlands. In fact, a Dutch governmental review once revealed that 45% of hospital-based assisted deaths occurred without patient or family consent, despite legal exclusion of surrogate decisions. This included deaths of children. Such a shocker led Canadian lawyer Bob Nadeau to conclude, “The Dutch experiment has failed... been subject to manipulation, and vulnerable to abuse.” These kinds of things have caused deep ripples of disturbance through the Dutch elderly. Thus 90% of the Dutch in a nursing home study some years ago were found to oppose euthanasia, and 50-60% feared being euthanised against their will. This the Christian conscience cannot sanction.

Something else quite devastating is noted in a recent letter by Dr. Jon Larsen to the *Natal Witness* (11.05.15), “In Switzerland, studies show that the incidence of severe psychological illness among relatives of people given assisted suicide 14-24 months after the event is the same as that encountered among servicemen returning from the Vietnam War. Families are seriously affected.” This we dare not minimise.

## Conclusion

In sum, neither Christian conscience nor the Bible can sanction active, deliberate euthanasia or assisted suicide. Its irrevocability, its interference with God as Lord of life and death, its interruption of what the dying person may be doing in the Spirit for others, its terminating of the sufferer’s eternal business with his or her Maker and the Sanctity of Life principle, all make it unacceptable. Key in our discussion is the matter of motive. The motive to relieve and ease pain and suffering is morally praiseworthy and vital. Anything else is morally and biblically unacceptable.

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