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Final

There are two fields to euthanasia: active and passive. According to the "BBC" website, "Active euthanasia occurs when the medical professionals, or another person, deliberately do something that causes the patient to die." Passive euthanasia "occurs when the patient dies because the medical professionals either don't do something necessary to keep the patient alive, or when they stop doing something that is keeping the patient alive" ("BBC"). However, throughout this essay, I will focus on passive euthanasia and how I believe it to be morally acceptable under most circumstances. I will also consider counter-arguments against my thesis that passive euthanasia is almost always morally permissible. Furthermore, I will look at this case through a utilitarian point of view. I will conclude this paper with a metaphysical perspective of a determinist.

I believe passive euthanasia is morally permissible under some circumstances. If a person is in a coma and thoroughly conducted medical studies guarantee that he is not going to wake up, then I believe it is acceptable for passive euthanasia to take place. In doing so, the person will be relieved of any pain he is experiencing but unable to express. Also, if an individual is too young, senile, or mentally incompetent or disturbed, to make an informed consent on the situation, I think it is right for his/her guardian(s) to make the decision of performing non-voluntary euthanasia. In such cases, a trustworthy surrogate decision maker should be held responsible to decide for the patient who is doubtfully autonomous or nonautonomous. In such circumstances, I

believe it is acceptable to choose passive euthanasia in order to relieve the person of his suffering as well as those involved, such as family and friends.

Many of those who object to the moral permissibility of passive euthanasia claim that it is that it is "not necessary nowadays for people to die while suffering from intolerable or overwhelming pain because the provision of effective palliative care has improved steadily, and hospice care is more readily available" ("Voluntary Euthanasia"). However, although such factors are important, they still fail to fully end the patient's discomfort. Much of the palliative care that is offered involves the use of different drugs, including morphine, which typically cause unpleasant side effects such as headaches or nausea. Furthermore, although palliative and hospice care may be available, passive euthanasia may still be a more beneficial alternative to the patient's pain ("Voluntary Euthanasia").

In addition, people against passive euthanasia deem it immoral because they state it can never be made certain whether the severely ill patient is competent enough to genuinely wish for death. It may simply be that they request to die reflects a temporary desire to escape pain. For instance, if a person ingests a substance that will kill him in the next 24 hours because he cannot bear the physical ailment of terminal cancer anymore, it is likely that the medical profession would not allow for the substance to passively kill the patient. In consideration to the entire context of the situation, the doctor has been forced into deciding whether to allow the substance to actively kill the patient or to save him against his wishes. Therefore, if the doctor decides to save the patient, then he is taking part in an active choice-making. However, he should be excused for it considering the fact that he was suddenly forced into a situation that is now possibly that of suicide. Nonetheless, if a person demands for such an option over a long period of time, it should be taken into serious consideration. If the patient is competent and well-

informed of all of the disclosed information, his wishes should be respected accordingly ("Voluntary Euthanasia").

According to utilitarian ethics, actions are justified and morally permissible according to their consequences. As long as they produce the greatest good for the greatest number of people, they are acceptable. Well-known utilitarian Peter Singer believes any action should be taken in order to remove an individual from his/her suffering. Therefore if a person undergoes extreme pain and unhappiness in any case, such as during cancer, that individual has the right to request for euthanasia in order to relieve him/herself of distress. Ultimately, the ends outweigh the means: family members of the patient will no longer have to endure emotional stress, money will no longer have to be care for the patient, and the patient will not suffer anymore. Thus a utilitarian would view euthanasia morally permissible..

Through the lens of a metaphysical determinist, there is no such thing as "free will." This concept holds the belief in which people are not the author of their choices because their choices were already determined by prior experiences. A determinist would consider determinism true because it is based on a factual and scientific premise. Their ideas revolve around scientific discoveries regarding the cause of human behavior, which is related to historical, naturalistic events. Thus if I were a determinist reading this paper, I would believe that whether or not a person chooses euthanasia, is not truly his/her choice —it was already determined. Therefore a person who carries through with euthanasia can never really be held morally responsible for his/her "choice."

Work Cited

"Active and Passive Euthanasia." *BBC News*. BBC, n.d. Web. 11 Dec. 2015.

Young, Robert. "Voluntary Euthanasia." *Stanford University*. Stanford University, 18 Apr. 1996.
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