

Syrena Chowanski

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Prof. Priest

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Intentional Death

Is there a moral difference between letting a patient die and assisting the suicide of a patient? I believe there is a difference in these instances based on situational value. I can give a premise to my conclusion by using several arguments made by philosopher Bonnie Steinbock, in her writing *The Intentional Termination of Life*, and a few contradictories found in James Rachel's *Active and Passive Euthanasia*. Firstly, I do believe that most arguments are based on fallacy. And secondly, there is a moral wrong in prolonging a painful life for a patient in suffering. Therefore, there is a difference between mercy killing and letting a patient die.

As stated earlier, I do believe that countless arguments around euthanasia are based on a fallacy. This is pointed out mainly by James Rachel; however, even his arguments were shown to have holes by Bonnie Steinbock. James Rachel uses the example of parents conceiving a child affected by Down Syndrome and an intestinal tract obstruction. He argues that the surgery to repair the intestinal tract takes little to no resources and would normally be performed; however, since the baby has Down's Syndrome, many parents choose to go without treatment and let the child die. 'Therefore, it is passive Euthanasia' by 'letting the child die'. (247, Cohen) On the other hand, Bonnie Steinbock points out that a baby diagnosed with Down Syndrome will still have a normal childhood (being able to give and receive love, to learn, etc) and the parents will have to give the child the medical care the child requires or else it is considered a

homicide/neglect. Bonnie even states that “physicians who comply with invalid instructions from the parents and permit the infant’s death could be liable for aiding and abetting, failure to report child neglect, or even homicide”. (258, Cohen)

This one example shows several falsehoods on a singular argument: is it morally wrong to intentionally terminate life? Under certain circumstances, I would say yes. In this specific instance, a child is a child and if the burden is too great for the parents then the baby should be put up for adoption and not left to die an undeserving death. This is supported by Bonnie’s argument, cited by Rachel, about extraordinary and ordinary treatment from the House of Delegates of the American Medical Association: “The cessation of the employment of extraordinary means to prolong the life of the body when there is irrefutable evidence that biological death is imminent is the decision of the patient and/or his immediate family.” (246 or 254, Cohen) Withholding extraordinary care meaning ‘ceasing treatment when patients’ experience discomfort’ which is different than withholding ordinary care meaning ‘ceasing treatment when it is neglect of basic human needs’. (257, Cohen)

Another thought is that it is morally wrong to prolong the life of a suffering patient. Both Rachel and Steinbock agree that a quick, painless death is better than one that is a few days longer in extreme discomfort. As Steinbock puts it, “You have the right to decide what happens to your own body...”, (255, Cohen) which is similar to Rachel’s argument (an umbrella argument based on his Down Syndrome baby example) ‘why would anyone ask to prolong a discomforting life over suffering?’ (248, Cohen). James Rachel explains how there is a pair of generalized options for a suffering patient: that there is active euthanasia (a doctor prescribe a patient a lethal dose of medication) or passive euthanasia (a doctor terminates treatment plan to

let a patient die naturally of sickness). I do not agree with him completely, but he does have a point: the cruelty felt by men and women who suffer from cancer or a different incurable disease from doctors withholding treatment due to its ineffective nature. However, Bonnie Steinbock goes into depth of how Rachel has a misconception about passive euthanasia and use the exact same quote: “The cessation of the employment of extraordinary means to prolong the life of the body when there is irrefutable evidence that biological death is imminent is the decision of the patient and/or his immediate family.” (246 or 254, Cohen)

This leads to my last and final point. I must side with Bonnie Steinbock, James Rachel often misunderstands ‘letting the patient die’ and the ceasing a treatment. Rachel explains his side as generally: passive euthanasia is ‘letting the patient die’ and it is the same thing as ‘killing the patient’ both by consent of the patient. Much like his example of the two men, one killing and the other merely watching their 6-year-old cousin die. One man sneaks into the bathroom while the 6-year-old is bathing and purposefully forces the child underwater to drown. The other man sneaks into the bathroom with the same scenario; except he sees how the 6-year-old hits their head on the way in and accidentally drowns themselves. James argues they are both at fault regardless of one really committing the crime and one being witness to a crime and doing nothing to help. (249, Cohen) Steinbock points out the example is incorrect at its source: his belief. She argues that there is a difference because of the patient's intentions: that Rachel fails to take into account that a patient can refuse treatment themselves because of the discomfort it causes. This would cause the doctor to withhold treatment when considering the patient’s success in the treatment. Therefore, it is considered intentionally ‘letting the patient die’ in James’s words.

There is a difference between letting a patient die and killing a patient. They can be intentional in withholding treatment or giving a lethal treatment, but they both change meaning when revolving around the patient. Particularly in Bonnie Steinbock's argument, I agree that there is no moral right to sustain a discomforting life over a short and painless one for a patient (when a patient seeks help for an end). I concur that a larger amount of arguments are based on fallacy and misconceptions of the agreement written by the American Medical Association.

Reference

Cahn, Steven M. *Exploring Ethics: an Introductory Anthology*. 4th ed., Langara College, 2018.