

Euthanasia

The term euthanasia comes via New Latin from the Greek words *Eu* (meaning easy, happy or good) and *Thantos* (meaning death), translated literally as good death. This referred to a person's spiritual state at death, not physical. Today, euthanasia refers to what is called "mercy killing". Depending on personal or professional experience and/or a person's knowledge of the subject, euthanasia can become a complex terminological subject.

The controversial aspects of euthanasia involve the statements "taking away the lives of ourselves or others" and "neglecting or withdrawing the lawful and necessary means of preservation of life", which are found in the Westminster Standards, Larger Catechism 136. This catechism states the sins forbidden in the sixth commandment - "Thou shalt not kill" (Exodus 20:13).

Recently a Doctor related an instance to me regarding the euthanasia laws in Holland. An 82 year-old woman diagnosed with pneumonia refused admittance to hospital wary that because of her age she was a candidate to be euthanised. Her G.P. reassured her that he would take a personal responsibility to ensure the contrary. Upon entering her room after the weekend, the bed was empty. After hurriedly enquiring, the doctor was informed that there had been an unexpected influx of patients over the weekend. More beds were required, therefore, because of her age, the woman had been euthanised, as all she was doing was filling a bed. The eradication of this life had no warrant whatsoever. "Whosoever shall kill shall be in danger of the judgement" (Matt 5:21b).

If only we could say, at least that wouldn't happen in Australia. Unfortunately, legalisation of euthanasia is on our doorstep. Last year, the Northern Territory government legalised euthanasia, and the first and only legal "mercy killing" occurred. "Whoso sheddeth man's blood, by man shall his blood be shed: for in the image of God made he man" (Gen 9:6). Non-Christians may say "But it was their right to die". I say it was an escape for individuals and their families, who were not content with God's will. "For that ye ought to say, If the Lord will, we shall live, and do this, or that" (James 4:15). God in His infinite wisdom caused the Commonwealth government to override the Territory's decision, rendering euthanasia, at this moment, a criminal offence. See II Chronicles 20:6.

Young adults within the Church must work even harder than non-Christians in analysing current ethical issues such as euthanasia. It is our responsibility to remain informed of decisions in parliament at both federal and state levels. It is vital that we become aware of Scripture's stance on euthanasia, as we are not exempt from the ravages of disease and/or dying, and one day may find ourselves having to make a heart-rending medical decision. Eccl 3:1-2.

Often the hardest thing is doing what we believe to be right and in accordance with God's Word, for, apart from God's grace, we do not want to perform God's will. The world of medical technology is complex and, when someone we love becomes ill, it becomes frightening as we have to stand by feeling helpless. Techniques and procedures can be taken up uncritically, especially if they are presented to us as "doing this is in the patient's best interest." Christians must realise that secular, unbelieving principles and influences abound in the medical world.

For your consideration, the following is a situation with which, typically, I am confronted at work :

Rod (not his real name), a 45 year old, had just been diagnosed with the fastest growing and most devastating type of brain tumour. It was inoperable and the prognosis was one month to live, or three months if he had radiation therapy. It was at this stage that I met Rod and his family. The family had refused radiation treatment as there was no chance of a recovery. Rod was not exhibiting many symptoms at this stage, except a slight facial drop. Our aim was to keep him as comfortable and as well-cared for as we could during his last days. One week later Rod could no longer speak, walk or feed himself. A catheter was inserted as he had also become incontinent. Due to cerebral irritation from the tumour Rod's right arm began to jerk violently twenty-four hours a day. At one stage he wore the skin off his leg with the constant pounding of his arm. Rod finally stopped eating, although he was still drinking small amounts. The doctor ordered a drip and a naso-gastric tube to keep his nutrition going. Rod's wife refused the drip and tube, as she felt it was only going to prolong his dying process since the tumour was going to kill him anyway. Not long after this Rod's neck began to arc backwards and remain that way, his eyes would roll back in his head and his face would become distorted, seemingly in pain. Morphine was ordered as a pain relief and was continually given to Rod to alleviate his pain. Rod died one week later - it had been a little under a month.

The radiation treatment would possibly have given Rod an extra 2 months to live. The aim was to shrink the tumour, but because of the type of tumour recovery was not possible. Radiation therapy can cause uncontrollable nausea and vomiting, hair loss, mouth ulcers and other unpleasant and painful side effects. Rejecting radiation would have caused Rod and his family much suffering. There have always been exceptions, and tumours / cancers / diseases have been healed miraculously.

Rod was a fit and healthy young man physically. His heart and lungs were in peak condition. Withholding the drip and tube to supply his body with nutrients did not mean Rod would starve or die from dehydration. The tumour would kill him first. Therefore, these were not necessary means to preserve his life. By artificially sustaining his organs he may still

have been breathing today, without any brainstem activity at all. He would have been a shell.

Rod undoubtedly died from the tumour, not from an overdose of pain relief. Narcotics are respiratory depressors and, when given over long periods of time, accumulate in the body. However, given at pharmaceutically correct doses and intervals, their aim is to alleviate pain, not speed up the dying process. This is palliative care in the case of a person about to die. By contrast, if a lethal dose of narcotic were given at once, this would constitute active euthanasia, i.e. bringing about the death of a person deliberately, before time.

This article's aim is to provoke discussion and exhort a response from people writing to the magazine to give their views. This will help us know how we "ought to answer every man" (Col 4:6). The comforting aspect is that a believer's death is anything but final. "For the wages of sin is death; but the gift of God is eternal life through Jesus Christ our Lord." (Romans 6:23)

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