Chapter VII

LITERATURE REVIEW

The research topic deals with euthanasia. The various researches done by the medical and legal fraternity have resulted in an increasing data available for evaluation. There are number of books journals available on the topic. The study and review of the same shall give us an insight of the topic euthanasia. The researcher has thus reviewed few of the journals as under.

7.1 Literature Review on;
‘A Comparative Study on Euthanasia Altitudes’
This literature a comparative study on Euthanasia altitudes by Ellen Verbaxel,. Eva Jasper has depicted the various facets of euthanasia. Further, based on the arguments used by opponents and proponents it has analyzed the dissimilarities prevalent on the subject in the various states and tried to depict the permissiveness towards euthanasia.

The paper describes 2 cases of euthanasia performed in 2009 and 2008.A Italian woman where passive euthanasia was administered and about a French woman who ended her life by active euthanasia. The article analyzes difference amongst countries, regarding attitudes towards euthanasia. The article emphasis on the observation, that euthanasia is resisted more by spiritual people then the non-religious individuals. Further it has been observed that it is the educated class who are in favor of euthanasia then the uneducated individuals. These deductions have been drawn analyzing 37393 Respondents from 33 countries worldwide. The paper elucidates that all the religions condemn euthanasia but with strict variations.

The educated who value individual autonomy favor euthanasia as right of selfdetermination is the major component of personal autonomy.
The individuals who have personally witnessed sufferings are in favor of euthanasia, similarly countries that have witness high suicide rates approve euthanasia.

The paper also emphasis, that common nationwide rule in the country about euthanasia shall definitely decrease the divergent opinions prevalent between the populace of the state.. The researcher opinions that author Ellen Verbakel, Eva Jasper in comparative study on euthanasia attitudes has neglected the study of comparison worldwide and has drawn his conclusions strongly on the data of the European Countries and thus in true sense could not be a comparative study worldwide.

Further, the researcher observes that when they speak about religious people or religious countries as opponents of euthanasia. The researcher has observed that they have not considered all the religions worldwide but drawn conclusions regarding religious opponent only on the basis of analysis done with two major religions viz. Muslim and Christians.

The authors further inter that unbearable sufferings in their personal or national environment are the reason that support euthanasia but the researcher opines that it can be only the personal environment that can influence at persons decision to propose or oppose euthanasia.

7.2 Literature Review on;
‘Euthanasia: An Islamic perspective’
By Kairash Aramesh & Heydan Shadi
The article summarizes the Islamic perspective on euthanasia based on Islamic primary sources of the Islam religion viz. Karan, Sunnah, ljma and Aghl.

The article by Kairash Aramesh & Heydan Shadi views euthanasia as contrary ethical and religious views.

The religious rulings explained in the form of Karan verses emphasize on the sacredness of life and states that euthanasia is un-Islamic it is against the
“shariat” as man has no authority over death and cannot decide the termination time of termination of a person before he is actually dead and euthanasia equates with murder.

The author explains that the concept individual autonomy does not apply in Islam. As they strongly believe life does not belong to humans.

The author explains how the justifications forwarded toward euthanasia are not plausible because of the crime nature of mercy killing according to Islamic religion. But at the same time the literature also mentions the passive assistance being permissible in Islamic countries.

Kiarash Aramesh and Heydar Shadi conclude that life belongs to Allah. He who gives it takes it. Therefore Muslims are against Euthanasia. They do not recognize the right to die voluntary. Thus the concept of Euthanasia is influenced by the religion practiced by the individual.

The researcher opines that the article has elucidated euthanasia as a crime throughout due to the strong religious belief that as man has no authority over death and cannot decide the termination time of termination of a person before he is actually dead and euthanasia equates with murder “. It has thus emphasized more strongly on the religious views rather than the ethical view. The researcher opines that the article has not depicted euthanasia as a controversial issue and as a conflict of ethical and religious views.

7.3 Literature Review on;

‘Why nurses should not participate in physician-assisted suicide.’

The article expresses that legalizing assisted suicide work would end life of patients without their explicit request. The author has concluded it on the data available from Netherland, Dutch and the British Medical journal of the patients killed without request.

The article also emphasizes that nurses should not be involved in assisted suicide.
The author states that the nurses are a part of the health care team and therefore should not be involved in euthanasia.

Further the author also elucidates that assistance taken of the doctors to terminate life cannot be an autonomous action it requires accurate assessment of the sufferings and a decision of the physicians that it cannot be cured therefore kept away.

The article has emphasized on the fact that where euthanasia is legal the doctor only can administer it, only when the patient is a major and consciously requesting for euthanasia due to the unbearable and consistent suffering. The article also depicts the authority conferred by the, universal declaration of human rights which tells that each individual has a right to live a healthy life which ought to be preserved. The article also illustrates about the external pressure that influence the decision about the physician assisted death. The researcher observes that the author has not clearly depicted the reason of non-involvement of nurses but have explained them indirectly by elucidating the apprehensions behind the request for euthanasia. Further, the author states the literal difficulties of deciding whether it was a free or informed consent for an assisted death.

Further the researcher opines that the author has elucidated accurate assessment of suffering for administering euthanasia and therefore mentions that nurses should not participate but the accurate assessment of sufferings may not always be correct with physicians also.

Further, the author’s conclusion that legalizing assisted suicide will kill those who do not want to die is incorrect as inference drawn is from the limited data collected.

Further, the researcher opines that the author’s observation that assisted suicide changes roles of nurses from care givers and protectors to licensed professional killer is truly in correct. As the object of euthanasia is to relieve the patients from the sufferings and demises the agony of a terminally ill like is the object of care givers to help the patient in a dignified death.
7.4 Literature Review on;
‘Attitudes towards euthanasia among doctors in a tertiary care hospital in South India. A cross sectional study.’

The article summarizes the attitudes of medical practitioners towards euthanasia. Doctor from surgical and medical specialty is more in favor of euthanasia, they are proponents of euthanasia, the literature is an analysis of 213 respondents interviewed. The paper mentions that there is no significant difference in the opinions in favor of euthanasia based on gender and age. But it has been observed that there is a noteworthy connection amidst spiritual attachment of people and unenthusiastic attitudes of the people towards the subject.

The paper also elucidates that, opinion of the treating doctor and family member influences the decision of euthanasia.

The researcher opines that this article is been systematically analyzed. The conclusion inferred there from will definitely help the researchers to further carry forward this study to all parts of the country.

The author himself has mentioned the drawback, limitation of the article which is admirable, praiseworthy and highly appreciable.

The paper has thus set up a benchmark to carry further research all over the world.

7.5 Literature Review on;
‘Euthanasia A dignified end of life’

The literature of Euthanasia- A dignified end of life by Vaibhav Goel emphasizes the need for legislation on Euthanasia in our country. He believes that each individual should have a right to end his life in a dignified way. He further expresses that the end of life should be with the necessary dogmatic mechanism only. His Conclusion of right to die has been inferred from the traditional and legal perspective.
The paper explains the connotation euthanasia with relation to suicide. He elucidates that terminating life on own responsibility is a murder done by the author himself. Similarly, assisted suicide is when an individual is given information, guidance and means to end life. These assisted suicides are done by physicians and therefore called physician assisted suicide.

Further, he has discussed the different types and ways of administering euthanasia. He also has emphasized on the changing concept about defining natural death.

The author has described significance of euthanasia in European countries, Canada, Netherlands, U.S.A. and UK. where many are assisted to die. The “right of life guaranteed by the Indian Constitution on Article 21 is explained by the author and states that it includes authority to lead a dignified life up to the end of one’s life journey which means right to end life when life is ebbing out. The author has illustrated cases which lay emphasis on euthanasia worldwide. To supplement the concept the author has depicted the Indian philosophical tradition of “Ichacha Maran” Elucidating mythological beliefs prevalent in various Indian religions he has depicted the sketch of how all the different religions prevalent incorporate the power of extinction in silence. The author concludes that each one has the power of terminating its existence if they desire so. However he states that one should take precautions that while doing so he / she is not harming anyone else nor causing them any inconvenience.

The author in his articles has also elucidated the negative features of euthanasia.

The author also draws attention towards abortion under the Medical Termination of Pregnancy Act. He states that, it is not an offence if terminated in accordance of the provisions of the Act. He emphasis that the legalization of termination is being permitted with a view to provide dignified life to mother which is similar to the object of euthanasia.

Vaißhav Goel, mentions the importance of a dignified life. This stately, noble life is a right of all. It is the statute that confers right on people similarly right to
live a Honorius life also has to be conferred on us with its necessary precautions. He mentions that the individual, physician and the general public should be conferred with the power to end their intolerable sufferings with assertive methods to avoid any kind of abuse. Further a choice that is taken on time can relieve an individual from torments of dying. Not only so but it will release resources to save other retrievable lives.

The researcher opines that the literature is balanced and has depicted both the traditional and legal views convincingly in favor of legislation for euthanasia in India. The researcher observes that though the author emphasis is on mythology in favor of euthanasia. He has neglected the fact that the religious societies are the major opponents of euthanasia worldwide. It is they who condemn it strongly as they believe that if you cannot create a life you do not have a right to destroy if you take it other than in course of justice.

Further the researcher opines that when the author accepts that proper care is an alternative to reduce the cry of euthanasia then it should not stress emphasize on the assisted death or euthanasia.

7.6 Literature review on;
‘Facing request for euthanasia a clinical practice guideline’
The Article lays emphasis on quality care for the in firms, distressed and terminally ill persons who are desirous of extinguishing their lives prior to the destined death.. For this the medical practice guiding principle were developed systematically by the ethics committee. They were approved in Belgium Senate and effectively employed in the inter disciplinary care context. The author states that an individual with clinical competence, ethical awareness and legal regulation can only assist the patient to seek a dignified answer for those who request euthanasia. The literature also explains that a good, specialized palliative care team is essential before administering euthanasia. . The author strongly believes that it is just not an active integral palliative care team that shall suffice the need, but a prior consultation of medical practitioners is necessary before administering euthanasia. The author also strongly supports the contention of health care in case of a
terminally ill person. This can definitely displace his request for euthanasia and allow him to live with dignity till his last breath. Thus according to the author, the palliative care course of action occupies a central place in facing request for euthanasia. The article also explains the need for written practice guidelines, for implementing euthanasia which will enable to carve the duties of nurses and ensure excellence in administration.

The author also highlights that for palliative filter procedure to be successful it is very much essential there has to be a joint effort from the physician's nurses, the patient and his relatives. He further states that this will also enable the physician to explore the precise wish of the patient and also help in arriving at a firm decision, that there is no other reasonable solution.

Thus the author strongly supports and believes that clinical practice guidelines for good palliative care will defiantly desist him from his request for euthanasia and the best human care could be made available to the terminally ill.

The author opines that these clinical practice guidelines of palliative care in Belgium should be observed by the physicians, nurses worldwide so that, individuals who request euthanasia receive best human care available and have a dignified life.

7.7 Literature Review on;
‘What is the great benefit of legalizing euthanasia of physician assisted suicide?’

The paper has tried to analyze the ethical question whether consenting to PAS or euthanasia legally would endorse high-quality demise. The Respondent in America and Netherlands that die with the social interventions is considered.

The article explains the benefit of legalizing euthanasia. They are self – sufficiency, independency of the individual, and the relief it provides to the patient from the miseries and agony that he goes through due to the terminal illness. This shall also extend protection to the physicians performing it. The paper also has emphasized the importance of psychological assistance to the
ailing. As it helps in reducing the nervousness, misery and agony of the patient and his relatives. The author has also pointed the danger of the slippery slope prevalent. Legalization may also lead to deflation of the physicians from their Hippocratic oath and the uprightness of the doctors can be a question. Further there is also a possibility of its utilization prior to the palliative remedies being implemented. The paper also depicts the possibility of its implementation on patients under force and intimidation without their valid consensus.

The author feels the risk of harms and therefore hesitates towards the rush for legalizing euthanasia. The author emphasizes that it is the educated, well-off political vocal people and non-religious individual who support legalization. He further lays emphasis on its misuse largely by the powerless patients who cannot afford the medical services required.

He also suggests that it would bring about unfairness, misappropriation in the release of palliative care discharges.

The author highlights that the debate on campaigning, litigating, complaining, studying Euthanasia and PAD complaining will detract physician, nurses from improving end of life care.

The author’s attitude is thus negative towards the legalizing of euthanasia. The researcher opines that the opinion concluded by the author may not be considered decisive. As the author has not gathered direct data by interviewing respondents but has formulated his opinion on the various journal data available. The data so available on which he relies may not be the exact analysis of the author’s hypothesis, he would have framed. Further for his conclusion he has considered data only from America and Netherland which cannot be considered sufficient to formulate a negative opinion.

7.8 Literature review on;

‘A disabled person’s perspective on euthanasia.’

The author summarized his own experience and his change in perspective towards euthanasia.
The author explains that when a person is in mental pain compounded with physical pain they do not want to live, it is moreover thereof the depression that a patient undergoes.

The author expresses that binding directive i.e. legalizing euthanasia would be extremely dangerous in such cases as it would be impossible to change one’s mind.

Further the author states that the legalization would also lead to nontreatment of a curable illness.

She also draws attention to the European Convention of Human Right which guarantees the authority to live a quality life. For her each one has a right of living. However, just because a dignified living is not possible it does not ensure one, a right to terminate ones living. The author therefore confirms that deliberately one should not be dispossessed of his/her existence.

She strongly believes that if euthanasia had been legal then, the author would have denied the chance of human value.

The author strongly recommends through her personal experience that individual who favor euthanasia are mined with emotions, negative view towards the value of vulnerable people and economics.

The author lays emphasis on helping the suffering people to realize their true inherent dignity and value which would definitely desist their reluctance towards life.

The researcher opines that this article would really make all the proponents of euthanasia to think whether legalization is really essential or is it so that there is life till death which is valuable and not vulnerable.

7.9 Literature Review on;
‘Euthanasia the legal issues.’
The literature examines the legal issue concerning euthanasia and the arguments rose due to the proposed changes in law.
The article cites “Mrs. Pretty V. United Kingdom C.” case heard by the “European Court of Human Rights”, in 2002 and the call for law to be reviewed.

The author mentions the evident sympathy that individuals have for those who are desirous of ending life to relieve themselves from the misery and agony they go through. He further examines the possibility of legal complications arriving to such people and shows intentions of assisting these people from the menace if any.

He also lays emphasis on the need for an empirical study based on personal, cultural and religious values to expose the range of death of opinions.

The author also focuses our attention to the concept of ‘Death Tourism” where individuals make trips to Switzerland for this purpose.

He also explains about the slippery slope if, chosen euthanasia is given legal recognition. He apprehends that legislation for it would subsequently lead to legalization for involuntary and non-voluntary euthanasia. The author elucidates that it is the health professions that oppose change in law. But at same time he also mentions about the nursing time poll which depicts, that bulk of the health care taker population is in support of transformation for law.

The author himself has questioned the validity of the nursing time survey which is based on readership sample. At the same time survey conducted, with the “Roy College of Nursing” depicts constant opposition for any modification or alteration in law.

The researcher opines that the article is a general view about legalizing or not legalizing euthanasia.

The article is not based on any specific data and the views opined by the author thus have a marginal weight age.
7.10 Literature Review on;
‘Euthanasia  No dignity in death in the absence of an ethos of respect for human life.’

The article reviews the South Africans law Commission state of law in respect of euthanasia.

The author elucidates the debate between the constitutional right to life, right to dignity and to autonomy. He lays emphasis that legislation would lead to erosion rights.

At the same time he also states that allowing some to die slowly with an ugly death is still further dehumanizing.

The author expresses that liberalized voluntary legislation is not suitable for South Africa. There are severe constraints in health care facilities. They suffer from inadequate resources to take their care. Further the lack of admiration towards a dignified living, and the aggressive environment prevalent amongst the civilization shall be a real risk for the terminally ill.

The researcher opines that though it would be inappropriate to have legislation we cannot ignore the fact of the mercy plea that has been to the Court. Thus in spite of the adverse situations prevalent, they can consider about voluntary euthanasia to administered in the rarest or rare case with strict guidelines for its implementation.

7.11 Review on;
‘Euthanasia, choice and death’
By Gail Tulloch

The chapter choice and Death elucidates about the life span of a person and how it has been extended by the scientific research in medicine. Though this is true that every one wishes a long span of life death is certain. And one always expects a good death.

Death has also been always respected and the dead is honoured it is believed in that there is an afterlife. And this subsequent late of soul is decided by the
manner in which are lives are moulded. The religious, cultural, social which
and environmental impact which influences the individuals perception towards
euthanasia has been discussed.

7.12 Literature Review on;
‘The British Journal of General practice’
By Rhona Knight
In this article he focuses on the changing law on physician assisted suicide
and ethics. He mentions that the larger % of people who believe in palliative
care and doctors who are associated with the belief, oppose to euthanasia.
They believe that legally allowing Euthanasia is unnecessary and at the
same time potentially dangerous. It emphasizes on the possible dangers and
the slippery slope.

7.13 Literature Review on;
‘A Comparative study on permissiveness towards Euthanasia.’
By Ellen Verbakel and Eva Jasper (2010)
They explain the support and sanction for the subject euthanasia by different
individuals of different countries. The data gathered by them on the religious
issues, on sovereignty of the individual, about the concept of dignified death
and the possible abuses of euthanasia; has enabled them to analyze their
hypothesis.

They observed that religious people that is those who strongly believe in the
god tenements and nothing is higher than god to them are strong opponents
of euthanasia. They also explain in the article that those countries with poor
health care provisions will slip on the slippery slope; similarly those belonging
to the vulnerable group may also misuse it. Further it has been examined by
them that patients and the close ones to the terminally ill are more in favour of
euthanasia, it is these who support personal autonomy of a person. They
conclude that highly educated people and people those who believe in self
independency are more likely to support euthanasia and shall have positive,
constructive approach towards the issue.
7.14 Literature Review on;
‘Involvement of issues in Euthanasia:’

T. De. Beer, C. Gastmans, B. Dierck de Casterle (2004) state that the ethical debate on euthanasia; focuses on participation of doctors and caretakers of the patient which is hardly ever noticed by the public in exerting their views on euthanasia. They therefore have assessed the nurse’s involvement in Euthanasia. From the germane rulings acquired from scientific, technical text they conclude that people who foster, nurture the patient and take their care are occupied throughout when the euthanasia act is in progression. Nurses extend their support to the probable life finishing action, right from assisting the physician, giving confidence to the enduring infirm, his relations, his contemporaries or may be his well wisher. The authors emphasized on the open mindedness of nurses using palliative techniques. At the same time depicted the contribution and the appropriate sympathetic consideration they have for the sick who demand euthanasia. They play a vital role of being considerate compassionate and thoughtful for the terminally sick who are desirous of ending life. The authors conclude that, because of their professional nursing proficiency and exceptional relationship that they share with the patient. They are able to furnish individuals who are desirous of terminating life and made an appeal, with precious care, concern and the best palliative techniques.

7.15 Literature Review on;
‘Regarding Euthanasia’

David J. Roy, Charles Henri Rapin and the “Board of Directors of the European Association for palliative care” speak about legalization of euthanasia in their article. They state that the legislation of euthanasia shall provoke intolerable abuse. They believe that though it is uncertain that it may occur. They suggest that knowing about its possible abuses one should not risk with this social experiment in the present century.
7.16 Literature Review on

“Psychological perspective on euthanasia and the terminally ill.”
Prof. Ann. Sanson, Ms. Elizabeth. Dickens, Ms. Beatrice. Melita, Dr. Mary. Ninon, Mr.Justin. Rowe, Ms. Anne. Tuder and Ms. Michael. Tyrrell observe the importance that psychologist with other professionals play in euthanasia. They emphasize that psychologist should decide whether the demand of death with assistance is independent and lucid. It is only after their opinion that euthanasia should be administered to the terminally ill person. They conclude that the decision should be unaffected by psychological disturbances. They believe that such treatable psychological disturbances and depression should be treated to know the correct will of the individual.

7.17 Literature Review on;

‘Paternalism and Euthanasia’
Warburton Nigel- Jon Pike-Derek Matavers, young Robert states about voluntary euthanasia and its possible implementation. According to the authors view that voluntary Euthanasia can be administered, if it is implemented with sufficient guarantee and it is not violating personal autonomy nor leading to undesirable consequences. It depicts care for those in a state of irretrievable condition due to their advanced sickness and whose pain could not be reduced by any other means and would otherwise be subjected to long and inhuman suffering if not administered. Thus they believe it to be administered with great caution and to be implemented in cases where no other possible alternate remedy is available to the patient.

7.18 Literature Review on;

‘Euthanasia and Eudaimonia’
DM Shaw (2009) speaks in favor of euthanasia. He argues that it cannot said that one has a truly happy life, if one’s death is preceded by unbearable pain or suffering. He emphasizes importance on the person’s autonomy. He states that if a terminal ill whose death is certain is going through tremendous suffering and pain which cannot be avoided without assistance in ending
one’s life then euthanasia should be administered. He believes that death is also a part of life and therefore should not be left to nature to decide the path of dying. Therefore it would be fundamentally unjust to be liberal in the way an individual lives and control over the conclusion of lives.

7.19 Literature Review on;
‘Nursing and Ethics: A Review of argument based ethics literature Nursing Ethics’
Toon Auaghebeur, Bernadettw Dierckx de Casterle Chris Gastman observe the nursing ethics on Euthanasia and their involvement in euthanasia. The arguments described in the article states how good nursing care would affect pro and contra euthanasia arguments. The point of view expressed in this article is primarily rested on pedestal ideas of philosophy of reverence for independence, self sufficiency non malfeasance, beneficence and justice.

7.20 Literature Review on;
‘Ethics and the law’
Margaret Brazier (1996) observes how law relates with Ethics. Since the constitution of the states guarantee the right to be in this world and its fortification is provided in rule of law. She explains whether, right to die is incorporated in it. She examines whether these rights, demand, officially permission to mediate the act shall really be able to organize ethics. It studies whether reorganization or restructuring of rules are really striking option as portrayed.

7.21 Literature Review on;
‘Ethics legislation in the European Union is a universal law possible?’
J Lucy Pridgeon (2006) concludes that forcing legalization of Ethics in state of Europe would be difficult, because of the different views, rights and religion. The division in support for Ethics amongst member states is also a reason of
disparity. The author has compared the history, views, economic policy and health policy in Greece, the United Kingdom and the Netherlands in his article. He has focused on matters relating to human rights and discussed euthanasia with respect to “European Convention on Human Rights”.

The author opines that it is unlikely that the issue can be legalized within the European Union structure as many states have differing views on rights and religion.

7.22 Literature Review on
Human Rights and Ethics
George Zdankowski (1996) states in his article that right to life is an inalienable right and therefore it is for the legislature to assess and guarantee it via safeguards that statutory scheme authorizing voluntary Ethics will not be abused.

7.23 Literature Review on;
‘Euthanasia Policy and practice in Belgium, Issues in law and medicine” Raphael Cohen- Al magor (2009) studies the Belgium law on Ethics. In his article he narrates the developments and controversies on Belgium law, since implementation. He also mentions suggestion for improvement of the Belgium law on ethics and lays clear guidelines as to when it would be appropriate to resort to the practice.

7.24 Literature Review on;
‘Ethics: An India perspective’
Vinod K Sinha, S. Basu, S Sarkhel have reviewed the role of doctor assisting his patients for ending life. They have also examined the role of physician assisted suicide from the supporters and adversaries point of view. They conclude that strict guidelines for PAS have to be put into practice. Evaluation
of a person’s of the state of mind is essential, if the patient agrees for euthanasia or assisted suicide. They therefore emphasize that psychiatrist play a important role in implementation of euthanasia. The authors stress on studying the psychology of the patient is apt considering the prevalent Indian conditions where; the chances of slippery slope are high.

7.25 Literature Review on;
‘Euthanasia: Medical and legal issues in mercy killing’
By Chandruk K Jath Vijay Kumar B. Kumar Rajendra (2010)
They observe that Euthanasia has been an interesting topic for both medical and legal professionals. They discuss the difference in law pertaining to Euthanasia in other countries. They have also described the problem faced, by the relatives of the terminally ill and doctors who would be administering euthanasia. They have recommend suggestion that can be incorporated in legalizing Euthanasia.

7.26 Literature Review on;
‘Euthanasia: Indian Scenerio’
By Dr Mrinal Kanti Jha, Dr. Ranabir Pal, Dr. Promukh Bhattacharya, Dr. SS Oberoi, Dr. Anil Garg
They conclude that Euthanasia is based on philosophy of humanism and compassion. It is perplexing issue over the world where in few developed countries have given a nod to Euthanasia. It discuses about the Indian SC Judgment that has given an approval to passive Euthanasia and conclude that Euthanasia can ,put an end to long term suffering.

7.27 Literature Review on;
‘Journal of Palliative Medicine.’
They explain the importance of quality dying. They have spoken in favour of euthanasia and explained that there lies a marginal difference between assisted suicide and passive suicide. They have explained this by narrating the experience between those who received legal prescriptions, and who did not receive legal prescriptions. In the conclusion drawn they state that the experience of those receiving lethal was the same as those not pursing PAD.

7.28 Literature Review on;
‘Characteristic of patients requesting and receiving physician-assisted death.’
Diane E. Neier, Carol Ann Emmons, Ann Likke, Sylvan Wallenstein, R. Sean Morrison (2003) conclude that those who request for Euthanasia are those who are seriously ill and have a high burden of physical suffering. They compared individuals making specific request and those making non-specific request for PAS. Individuals with specific request were more distressed. They suffered from severe pain discomfort and the life expectancy of such persons was usually less than 1 month. At the point in time of appeal it was supposed that they were not dejected and were requesting with full consciousness.

7.29 Literature Review on;
Jablonski Anita, Clymin Janine, Jacobson Dana, Feldt Karen (2012) have observed that the nurses had little information about the law or the Washington State Death Act. It was observed that nurses had no knowledge about the law who play an important role in its implementation. They being the administrators along with physicians it is therefore necessary for all nurses to be aware about the legal mandates. This would evade them from the slippery slope and also perform the act without fear.
7.30 Literature Review on;
‘Assisted dying, British Medical Journal.’
By Fiona Godlee (2012)
She supports euthanasia and is in favour of legislation on euthanasia. She concludes that legislation on euthanasia is for the beneficence of the society and not just doctors. She has championed the importance of patient's voice in health care. She believes in helping someone to die is not to be considered a crime.

7.31 Literature Review on;
‘Depression, competence and the right to refuse life-saving treatment.’
Mark D Sullivan and Stuart J. Younger (1994) reviewed the impact of depression on the competence to refuse life saving treatment, generally patients desire to die is considered a evidence of depression. But after administering psychiatric and medical treatment he observes that it would be appropriate to honour the patients desire to die. Psychiatric treatment along with medical plays an important role according to him in administration of euthanasia.

7.32 Literature Review on;
‘Ethics: Mercy killing.’
P N Murkey and Konsam Suken Singh (2008) describe the moral implications of Euthanasia in different countries. For some it is merciful dying while opponents believe that it is a method of murder. This view varies from country to country and individual to individual. They observed that in India Euthanasia must never be practiced by law.

7.33 Literature Review on;
‘Effects of physician-assisted suicide and ethics on participating physicians issues in law and medicine’
Kenneth R Stevens (2006) review the evaluation of medical and public literature on physician involved in Euthanasia. It discusses the effects and the shift from fundamental values of healing patients and care of their wholesomeness. He observes that it creates a sense of powerlessness. He concludes that any doctor participating in PAS are psychologically and emotionally affected.

7.34 Literature Review on;
‘Physician Assisted Suicide’
Emanuel LL, Vol Gunten CF, Ferries FD (1999) Conclude that physicians should responding effectively and compassionately must be aware of the reasons why the parties ask for assistance for PAS. They need to look for root causes and work to relieve those who are terminally ill, palliative care has to be developed.

7.35 Literature Review on;
‘Ethics TMS’
Keith H Essex (2000) finds a growing demand for Euthanasia. He finds that advocates of Euthanasia assert that they are showing mercy to those in pain. But he concludes this expression of mercy defies the instruction of the god. Euthanasia is not a good death. He states that you need to have compassion to the dying and a strong faith in lord.

7.36 Literature Review on;
‘Voluntary Active Euthanasia’
Dan W Brock 1992 observes that the physician's involvement in Euthanasia is a kind of social approval. It is they who keep the patient informed about their condition, prognosis and possible treatment and ensure that all the possible reasonable means to improve the quality of patients life is been taken and
secondly to restrict the abuse of practice, it is essential that it has to be given to an authority to perform it. And it is the physicians who can assure us that it would be performed responsibly. 7.37 Literature Review on;

‘Euthanasia: Another face of murder’

Oluyemisi Bamgboso (2004) observes Euthanasia from medical, legal and global perspective. The concept of Euthanasia in relation to crime is considered. It is similar to murder and considered a crime in many states. The concept is also not conventional, because life of each human being is protected by law and cannot be taken away by means coercion or his permission. This also can be exercised by authority constituted by legislature. He observes that it is a issue of public interest and therefore each state has to have their individual explanation and ascertain a resolution for euthanasia.

7.38 Literature Review on;

“A Social Justice Value Approach Regarding Physician Assisted Suicide and Euthanasia Among the Elderly.”

The writer “Maureen V. Himchak”(2011) emphasizes on involvement of social workers in euthanasia or PAS. He concludes that these people assistance should be taken. As they would definitely enhance, improve the excellence of living. They would also give confidence and promote the belief that the termination of existence by choice is surrounded by edifying, religious holy context. The approach of righteousness, impartiality and individual civil rights for society, authorize them to guard the human rights at risk and also provide services without judging their worthiness.

7.39 Literature Review on;

‘This literature position of euthanasia in India- An Analytical Study

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An Analytical study by Caesa Roy features distinction amidst euthanasia and self-killing and euthanasia. The paper states, when same act of ending life is done on request the term changes from suicide to euthanasia. The paper also discusses the different types of euthanasia and therein meanings. The paper emphasizes the perspective of different religion towards self-destruction. It has been observed by the author of the paper- “at Muslim, Christian and Sikh reject suicide as it is interferes in God’s plan. The author has emphasized that euthanasia is not defined in the religious books and therefore incorrect to state that it is prohibited by all religions.

The author has also narrated the trends of euthanasia in different countries and India. The paper speaks about Aruna Shanbag’s case and the recommendations suggested in the judgment. He has also emphasizes on observing anonymity of the patient, doctor and hospital where euthanasia may be addressed. The author also explains about the principle of self-determination. The author has written this paper considering all the matter related to euthanasia. The researcher therefore observes that it is a balanced paper. The author has very efficiently depicted all the factor related to the subject in brief. The paper is refined and nuanced. The researcher observes that the author has emphasized on few major religions but not all the in India. India being a secular country it is essential to discuss all the religions practiced in India.

7.40 Literature review on

“Physician Assisted Suicide and Euthanasia: Can You Even Imagine Teaching Medical Students How to End Their Patients' Lives?”

J Donald Boudreau (2011) in his article has emphasized on the traditional introductory values of the medical profession. The treatments of the sick till the last breath of life naturally. The fight to save the life and heal their sufferings is the customary mandate of the medical fraternity. The author believes in the values of the medical fraternity and appeals to uphold them. The author has depicted the approach towards euthanasia from humanitarian view at the same time also elaborated on the slippery slope of euthanasia. In
his article he also points out that independence self sufficiency of the individual hardly matters when it comes to a patient when he is terminally ill and on death bed. The authors object in this article is not to highlight the controversy but to view it from the educational perspective and the effect it has on the medical students. He observes that medical mentors play an important role in shaping their professional identities. The seminal process and socialization create conflicts in the individuals mind. Moreover the author also observes the controversies existing in the profession such as reproduction techniques and in contrast to them the abortions. He points out that to add to the list right to live with dignity is also the feature for the medical students to think about. To avoid these conflicts the author proposes to have education on euthanasia in the curriculum as it has been incorporated in the veterinary science curriculum. This shall enable them in having the correct medication for terminating life and also shall be prepared in case they need to discharge services for physician assisted suicide. He emphasizes that the knowledge imparted should be in consonance with the word euthanasia. He states that euthanasia essentially means being sympathetic towards the patient who is capable of understanding the situation and consequences of his desire in order to furnish complete care to the aspirant of death.

7.41 Literature review on

“Euthanasia: above ground, below ground”

R S Magnusson (2003) the author has discussed about the hidden practice of euthanasia that is prevalent worldwide which he refers to as below ground. The author in his article calls for the opponents to protest against it thought the ratio of such practice is marginal over the globe. He suggests that if euthanasia is legalized the concerns of the opponents shall increase as this practice is already practiced in states where there is no legalization of euthanasia. The author has also suggested remedies for the menace. He suggests that if euthanasia is legalized we shall be able to eliminate secret killing. Further he states that implementation of the law has to be scrutinized meticulously to avoid breaches. He also believes in imparting knowledge to bring about a change in those who indulge in illegal practices. If done so the
apprehension of the abuse that all fear from can definitely be undermined. The author thus has emphasized on prosecuting and punishing the offenders in order to curb this practice of underground crimes. It is observed that though he himself has suggested this remedy depicts its plausibility of failure. It has been observed that though he speaks on regulation, is skeptical about a safe legislation on euthanasia. It has been thus observed that the author has tried to highlight the underground practice of euthanasia which is usually overlooked by most of the opponents. He states that whenever there is a debate on legalization of euthanasia this grey area also needs to be considered.

7.42 Literature review on

“Euthanasia revisited”

D V K Chao, N Y Chan and W Y Chan reaffirms that euthanasia is a debatable issue all over the Globe. They have viewed euthanasia from various facets such as medical, legal, spiritual, political and from the idealistic approach. They suggest in the article that these factors are mainly responsible for the dispute on this subject. The mystification of the definition is also another factor that adds to the confusion In the article they have
explained the various forms of euthanasia that have been derived from the basic definition of euthanasia as a prevention from sufferings. They have also acknowledged Exit for leading the crusade for recognizing euthanasia publicly and initiate the movement for euthanasia in the year 1935. The authors have examined the state of Netherland, Australia UK and USA. They have discussed the history of euthanasia and its journey towards its legalization in brief for the above states. They have also depicted the disadvantages of euthanasia legislation. They have emphasized on what the doctors should observe if a request for euthanasia comes from their patients. They believe that Doctors play a major role in the whole process and therefore requested them to have cordial relation with their patient which shall enable the patient to express his true feelings. They say that this shall assist in understanding the real cause behind the decision. They emphasize on including the close ones of the patient in his care as they believe it to be therapy in his cure. The author’s emphasize on taking the assistance of psychologist and social workers in the nursing of the terminally ill patient. They emphasize and believe in hospice care and suggest the physicians treating the patients to refuse or indulge in any forms of euthanasia.

The researcher observes that this article has not really brought out the facets of the concept which the author feels is responsible for a debate. The article has definitely made an attempt to persuade people to think about the available hospice care to relieve them from sufferings

7.43 Literature review on

“The ethics of euthanasia”

Nargus Ebrahim’s article defines euthanasia and states that euthanasia is a topic cloaked with indistinctness. It is therefore debated all over the world. In his article he describes and defines the various forms of euthanasia. The author has also explained the doctrine of double effect. When anything is
done to lessen or ease the pain of the patient and the consequent result of the same is death it is termed by the author as double effect.

The author depicts the legal situation of euthanasia in Australia. It has been stated by him that in Australia euthanasia is illegal and the act of euthanasia is a crime according to the legislation prevalent in all the states Australia. The article also discusses about the euthanasia legislation in the Northern territory. Its approval and the existence of the Rights of Terminally Ill Act (1995) which came in force in 1996 being the first state to permit voluntary active and assisted euthanasia. The act was in force for a short period and survived for only a year as it was overthrown by the new federal government that came into power in 1997. Then after attempts have been made by the proponents to reprimand it but have not received fruitful results.

The author has also explained the beneficence and drawbacks of euthanasia in brief. The article emphasizes the importance of palliative care, the fear of weakening and damaging the trust and confidence that prevails in the physician patient relationship and also the fear of doctors detracting from their aim of preserving life.

The author moreover has just given a brief idea about what euthanasia is and its various types. An effort is made to touch various topics that is palliative care, doctors oath or the situation of the vulnerable patients but has not discussed it in length thus leaving the readers to further investigate about the issue if they desire so. However it definitely has given a direction for further research on these issues. The author has very well emphasized on the situation of euthanasia in Australia, its legalization and then its disapproval subsequently.

**7.44 Literature review on**

“Physician Assisted Suicide — Polling Results”

James A. Colbert, M.D., Joann Schulte, D.O., M.P.H, and Jonathan N. Adler, the authors of the article are discussing about the opinions of the
experts which were called by them after discussing with them a case of metastatic pancreatic cancer patient of Oregon. It has been observed that there have been few experts which have given view that physician assisted suicide should not be permitted as it is contrary to their professional ethics that they need to follow. Their basic duty is to cure a patient and not terminate his life and therefore should not be allowed in any circumstances. However there are some who have opined contrary and submitted that cure includes easing death of the patient. This article reflects the data of 74 states out of which 11 had casted their votes in favor of the concept of death by assistance of the physician. The author states from the data analyzed it showed that the arguments were based on the Hippocratic Oath of saving lives, the human right and the civil rights. Along with it the article also has highlighted that though a division in opinion both the groups have depicted consensus on the palliative care treatment and also taking care of the psychological needs of the patients.

This article thus again emphasized that how a patient ends its life is a debatable issue. Though a short article on the polling analysis it has been able to share opinion of many countries. But since the reviews of the public were taken online there is always apprehension of its authenticity. The surveys conducted in such a manner are mostly influential and cannot be considered scientifically valid.

7.45 Literature review on

“When is physician assisted suicide or euthanasia acceptable?”

S. Frileux, C. Lelièvre, M. T. Muñoz Sastre, E. Mullet, P. C. Sorum, the authors have tried to understand analyze the common mans opinion about euthanasia and assisted suicide. They suggest that this issue has been often discussed as death is considered a problem by many. They observe that the main reason is the advancement in medical science and technology which has brought down the death rate considerably. It has rather prolonged the death with many life support techniques. This has led to participation of
people in ending life. However it has been observed that ending life without doctor’s intervention is not possible. They play a vital role in the whole process. Therefore the authors have taken wide-ranging opinions from the medical fraternity and the general public. The article depicts that doctors are more reluctant to support end of life decisions as compared to the general populace. It has been observed that these issues are particularly more
important to the sick and older members of the society. It has been observed that it is this set of populace that is for legalization of euthanasia. The study states that physician assisted suicide or euthanasia has to be performed only on repeated request of the patients and his willingness to terminate life.

The findings of this research are balanced as the authors have examined respondents from various age groups from young to old. Further the participants who assisted in the study were trained students of the psychology department. The research in this article was based on a small sample and covered the views of the populace in France only.

7.46 Literature review on

“Ethics, Law and Policy, Physician Assisted Suicide: Compassionate Liberation or Murder?”

Vicki Lachman’s article focuses on the nurse’s role in aiding assisted suicide. The article has discussed the issue with respect to states where assisted suicide is permissible by legislation. It has analyzed the nurses situation when they are respecting the patients desire to good death do they really believe in individual autonomy. It has been observed that they are tattered between honoring patients request or to adhere to their ethics of preservation and sacredness of existence. The author emphasizes that the decisions of the nurses is not based on any rules but most of the time depends on person’s state who has requested for it. The author has also referred to the guidelines which the nurses ought to observe when dealing with terminally ill patients. They ought to observe that in any case they would not be opening any kind of conversation pursuant to assisted suicide due to which the patient may be inclined to select the option. Further it is for them to observe that they would be giving a patient hearing to the sick analyze the situation and then express the opinion individually. Further the author analyzed a number of nurses to draw a conclusion about the nurse’s behavior pattern. But no uniformity was observed, those who were more caring did not support euthanasia. However
those who supported the individuals do not necessarily hold up euthanasia as terminals can end life by giving up food and water which is regular in most of the states. However with the increasing trend towards legalization of euthanasia nurse shall definitely have to train themselves and see their comfort while dealing with such patients who wish to accelerate death.

The article has thus beautifully dealt with the nurses aspect and the dilemma they go through in end of life situations. The article has more specifically spoken about the issue with respect to countries where legalization of euthanasia is already been done. However it can be observed that such situations may arise in all states irrespective of legalization and therefore the discussion should not have been restricted to Oregon, Washington and Montana where PAS is permitted by legislation.

7.47 Literature review on

“Is the Legalization of physician assisted suicide compatible with good end- of-life care?”

MICHAEL B. GILL, in his article emphasizes on compatibility, harmony that exist between P A S and Good End -of- Life Care. It has been observed by him that many of them always opine that they both are incompatible. He highlights that good palliative care cannot be a ground for rejection of P A S. He has depicted through the data analyzed by him that in spite of the best hospice care around 12- 20% of the people have requested for PAS. He therefore opines that good palliative care may abstain a few from PAS but hospice care cannot be an alternate to PAS.

He further depicts that depression is really not the cause to request PAS as it is usually held by all.. He states that there have been a number of cases where PAS is demanded by the patients who are psychologically stable. Further he emphasizes that a person who is not mentally competent cannot ask for PAS. He should be denied this right if PAS is legalized as it would be used as a tool to commit suicide.
He further opines that discouraging unpromising attitude and pain that a patient may suffer is one of the reasons for a patient to administer PAS. No doubt the hospice care offered to a patient definitely reduces pain but still that cannot be a cause to refuse PAS. He further states that good end of life care includes respecting the patients autonomy and respecting his wishes and hence PAS can be a part of the hospice care and not necessarily be divergence of it.

Michael. B. Gill has thus very well explained his point of view of how PAS is being compatible with palliative care. His view shall definitely aid the opponents of PAS and palliative care to change their stringent approach to their respective views. His views shall give them direction to think that both are well suited to each other and should not be implemented in isolation but in harmony to bring solace to the patient in real sense.

7.48 Literature review on

“Physician-Assisted Suicide: State Legislation Teetering at the Pinnacle of a Slippery Slope”

Eunice Park, in this article the author has discussed the fervent topic of PAS. This is basically pursuant to the legislation that came in after the Supreme Court judgment of the United States that permitted PAS. Pursuant to the judgment came the statutes on PAS in Oregon and Virginia. Eunice Park has highlighted the political side of the controversy that hooted after the legislation. He has highlighted that right to die is not a rightful subject from the legal perspective as no law permits a right to die as it is unconstitutional. He has analyzed the political pros and cons of the issue, the impact it has on the medical profession and the possibility of the unauthorized terminations that are prevalent in the state. It states that it is the nation only who have to decide whether to ban PAS or not, considering the perils attached to it, like crumbling of the medical vocation and its application to the patients who do not wish it.
7.49 Literature review on

“Live and let die? Physician-assisted suicide and the right to die” Christopher Manning, in this article Christopher has like most of them have dealt with the right to end life and the medical advancement. He says that the medicines and the advanced technology has enabled the human to identify the period of life that is to say that it tells when death shall take place. It has also extended the life span of the patient thus leaving him to further excruciating pain. He states that the ban to assisted suicide many a times increases the problem of such patients. They are forced to live in agony or find covert means to rescue themselves. The author states that it has been an age old phenomena for people to adapt to such clandestine resources. He depicts that it is only because of the efforts of few who believe in legalization of assisted suicide the concept has come in limelight and discussed. He states that the person’s autonomy to select an option for termination contradicts the states duty to preserve, protect and secure the life of its subjects. The author states that each state has a dissimilar move toward the situation. He narrates this with a specific reference to states of New York, Washington and Oregon. The first two states punish PAS while Oregon permits it. He has enumerated his thoughts discussing the cases of

“Compassion in Dying v. Washington, Lee v. Oregon, and Quill v. Vacco” He emphasizes that judicial consensus for PAS augments the general public to execute euthanasia and analogous acts due to which the state fears for the slippery slope and holds back the regulation of liberty to the individual to decide about it life. He states that this needs to be thought by the state instantaneously as the condition of terminally sick patients is miserable as they are many a times compelled to agony and undignified life. The state also needs to purport the necessary safeguards to avoid abuse.

The author thus has explained his opinion very clearly illustrating the cases and why he thinks so. At the same time it is observed that his study is restrictive. The author has discussed the judicial decisions only for the three states and analyzed the issue. Therefore his views cannot be accepted as a
7.50 Literature review on

“Physician – Assisted Suicide and Voluntary Euthanasia: Some Relevant Differences”

John Deigh, in this article has depicted views on Yale Kamisar’s writings which are based on PAS and voluntary active euthanasia. He emphasizes on Yale’s past views about euthanasia and the effects of the strong opposition for prohibiting euthanasia legislation. As according to him it, if strictly construed would result in penal provisions on the innocents that is the physicians, family members who were just executing the logical desires of their loved ones. For this he proposes have exceptions to the rule which shall protect the beloveds and physicians. The author also appreciates Yale Kamisar’s boldness to revert to his own findings and state them defective. He prohibits the legal acceptance of euthanasia not because it is unfair but believes in the benefits of non legalization which are substantially more profitable than its legalization. He states that legalization would definitely end the sufferings of those who are in misery and really wish to terminate their lives from the pain and sufferings they have to undergo each day. At the same time he depicts the fear of some patients who are likely to submit due to the peer pressures existing. Further he emphasizes that this loss of unjust lives shall be prevalent mostly amongst the economically weaker, elder and terminally ill patients. According to him this loss is much greater than the profits that may be achieved on legalization. Further Deigh also states that the opponents of legislation really do not differentiate between PAS and voluntary euthanasia. As for them it is one and the same thing, both are just different means, to achieve the same thing that is death. But however it has been observed in the article that he has tried to narrate how legalizing voluntary euthanasia would be better than legalizing PAS. He states that in a PAS assistance of the other is required and therefore after confiding the wishes the persons will takes a passive state, leaving the burden of the act on others while in voluntary your will still has to be active even after the decision as it is the patient who has to take active steps to achieve the desired effect. In this process it is quite likely that the will of the patient may weaken and the desired effects not achieved. With this conception it has been observed that the number of deaths would be lesser.

This is the utilitarian’s view. However such reasoning seems to be very weak to really distinguish the two.

The author in his article has discussed about the utilitarian approach, based on Yale Kamisars writings at the centre point. He also has depicted that such
disagreements are less held up in the society. The reason he narrates is that even when we speak about PAS it is not necessary that the physician himself has administered the lethal dose to the terminally ill as it could be handed over to the patient to help himself. In such a case the above stated logic of the utilitarian does not sustain.

7.51 Literature review on

Physician-assisted suicide – a qualified endorsement

Raphael Cohen-Almagor has described about the persons enthusiasm for life. His research depicts that the majority of terminally ill wish to live. He states this because the majority of religions speak about preservation of life than its termination. Those who emphasize on dying are a small group who strongly believe in the individual’s autonomy. He states that such individuals are the ones who suffer from a dreadful diseases and the cure of it not possible at all. These patients usually refrain to fight and believe in submitting themselves relentlessly to the situation. They feel that leaving the world is an easy solution to the worthless life. Raphael feels that it is the laissez-faire state should support such people’s demand, as recognizing the patients dignity is sometimes more important than conserving life.

The author also has discussed about responsibility of the physicians towards the act. He states that the physicians should be considerate towards the patient’s demand of termination, though it is against their medical ethics. He emphasizes that such request are to be respected, but they should be from the older generations, patients with terminal sicknesses and whose explicit desire is termination. In case of others that is minors and adolescence it should be from their parents and should always is in the paramount interest of them.

He further in his article emphasizes that palliative care is the integral part of the medical profession and should be administered with utmost care. He states that it should not be standardized but should be according to the
requirements of the patient. If so it may achieve the desired results and shall help in desisting a patient from ending his life. The medical fraternity would be able to in real sense live to their commitment of the Hippocratic Oath.

The author due to the aforesaid beliefs states guidelines that he feels physicians should observe to avoid the fear of the abuse. He states that PAS should not be recommended to the patient in any situation by the physician and should solely be the desire of the patient. He suggests that the wish expressed should be in black and white so that it can be a definite substantiation of the patient’s choice. He believes that palliative care is a solution to for the terminal patients to change their verdict, hence should be advised to the patient, and relieved from the agony they are suffering. He emphasizes on physicians conversing with the patient to update them on the diagnosis and projection of their disease. This enables them to check about the free will of the patient, psychiatrist assistance is also recommended for ensuring the free will. The author also states that one should have the liberty to withdraw his consent whenever he wishes. The act should be administered by a team of doctors to avoid any kind of abuse.

It has been examined that the author is quite susceptible about the administration and therefore recommends many guidelines before its performance. He insists its administration only in cases of necessity without being specially charged for the performance of the act. The article is balanced one the author has considered all the aspects related to PAS in brief very efficiently. He has emphasized on palliative care at the same time shows his consensus for PAS with restrictions to avoid the possible slippery slope which is his main cause of concern.

7.52 Literature Review on

“A Social Justice Approach Regarding Physician Assisted Suicide and Euthanasia among the Elderly”

Maureen V. Himchak, the author has described how societal exertion can seek justice and assist in resolving the subject of euthanasia or PAS. To
describe this he has a systematical approach to deal with the issue. He has defined all the relevant terms of the topic like euthanasia, PAS as according to him its definition varies according to the customs tradition and way of living of the individual. It has been experienced that the Latin Americans and the Asians are more kin-hearted all their medical decisions are usually taken by the relations compared to the Americans, Africans and Europeans who believe in autonomy more than anything. The Spanish and the Asians are more religious and believe in taking care. They respect their physicians, have an immense sense of loyalty towards their family and accept the responsibility as fulfillment of their life duty. This also includes doing well to others and the autonomous choice is thus then included in it. Sometimes the difficult task of maintaining life and the ensuring quality life because of the extravagant cost becomes stressful for the family and develops guilt in administering euthanasia. It is during this time that the social workers can really assist the members in the difficult situation they go through.

The author thus has convincingly narrated that how social workers can assist the patients and their relatives at this juncture of life when it is very difficult for them to take a decision. They enable to promote unity, equality and justice in the society by assisting the terminally ills and their families in their end of life decisions.

7.53 Literature review on

“Legalizing euthanasia or assisted suicide: the illusion of safeguards and controls”
B J. Pereira in this article the author examines the misdemeanor prevalent in the states where euthanasia or PAS has been legalized. The forbearance of the society towards the misbehavior prevalent has lead to the greasy incline which can turn dangerous to any society. He states that initially euthanasia was restricted to as a last remedy for the terminal ill patients but now administered generally.

He states about how legislation came in for euthanasia in different countries over the time, after huge discussions and debates. Each state always made an effort to overcome the defects in legislations passed by the earlier state. But it has been observed that states are not strictly abiding to the rules and regulation passed by the legislators thus leading to the slippery slope.

He has depicted the shift from the use to misuse of each state separately and tried to convince how legalization of euthanasia may turn to be a dangerous decision. The emphasis he has made on palliative care does not always be a solution in all situations. It is been observed that the author has been more inclined towards palliative care as an option for euthanasia. The article is thus alike any other general article on euthanasia. It does not state anything apart from what the others have done in past. It definitely helps in confirming the majority view of the general masses that are against legalization.

7.54 Literature Review on
“Nursing Ethics: Reigniting the debate over assisted suicide”
Lois R. Robley  R N, the author of this article has explained to the nurses that they should be aware of the euthanasia and assisted suicide as the discussion on euthanasia was again highlighted pursuant to the arrest of Georgia men for assisted suicide. In this article the author has explained the terms suicide, assisted suicide, euthanasia and also discussed about the Oregon and Washington Law about assisted suicide. He states the reasons behind the patient’s decision of suicide. He also speaks about the hospice care that the nurses ought to take for their patient. He has done this so that nurses can understand what exactly they ought to do in such circumstances.
It can be examined that the material placed in the article is really insufficient to achieve the purpose of the writing. The effort made to inspire the nurses to participate in the debate on the controversial topic has not been achieved. However it can probe the nurses to further conduct research on the subject. It can definitely be an eye opener for the nurses to think about the subject.

7.55 Literature review on

“Predictors of Attitudes towards Physician-Assisted Suicide”

Zeeshan A. Butt James C. Overholser, Carla Kmett Danielson, in the article emphasizes how the human psychology plays a vital role in implementing euthanasia or assisted suicide. The psychology of a being is deeply associated with its termination resolutions. There exist a co-relation between dejection, misery, worthlessness and termination. This normally leads to hastening of death. However it is believed that all these factors can be treated and the individuals desire to end life can be changed. These obliviously depends on the age, sex and the patients past history. The authors have examined this issue through the research carried by them in Midwestern University. It was observed that depression did relate to PAS. These individuals were keener in dispensing their lives. Age, sex of an individual really does not matter.

The article has again re-established the fact of psychological aspect being a crucial factor in end of life decisions. However the authors have just focused in their article on depression, uselessness and age of the individual to determine the prediction. Along with this the other aspects like health of the patient, his agony, misery, available palliative care and the societal backing the patient gets can also be decisive factors in his decision, which have been not covered by the study. The religious and spiritual aspect of an individual can also be considered on the further research to be carried on this aspect. Further the analysis of the authors is restricted to only a specific university which does not allows us to accept the analysis as perfect.
Literature Review on

“Physician-Assisted Suicide: An Anthropological Perspective”

Cheryl Mwaria has examined Physician-Assisted Suicide from the cultural perspective. She has also analyzed the view of the terminally sick with respect to euthanasia. The approach towards euthanasia differs from culture to culture. It has been observed that humans living are considerably controlled by the existing customs, traditions, and norms prevalent in the society he lives in. It has been observed that in many customs suicide formed a part of tradition example Sati in India, Seppuku in Japan they were all involuntary forms of end of life but still accepted by the society because of the social force it had. Further she examines that the voluntary PAS or euthanasia that is approved by many states is also a result of the societal beliefs. She cites examples of old infirm Eskimos being abandoned this was precisely done to reduce the burden on the society of those who were useless to them. These customs were condemned and with passage of time and were altered. This was due to the social changes brought about by the reformers in the society. Thus it can be observed that societal attitudes play a vital role in legalizing euthanasia. It is therefore essential to consider the social views before we speak about legalization of euthanasia. One also has to judge the impact of this societal change on the susceptible. The increased recognition of personal autonomy and criticism for dependency influences the society in its rule making decisions. Legalization of euthanasia shall thus have an impact on the societal association of members and bring about changes in their relations. Cheryl Mwaria has emphasized on the societal view which has not been commonly considered by most of the thinkers and researchers of this subject. She has convincingly portrait her views pointing the anthropological aspect and the change that culture, can bring about in ones opinion.

8. Conclusion

The various literatures read and assessed makes the researcher thinks, and analyze the topic from different perspective. Some of the articles have analyzed the religious attitude of the individuals and how it influences their
perceptions. All the religious attitudes are covered in the review. It has been observed that all this literature suggests that those who are too much involved in the preaching are of their religions they are not comfortable with the concept of euthanasia. They either refrain discussing it or highly oppose it. Those who are not staunch, dedicated followers their perception differs they accept the notion with certain restrictions. The study also revealed to understand how culture plays an important role in view of the masses. It is this anthropological aspect that can bring a change.

The researcher has reviewed articles which have dealt the subject commenting its utility from the advantages and disadvantages point of view. It has been observed that the authors have analyzed the differences of arguments in and against euthanasia to portray its progressiveness. It has been examined that the educated are more inclined towards the legalization of euthanasia. Those who have a stronger than average attachment to, self independence are also strong supporters of euthanasia. The religious and ethical views are also considered by the authors. They have observed that though religion condemns euthanasia but at the same time literature has also the passive assistance being permissible.

The literature examined has also assisted the researcher in viewing the doctors and nurses role in administering euthanasia. The review of legalization of euthanasia in India shall also assist the researcher in his research in accomplishment of one of his objectives about legalization of euthanasia. But at the same time attention has been drawn because of the reviews that the ethical question of legalizing or permitting euthanasia and PAS promote a good death.

It has also been observed those clinical practice guidelines for good and the best palliative human care should be made available to the terminally ill, which shall divulge an individual from his request for euthanasia. The literature examined also has revealed that how palliative care plays an important role to refrain an individual from his decisions. At the same time it also depicts the non availability of intense palliative care measures in most of the states. They have also suggested the researcher that in all cases palliative care cannot be
the ultimate solution as it has limitations. It just enables the patient to ease its sufferings but cannot in any case give an ultimate solution to his sufferings.

The authority conferred of “right to live”, as one pleases guaranteed by European Convention of Human Right is worth screening. Does this include authority to end ones existence, just because it is not dignified? The debate between the constitutional rights in the above reviewed article thus will assist the researcher in her hypothesis whether to consider about voluntary euthanasia in the rarest or rare case with strict guidelines for its implementation.

Further the article reviewed emphasizes the role of psychologist with other professionals, in deciding whether the appeal for end of living with assistance is lucid plus independent. Further they also draw attention to the importance of good nursing care and its effect discussing the pro and contra euthanasia arguments. They have also drawn attention towards the fact that all the professionals who are involved in euthanasia, should respond effectively, compassionately and must be aware of the causes, why the patient, his dear ones are demanding their assistance for PAS. It also brings to our notice that the psychologist do not have to contemplate on features such as depression, uselessness and age of the individual to determine the prophecy but also consider the possibility of obtainable palliative care for the patient his support system and also the torture that he goes through. The literature also depicts about euthanasia prevalent in silence. This can be said to be a major setback to the law and order in the country. The laws that are supposed to be to protect the subjects shall be a threat to those who assist their beloveds in fulfilling their wishes. People are then in such circumstances forced to perform it clandestinely. These acts when are thrown in open by the media and this is how the discussions on the issue are reignited.

The literature also enabled the researcher to focus its attention to verification of individuals demand for termination by the psychologist. It has been observed that in the various literature examined most of them have suggested it to be mandatory incase a state is going for a legislation on euthanasia. Along with it the assistance of social workers also has seemed to be
beneficial. These social helpers assist the patients and their family members to relieve from the stress they go through and make the whole process much easy and acceptable to all.

Apart from the above examinations pursuant to the issue it has been also observed that euthanasia is not a new phenomenon but an ancient one. It has been prevalent in many states as a custom, tradition observed for the benefit of all, that is the populace and also the individual on whom performed. The methods of this elimination differed from country to country.

The review have also enabled the researcher to confirm that if at all legislation is to be introduced all states fear for the slippery slope that may lead to the abuse of the issue. It has been observed that all articles that have spoken in favor of the subject have ensured that they have spoken about its implementation only in dire necessities which have been well defined in their articles. Further it has been observed that those who are in favor of euthanasia have always suggested guidelines for its implementation. It is been observed that with these stipulations suggested the general masses or even the medical fraternity can entrust faith in euthanasia and also believe it to be implemented only for the good of the patient.

The articles have also assisted in drawing attention to recognize the independence of the individual and his sovereignty in taking decisions for himself. It has made us think about the rights conferred by the UN and also shouldered a responsibility to consider those when we discuss the topic of euthanasia. The right of the individual to a dignified life is also emphasized. It makes us therefore think that if it has to be ensured then is there a real harm in implementing euthanasia?

The literature reviewed has also enabled the researcher to understand and gauge the approach towards the different forms of euthanasia. It has been observed from the reviews that amongst the prevalent types passive euthanasia is more acceptable worldwide amongst the masses. It has been observed that not only the general public prefers it but even the medical fraternity and the judiciary has shown its preference for it. It is been observed
that most of them have narrated it to be ethical and moral and therefore have been supportive to it.

Hence the above observations on euthanasia suggest that it is a confounding issue globally. It is an issue of public interest and therefore different country needs to explore and have its own resolution to the issue of Euthanasia. In India euthanasia is illegal. The researcher therefore intends to research and explore the possibility of its legalization in India. Thus the researcher has chosen to study empirical, non-empirical, analytical and doctrinal legal research. Apart from this, primary data has been collected from interviewing method and analyzed to help the researcher in drawing conclusion. This will help in spreading awareness in the society pertaining to the issue concerned.

It will also add information and material to medical jurisprudence.

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