

EUTHANASIA BETWEEN THE RIGHT TO LIVE AND THE FREEDOM TO DIE

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Abstract: Promoting and respecting the fundamental human rights and freedoms is a barrier against violence, abuse, but also a guarantee of individual and social morality.

Following a brief introduction, this article provides some definitions of euthanasia, while aiming to bring to the reader's attention the way in which the concept has emerged and developed throughout history. Subsequently, we shall present some criteria for the classification of euthanasia, but some pros and cons also, which tension the ethical, medical, legal, and religious debates about the legalization of euthanasia. Towards the end, we shall visit a few dilemmas gravitating on the subject, and also present some biblical principles, which should be the perspective from which the issue of euthanasia is to be considered. The worst thing, when we talk about euthanasia, is that the whole system of values, which was seen as a good one from the very beginning, is now overthrown. The battle for life, the supreme value that gave birth to Hippocrates' medicine, is substituted for the battle for death.

Keywords: *God, euthanasia, medically assisted suicide, murder, consent, decision, life, law, freedom.*

Motto:

„... I lay down my life so that I may take it back again. No one takes it away from me, but I lay it down of My own free will. I have the authority to lay it down, and I have the authority to take it back again. This commandment I received from my Father.”¹ (Jesus Christ)

1 John 10, 17 – 18. The Bible, New English Translation (NET).

Introduction

The last decades have augmented the debate about the ethical, moral, and legal issues that the euthanasia issue raises, highlighting the growing interest in the issue among doctors, clergymen, politicians, and general population alike. The books published on this subject, the setting up of special organizations in this direction, as well as the popularization of some cases through mass-media, have fueled the growing tendencies, favorable to practicing euthanasia, accepting that it is not an act incompatible with the ethical and moral requirements or the imperative requirements of medical ethics, but an act that is even necessary in certain cases.

Definition of the term

From an etymologic point of view, the term “euthanasia” comes from the union of two words of Greek origin, “eu” meaning “good, well,” and “thantos” meaning “death.” It can be translated by the phrase “good or light death, beautiful death”.² The first use of the documented term “euthanasia” was identified in the work of the Latin historian Suetonius, “The lives of the twelve Caesars”.³ Francis Bacon (1561 – 1626) is considered the creator of the term “euthanasia”, and it revived the debate on death types from a purely philosophical perspective.⁴

Euthanasia could be defined as a set of medical actions or offenses, with ethical/legal support in the interests of an ill person, in the sense that it results in a reduction of the suffering of an ill person, who at the time does not receive etiological treatment, from a medical science viewpoint, but rather, on the contrary, the prognosis is a close and inevitable end.⁵ In

2 Laura Stănilă, „Obsesia terapeutică. Pro și contra eutanasiei – noi provocări ale legislației românești” (Therapeutical Obsession. Pros and Cons on Euthanasia – New Challenges of Romanian Legislation), in *Analele Universității de Vest din Timișoara – Seria Drept* (Annals of the West University of Timișoara – Law Series), nr. 2 (2014): p. 28.

3 Suetoniu, *Viețile celor doisprezece Cezari* (The Lives of the Twelve Caesars) (București: Editura Politică, 1998), p. 19.

4 Francis Bacon, *New Organon: or True Directions Concerning the Interpretation of Nature*, <https://www.earlymoderntexts.com/assets/pdfs/bacon1620part1.pdf>. – September 20th, 2021.

5 Almoș Trif, Vasile Astărăstoae și Liviu Cocora, *Euthanasia, suicidul asistat, eugenia, Pro versus Contra, Mari dileme ale umanității* (Euthanasia, Assisted Suicide, Eugenia, Pros and Cons, Great Dilemmas of Humanity) (București: Editura InfoMedica, 2002), p. 73.

the Cambridge Dictionary, euthanasia is defined as “the act of killing someone who is very ill or very old so that they do not suffer any more”⁶. From a criminal legal perspective, euthanasia is the murder carried out under the impetus of a feeling of pity, meant to put an end to the physical pain of a person suffering from an incurable disease and whose death is inevitable.⁷

The concept has now added new significance, meaning “killing out of mercy to suppress extreme sufferings or avoid abnormal children, developing incurable diseases or mental illnesses, avoiding an unbearable life that is too difficult for family or society”⁸. Thus, euthanasia has begun to be perceived as an act of humanity.⁹

However, it appears that the literature has not reached a consensus on finding a definition for euthanasia, but there are some concepts referring to euthanasia, which usually only cover specific categories of euthanasia.¹⁰

Brief history

The attitude of the society toward the life of its members has varied over time. For example, in Sparta it was the practice of the infanticide, children born unhealthy or with different physical defects were either left to die or were thrown from a cliff of Mount Taygete. Plato also states that “those whose body is ill-constituted, as well as those who have a perverted heart and incorrigible by nature, will be left to die”¹¹. In fact, Greek phi-

6 Cambridge Dictionary, <https://dictionary.cambridge.org/dictionary/english/euthanasia>. – September 20th, 2021.

7 Trif, Almoș, Astărăstoae Vasile și Liviu Cocora, *Euthanasia, suicidul asistat, eugenia, Pro versus Contra, Mari dileme ale umanității*, p. 73.

8 Jacques Suaudeau (Mons.), „Le probleme de l'euthanasie, de l'avortement et de SIDA dans l'Europe de l'Est” (The Issue of Euthanasia, Abortion, and AIDS in Eastern Europe), in *Congresul Internațional „Familia și viața la începutul unui mileniu creștin”* (At the International Congress “Family and Life at the Beginning of a Christian Millennium”) (București: 2001), pp. 256 – 257.

9 Ciuvăț V., *Protecția juridică a drepturilor omului* (Legal Protection of Human Rights) (Craiova: Themis, 2000), p. 107.

10 Bogdan Adrian, „Dreptul la viață versus dreptul la moarte: dileme morale” (The Right to Live versus the Right to Die, Moral Dilemmas.), in *Revista de Științe Juridice – Centrul de Cercetări Juridice de Drept Privat – Craiova* (The Legal Sciences Magazine – The Center for Private Law Legal Studies – Craiova), coord. Ion Dogaru, vol. 25, nr. 1 (Craiova: 2014), p. 186.

11 Platon, *Opere complete, vol. IV, Republica* (Complete Works. The Republic) (Paris: Garnier Presses, 1936), p. 111.

losophy¹² has always been favorable to suicide and the elimination of the lives of those who became a burden. Later, the Romans took over Greek habits, including those related to death. As a result, in the Roman Empire, the malformed newborns were left to die, this habit was practiced until the second half of the 4th century, when Emperor Valens decided to ban it under Christian influence. Also, in ancient Rome, suicide was regarded as an honorable death.¹³

Over the years, different positions have been expressed through various ethical codes toward patients in terminal stages, each determined by the level of medical knowledge of the times and religious influences. This is how ancient medicine tried to overcome the disease, but it submitted itself in the face of death when the patient reached the terminal phase and thought the struggle with destiny was lost. By treating life and suffering as a means of atonement, Christianity has undergone a fundamental change in respecting human life, rejecting any attempt to take someone's life, and rejecting someone's possible attempt to end his life in any way.¹⁴

In 1623, in "Instauratio Magna", Francis Bacon stated that medicine was also intended to alleviate the pain and suffering of the patient, providing the patient a "sweet and peaceful death", when there was no more hope. At the beginning of the 16th century, Sir Thomas Moore presented arguments in favor of euthanasia. Sure enough, this move triggered a wave of protests, because at that time Christianity believed that human life is sacred, and only God has the right to give and take life, and the practice of euthanasia is equivalent to the usurpation of this right, God's.¹⁵

The passage of time has not changed the position of the church. The church is still stubborn and condemns euthanasia. However, civil society puts itself in between supporting the signing and repeal of the eutha-

12 Rotaru, Ioan-Gheorghe, *Istoria filosofiei, de la începuturi până la Renaștere (The History of Philosophy, from the beginning to the Renaissance)*. (Cluj-Napoca: Presa Universitară Clujeană, 2005), pp. 75-190.

13 Laura Stănilă, „Obsesia terapeutică. Pro și contra eutanasiei – noi provocări ale legislației românești”, p. 29.

14 *Rezoluții ale sinoadelor Bisericii Ortodoxe Române și Bisericii Ortodoxe Ruse privind probleme de bioetică. Avortul, eutanasia și transplantul de organe* (Resolutions of the Romanian and Russian Orthodox Churches Councils Regarding the Issues of Bioethics, Abortion, Euthanasia, and Organ Transplants), <https://ro.scribd.com/doc/176199619/Bioetica-bor>. – September 21st, 2021.

15 Bogdan Adrian, „Dreptul la viață versus dreptul la moarte: dileme morale”, p. 188.

nasia bill. Therefore, in 1906, the draft of euthanasia in Ohio, USA was not approved. 1939 marked the beginning of Hitler's "Aktion T4" project, the euthanasia of children under three who were physically and mentally disabled. Subsequently, the program was extended to older children and adults.¹⁶ In 1922, the Russian Criminal Code acquitted the perpetrator of a merciless murder as long as he could prove that he acted at the request of the victim.¹⁷ The provision was repealed shortly because of its implications.

Euthanasia returned to the public debate in the 1960s. The debate gave the wrong answer to the abortion issue and paved the way for the offensive of euthanasia. In 1967, the year that abortion was legalized in the UK, the American Euthanasia Society published Luis Kutner's "The Living Will", which later became the basis for the drafting of the Patient Self-Determination Act. According to this, citizens can request the application of euthanasia procedures according to their wishes.

The first country to legalize euthanasia was the Netherlands in December 1993, and the law came into effect on April 10, 2000. At the same time, Belgium partially legalized euthanasia. Later in Northern Australia, a law will come into force to authorize the euthanasia of terminally ill patients, or more accurately, suicide with the assistance of a computer, not necessarily with the assistance of a doctor. This law can benefit any Australian citizen who lives in or passes through the Northern Territory. Euthanasia and medically assisted suicide are legalized in several countries: Switzerland, Italy, Luxembourg, Albania, Uruguay, Japan, Belgium, and so on.

Among the decisive factors that made the Netherlands the first country to legalize euthanasia and medically assisted suicide, we can recall the Dutch history of tolerance. In the 16th and 17th centuries, they tried to defend their religious freedom. As a result, this country has become a refuge for Jews, Catholics, and free thinkers (such as Spinoza and Descartes) who try to escape religious oppression. The secularization process that took place from 1960 to 1970 also severely damaged the status of the

16 *Holocaust Encyclopedia*, <https://encyclopedia.ushmm.org/content/en/article/euthanasia-program>. – September 21st, 2021.

17 *The Criminal Code of The RSFSR*, 1st June 1922, <http://soviethistory.msu.edu/1924-2/socialist-legality/socialist-legality-texts/first-soviet-criminal-code/>. – September 21st, 2021.

traditional system. The Netherlands suddenly changed from a conservative traditional country to a society characterized by social and cultural experiments. At the same time, after 1960, social relations changed. The gap between social classes has been greatly reduced, and the role and influence of ordinary citizens have become more and more important. The reason why Dutch society can cope with this wave of change is that it has a conflict-avoidance mentality, relying on the fact that it is better to guide social progress than to try to prevent it. The particularity of the Dutch public discussion is another factor that makes euthanasia legislation possible. Therefore, Dutch society is characterized by pluralism of thought, open moral debate and a general atmosphere of tolerance. In the Netherlands, the basic mechanism for resolving conflicts is compromise, which was developed due to the long tradition of trade in the Netherlands. In addition, the Netherlands has never had an authoritarian political system. Therefore, during the Second World War, Dutch doctors refused to participate in the Nazi euthanasia program on the grounds that the state should not interfere in the doctor-patient relationship. Many Dutch doctors would rather go to a concentration camp than disclose the patients' names. The particularity of the Dutch health system also plays an important role in the supervision of euthanasia. The Dutch health system is a mixture of private and public insurance. The latter provides a wide range of healthcare services to all Dutch citizens. This means that the motivation for euthanasia is not the financial burden of the healthcare system or the family. In addition, there is no charge for euthanasia, so it cannot be regarded as an additional source of income for doctors. Last but not least, before the legalization of euthanasia and assisted suicide, these practices were "tolerated" in the Netherlands, that is, they were prohibited by law but accepted in practice. The history of euthanasia and assisted suicide in the Netherlands has continued for decades and represents a mixture of typical cases, social and medical attitude changes, all of which ultimately led to the legalization of these practices.¹⁸

18 Peter Tünde și Iosif Șamotă, „Eutanasia. Pro și Contra” (Euthanasia. Pros and Cons), in *Jurnal Medical Brașovean* (Medical Journal of Brașov), nr. 2 (2008), pp. 199 – 200. Vezi și Gerrit Van der Wal și Robert Dillmann, „Euthanasia in the Netherlands”, în *British Medical Journal*, nr. 308 (1994).

Classification of euthanasia

There are three major trends of opinion¹⁹ regarding euthanasia, which polarize the scientific community as well as civil and religious societies. The first trend is “vitalityism”, which means that biological life must be maintained at all costs and by all means. This trend seems to be a kind of biological idolatry and puts the value of material existence above the patient’s personal needs and fate.²⁰ The second view is “death with dignity”. According to this view, patients in pain must be allowed to choose how and when to end their lives with dignity. Therefore, it must be ensured that patients can freely decide on the treatment of the disease, must receive the sympathy and solidarity of family members, friends, or medical staff, and must be given enough drugs to alleviate what may be inhuman and spiritual. It is unbearable, let the patient die with the least pain and the greatest self-consciousness. The third trend of thought aims to “accelerate the death process”. This view holds that the life support system should be stopped at a certain point in the death process. This is entirely moral, allowing the patient to die naturally.

In the discourse on the classification of euthanasia, two key criteria are generally considered: the criterion of the patient’s personal will and the criterion of medical action.

According to the criterion of the patient’s consent²¹ and the level of information on the reality of the diagnosis and prognosis of his disease, euthanasia can be performed in three different ways.

Voluntary euthanasia occurs when the end-stage patient is clear-headed, disease-free, and repeatedly asks the treating doctor to reduce the pain caused by unbearable pain and/or loss of dignity and realizes that there is no treatment plan. In other words, voluntary euthanasia is understood as an act of deliberate homicide by an individual, which can only be carried out with the help of another person.

Involuntary euthanasia means that although the patient is able to make a decision, he has not been consulted on the action leading to the death or declared in advance that he does not want to perform euthanasia.

19 Laura Stănilă, „Obsesia terapeutică. Pro și contra eutanasiei – noi provocări ale legislației românești”, p. 30.

20 John Bereck, *Darul sacru al vieții* (Life’s Sacred Gift) (Cluj: Patmos, 2001), p. 257.

21 Peter Tünde și Iosif Șamotă, „Eutanasia. Pro și Contra”, p. 198.

In practice, the person could give or not give consent, but he did not give consent, either because he was not asked, or was asked, but he did not give it because he still wanted to live. Therefore, involuntary euthanasia is the act of killing or allowing others to die without consent. As far as legal classification is concerned, we can say that involuntary euthanasia is closer to murder, whereas voluntary euthanasia approaches suicide.

Non-voluntary euthanasia takes place when the life of an ill person who cannot choose himself between living and dying is ended, and the subject cannot be agreed by his mental or physical condition (fetuses, pluri-malformed newborns, unconscious sick people, persistent vegetative conditions, those with severe mental illness or with diseases or accidents which are not autonomous), but without having mentioned whether or not they would like to practice euthanasia, before the illness or accident. In such cases, consent for the interruption of life shall be given by the family or obtained by court order.

According to the physician's action criterion²², two types of euthanasia can be distinguished:

Active euthanasia or "compassionate killing" occurs when death is deliberately and actively created in a positive way. If death occurs, this type of euthanasia involves the intervention of a person (not necessarily the treating doctor) with a lethal agent (drug overdose, inhalation of carbon monoxide or anesthetics, intravenous air, insulin, or potassium chloride).

Passive euthanasia or "death with mercy" or "death with compassion" refers to the intentional death caused by failure to introduce or interrupt normal nutrition or treatment measures, which means that the doctor will kill a person (remove life support equipment, interrupt intensive treatment, interrupt water and food management, and give only minimal, comfortable care).

There are also special forms of euthanasia²³, such as: subtle and unobtrusive (crypto-thanasia) form of euthanasia; similar to the form of deciding not to resuscitate (medical-thanasia); form is understood as an embarrassing and torturing death, Just like the life support system is unreasonably abused (dis-thanasia); it involves freezing the patient at minus 200

22 Almoș Trif, Vasile Astărăstoae și Liviu Cocora, *Euthanasia, suicidul asistat, eugenia, Pro versus Contra, Mari dileme ale umanității*, p. 61.

23 Peter Tünde și Iosif Șamotă, „Eutanasia. Pro și Contra”, p. 199.

degrees Celsius or freezing within the first second after the dying person's heart stops (cryodeath); economic euthanasia is manifested as Refusal to treat the elderly for economic reasons. Last but not least, we can mention eugenic euthanasia, which seems to be a real genocide, which eliminates the disabled or people with different deficiencies through euthanasia.

Arguments for and against euthanasia

There is still no consensus in addressing euthanasia and the medically assisted suicide, with pros and cons inflaming the spirits even more in public debate. The advocates of euthanasia and medically assisted suicide raise arguments to justify these practices.²⁴ When faced with the great pain that leads to physical and mental degeneration, the patient cannot accept it, and people will come up with compassionate arguments. This posture is a relief for people whose life has become intolerable. As part of the autonomy, the patient can make decisions about any aspect of treatment, the argument of the right to death, according to this right, the patient has the right to demand an end to pain and suffering. This right is based on the need to respect the right of human dignity, and profound suffering may be a serious reason for choosing to end life and to choose to die with dignity.²⁵ Also, if a society values individual choice and self-determination in terms of ways of life, then that society must also value individual choice and self-determination in terms of death. Life and death, beyond personal control, are felt as alienating, degrading, and undignifying.²⁶ Starting from the premise that society is obliged to expel those who do not stand up physically and mentally, it is invoked by the theory of social progress, which is a theory based on social Darwinism. Last but not least, the argument of economic need was put forward, the purpose of which was the high cost of caring for people in the advanced stages of the disease. Some people believe that the

24 Craig Paterson, *Assisted Suicide and Euthanasia. A natural Law Ethics Approach* (Cornwall, Great Britain: TJ International Ltd., 2008), pp. 26 – 51.

25 S. C. Oană, „Aspecte etice legate de perioada de sfârșit a vieții și deces” (Ethical Aspects Regarding the End of Life and Death), in *Revista Română de Bioetică* (Romanian Bioethical Magazine), vol. 2, nr. 2 (2004), p. 112.

26 H. T. Engelhardt, *Fundamentele bioeticii creștine. O perspectivă ortodoxă* (Fundamentals of Christian Bioethics. An Orthodox Perspective) (Sibiu: Editura Deisis, 2005), pp. 405 – 406.

legalization and practice of euthanasia can allow some funds to be redistributed to other sectors to improve the population's health care. It seems that these arguments are not enough to decide to support euthanasia, that is, medically assisted suicide, even though it has been cited as the human right to die, and there is no benefit in suffering. Neither medical advances regarding the accuracy of predicting the correct timing of euthanasia nor the clear distinction between euthanasia/assisted suicide and murder are yet convincing. This is also very complicated when all discussions are conducted under impersonal conditions of money and cost, when there is confusion between rights and freedom, or when sympathy is needed to clarify the ethics and the law.²⁷

On the contrary, opponents of euthanasia and assisted suicide have offered rebuttals to justify their choices. They claim that these processes are too radical, they destroy the problem rather than solve it, and they keep the patient away from any possibility of regret or change of mind. Moreover, opponents of euthanasia claim that it has no moral legitimacy. Although it is allowed to sacrifice a part for the whole, there is no opposite principle of sacrificing the whole for the part. The legal background is also cited, and there is a risk of abuse based on political, social, and even ethnic reasons. Opponents also claim that this practice is nonsense, because it must be acted upon by those who vowed to protect and defend lives rather than destroy them. "The doctor (and no one else) has the right to end one's life; he who cannot give someone a right, cannot take it either; he who cannot give life to someone, cannot take it."²⁸ Last but not least, they claim that euthanasia and assisted suicide are becoming increasingly unnecessary, because when the ideas supporting them were put forward, the concept and practice of palliative medicine was not known.²⁹

Against this background, on September 13th, 2013, the European Coalition for the Prevention of Euthanasia (EPC-Europe) was launched in Brussels, led by Dr. Kevin Fitzpatrick. This Coalition brings together organizations and individuals across the continent in a campaign against the erosion of laws protecting people from euthanasia. The group has the

27 Peter Tünde și Iosif Șamotă, „Eutanasia. Pro și Contra”, pp. 200 – 201.

28 Almoș Trif, Vasile Astărăstoae și Liviu Cocora, *Euthanasia, suicidul asistat, eugenia, Pro versus Contra, Mari dileme ale umanității*, p. 263.

29 *Ibidem*.

role of acting as a strong voice against those who want to change European laws to allow assisted suicide.³⁰

Dilemmas

The legalization of euthanasia provokes heated ethical, medical, legal, and religious debates, in practice calling into question the extent to which the protection of the right to life must be exercised. And paradoxically, it is precisely the right to life, an essential principle which is a prerequisite for the exercise of other guaranteed rights, that does not enjoy the establishment of specific borders.³¹

When this question excludes God, dilemmas, which are not few, begin to arise. If necessary, and under what circumstances, which institution should control this practice to avoid abuse, who decides what to do, and how to reconcile the Hippocratic oath and euthanasia, these are just some of the dilemmas brought about by euthanasia. The list can continue to discuss principles with priority: the right to life, the right to freely dispose of one's own life, or the right to not suffer unnecessary suffering. Last but not least, there are difficulties and economic factors regarding the moral laws of this method, the inherent problems of human dignity in the face of death, medical power and the preservation of doctors' creeds (professional ethics, including religious creeds). This kind of action without God will lead to ethical distortions and moral changes.

But for those who include God in the equation of legalizing euthanasia and assisted suicide, the discussion takes a different approach.³² From this perspective, the reality of death is part of the current human condition, which is affected by sin³³, context in which there is "a time to get born and a time to die"³⁴. Even though the salvation accepted through Jesus Christ is a gift offered to all who desire eternal life, the believers wait,

30 <https://www.carenokilling.org.uk/press-releases/epc---europe/>. – September 23rd, 2021.

31 Mona-Maria Pivniceru, Florian Dorian Dăscălescu, „Limita inferioară a dreptului la viață: între protecția fătusului uman, dreptul la avort și progresul științelor biomedicale” (The Inferior Limit of the Right to Live: Between Protecting the Human Fetus, the Right to Abortion and the Progress of Biomedical Sciences), in *Revista Română de Bioetică* (Romanian Bioethical Magazine), vol. I, nr. 4 (2003), p. 114.

32 <https://www.adventist.ro/index/eutanasia/>. – September 23rd, 2021.

33 Genesis 2, 17; Hebrews 9, 27: „And just as people are appointed to die once...”

34 Ecclesiastes 3, 2.

in the future, for the second coming of Jesus for the accomplishment of their immortality.³⁵ Until then, anyone who shares this philosophy of life can be called to care for dying people and even face his own death.

Suffering and pain affect every human being, physical, mental, and emotional trauma being universal. Nevertheless, the Holy Scripture teaches that, regardless of the intensity of human suffering, it calls for patience³⁶ and obedience³⁷, considering the service for alleviating human suffering an important Christian duty.³⁸

In the past, little was done to prolong life, but the progress of modern medicine and the “power” to delay death have given rise to moral and ethical difficulties. The death process has become too technological and too long an experience.³⁹ The end of life must be approached from the perspective of faith in God as Creator and Redeemer of this extraordinary gift, which must be protected and sustained.⁴⁰ He is the Lord of life. And if life is the gift of God, life is sacred, and therefore no human being can automatically decide on it.⁴¹ Such an approach determines modern medicine to prolong life in compassionate ways that reflect the love of God, by alleviating the suffering. On the other hand, the prospect of eternal life will place the authentic Christian in the stance of not desperately clinging to the last remaining life on this earth, nor of accepting or offering all possible treatments, just to postpone the time of death.

An integrated approach of the human being (physical, emotional, and spiritual) leads to several biblical principles⁴² when we discuss about

35 Romans 6, 23.

36 James 1, 2 – 4.

37 Hebrews 5, 7 – 8.

38 Matthew 25, 34 – 40.

39 Michael J. Cholbi (Ed.), *Euthanasia and Assisted Suicide. Global Views on Choosing to End Life* (Santa Barbara, California; Denver, Colorado: Praeger, 2017), p. vii.

40 Genesis 1 and 2.

41 Hans-Georg Ziebertz, Francesco Zaccaria (Ed.), „The Right to Life Questioned. Introductory Remarks”, in *Euthanasia, Abortion, Death Penalty and Religion – The right to Life and its Limitations. International Empirical Research*. Religion and Human Rights, vol. 4 (Switzerland: Springer), p. 2.

42 These principles represent the statement approved and voted on by the Executive Committee of the General Conference of the Seventh-day Adventist Church at its annual meeting in Silver Spring, Maryland, on October 9, 1991. <https://www.adventist.ro/index/eutanasia/>. – September 23rd, 2021.

euthanasia. Firstly, a person who is approaching the end of life and has the capacity to discern between good and bad, deserves and must know the truth about his real situation, about his treatments and possible consequences. Secondly, the human being was endowed by God with freedom of choice, which he must exercise with responsibility, including when it comes to medical care. No one should be forced to undergo medical interventions that they consider unacceptable. People are also best supported within a family, and the healthiest decisions are made after consulting the divine counsel and the advice of the closest. Where a dying person is unable to give his consent for medical intervention, that decision should be taken by the person chosen by the sick person. If no one has been delegated, the decision must be taken by someone close to the person in terminal stage, in writing and in accordance with legal provisions. At the same time, interventions, or medical treatment to extend life can be omitted or stopped if they only add to the patient's suffering and create an unnecessarily delay to the process of dying. In this case, any action must be taken within the existing legislative framework. Moreover, Christianity is called upon to alleviate human suffering and to care for those who are dying, without using active euthanasia. When medical intervention does not cure a patient, the first aim of the caring process must be to relieve the suffering. Then, the practice of "killing out of compassion" and assisted suicides will be counted as nonbiblical practices by every person who has God in the center of his life, because God said, "Thou shall not kill!"⁴³. Last but not least, biblical justice indicates that particular support must be provided to the vulnerable and dependent⁴⁴, providing special care for those who are dying, with respect for their dignity and without discrimination. This should be based on their medical, spiritual needs, but also on their choices, not on their views of their social value.⁴⁵

Conclusions

Euthanasia is about how we conjugate the verb "to die" at present tense. It is a manifestation of a secular mentality. It claims that people have the right to determine their own lives and the lives of others. It is a manifestation of hedonism and utilitarian ethics. If assessed honestly, the choice of volun-

43 Exodus 20, 13.

44 Psalms 82, 3 – 4.

45 James 2, 1 – 9.

tary euthanasia and assisted suicide legalization has incomparable complexity in either black or white words. Paradoxically, although European countries have abolished the death penalty, they tend to legalize voluntary euthanasia and are even willing to build a true death culture around it. In addition, there are some positions on animal euthanasia. In a sense, it is forbidden, and human euthanasia is too easy to be accepted. According to the logic of the supporters of euthanasia, death will be the solution to pain and suffering. However, you cannot eliminate or prohibit inter-personal suffering. It belongs to the people and can often be a way and a period of reconciliation with life, with fellow humans and with God. Being this absurd and paradoxically, suffering is of use to the sick and the surrounding people, a meaning which we cannot always decipher.⁴⁶ But it exists and can only be deciphered when life is related to God. Therefore, it is particularly important to take care of patients before they die, especially because modern medicine has countless ways to improve physical pain.

Perhaps nowhere are these prospects more nuanced than in a palliative care center for terminal patients.⁴⁷ Such places often offer dignity lessons from patients who have learned to see death as part of their life, and that is because, when medicine can no longer cure, love miraculously brings comfort.⁴⁸ The philosophy behind such modern hospice centers has the capacity to dissolve the pro-euthanasia arguments. As Dame Cicely Saunders, the movement founding person, formulated the law of a hospice, this could successfully be a life motto: "You count until the last minute of your life, and we will do our utmost to help you die at peace, but also to live until you die."⁴⁹

46 Ștefan Iloaie, „Morală și viață. Documentele Bisericii Ortodoxe Române Referitoare la Bioetică” (Morals and Life. Documents of the Romanian Orthodox Church Regarding the Bioethics), in *Revista Română de Bioetică* (Romanian Bioethical Magazine), vol. 7, nr. 2 (aprilie – iunie 2009), p. 23.

47 In a hospice the patients do not go to be cured, but to die. Many go there and do not have any expectations to ever leave the place. But, as long as they are in there, they expect to receive comfort for their physical pains and attention for their emotional and spiritual needs.

48 Cristian Delcea, „21 de zile,” *Adevărul*, 22 februarie 2012, https://adevarul.ro/news/societate/21-zile-1_50ae64427c42d5a6639c4d46/index.html. – September 20th, 2021.

49 David Brand, „Cicely Saunders: Dying with Dignity,” *Time*, 5 septembrie 1988, <http://content.time.com/time/subscriber/article/0,33009,968345,00.html>. – September 20th, 2021.

As long as the factors that put euthanasia under the spotlight prevail, as long as life struggles with death and pain, euthanasia is and will become the current topic. However, until then, it will shake moral practice, religious systems, philosophy, practical moral thinking, and human conscience⁵⁰, the solution of the problem depends, as a last resort, on the concept of the right to live and the interpretation of the obligation to respect and protect human dignity.

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