



PASSIVE EUTHANASIA: A RIGHT CHOICE?

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ABSTRACT

The Greek terms "Eu" and "Thanatos," which combined express the idea of a "peaceful or merciful death," are the source of the English word "euthanasia." The deliberate choice to withhold artificial life-supporting procedures, such as ventilators or feeding tubes, is known as passive euthanasia. Terminally ill patients are accelerated through passive euthanasia to relieve them of pain and suffering. In the 17th century, Francis Bacon referred to a happy and painless death, as doctors must alleviate the suffering of patients. In a 2003 debate, the European Association of Palliative Care's (EPAC) Ethics Task Force emphasized that purposefully terminating a patient's life without their agreement does not constitute euthanasia. Hence, consent is required in passive euthanasia, i.e., it should be voluntary only. The "P. Rathinam VS Union of India" case, in which the Supreme Court held that the right to life as stated in Article 21 includes the freedom to choose one's own death, served as the catalyst for the debate over passive euthanasia. The right to refuse medical assistance was recognized in the "Gina Kaur VS State of Punjab" case in 1996. The Court did not, however, specifically decide whether euthanasia was morally and legally acceptable.

On March 9, 2018, the Supreme Court of India authorized the practice of passive euthanasia, allowing the withdrawal of life support from patients in a permanent vegetative state (PVS) to be legally recognized. The Historic Judgment was passed on the Aruna Shanbaug Case, which was a landmark case on passive euthanasia in India.

In this article, because passive euthanasia is the right choice, different arguments are placed in favor of the topic. Historically, passive euthanasia tends to focus on many concerns. Many questions arise: Does passive euthanasia violate a patient's right to die? Is seeing our loved one suffering from pain ethical? What is better for a terminally ill person suffering from pain or a peaceful death?

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INTRODUCTION

Mankind has always struggled to deal with different kinds of illnesses that have existed for so long. Sometimes there are situations where living becomes more problematic and the victim or a close one contemplates the end of the patient's life. Euthanasia is the process of taking a patient's life in order to stop their agony and suffering." In order to act in the best interest of the person who is approaching death, passive euthanasia does not provide mechanical life support, such as ventilators or feeding tubes. It also implies ending the life of another person.

Euthanasia can also be termed as **Mercy Killing** or **Assisted Suicide**, as it is undertaken with the aid of another person. It is also known as "physician-assisted suicide" (PAS). Passive euthanasia is performed on patients who are experiencing severe pain due to terminal illness, as death seems to be much better than suffering.

In modern society, there are so many controversies around passive euthanasia. Passive euthanasia can save the patient from suffering a poor quality of life, as terminal illness can make life vulnerable and painful. At this point, the life of the patient becomes weak, they lose their dignity, and life becomes pointless. Every person has the right to choose how they want to live and die. They have a full right to avoid a painful life and can opt for death instead. Terminally ill diseases are not all cost-efficient as they have expensive medical treatments and medication. Also, understaffed medical facilities are provided as patients' survival chances are lower. The right to refuse medical treatment gives way to passive euthanasia as a patient who is terminally ill can't be cured through severe medications. For example, organ failure, Alzheimer's disease, brain tumors, blindness, and deafness. It is expensive to keep a person alive when there is no clear cause for their illness. Such patients lose their morale and thus think of giving up. Passive Euthanasia would release precious resources to treat people who could live. It encourages patients to consider organ donation. Euthanasia not only gives the "right to die" but also the "right to life" of patients who require organs and thus can save many lives. Seeing our loved ones suffering from such pain and trauma, even when the proper medications are administered, is tough for family members. The psychological pain for both patients and their families is horrifying.

In a survey conducted by the Society of Right to Die with Dignity in Bombay, 95% of the 200 doctors participating expressed that they had contemplated and held concerns regarding the subject. According to the survey results, 78% of respondents agreed that a patient should have the freedom to make decisions in cases of terminal illness, 74% supported extending artificial life support, 65% would choose to stop using life support systems, 41% emphasized the value

of respecting human life, and 31% expressed some reservations. The Aruna Shanbaugh case represents a crucial turning point for passive euthanasia.

1) Aruna Shambaugh (born June 1, 1948; died May 5, 2015):

At Mumbai's King Edward Memorial Hospital, Aruna Shambaugh worked as a nurse. She was attacked by a ward kid named Valmiki in 1973 as she was changing clothes in the hospital basement. He strangled her neck with a dog chain, which made her blind, deaf, and paralyzed as the oxygen supply was cut off. She suffered in a vegetative state for the next 42 years. On May 18, 2015, she died due to severe pneumonia. She was on ventilator support.

The Supreme Court's decision:

The withdrawal of life support from patients who are in a persistent vegetative state (PVS) is now permitted after the Supreme Court of India legalized passive euthanasia on March 9, 2018. The decision was made by the Aruna Shanbaugh case as she was in PVS until she died in 2015. This landmark decision established guidelines for the legalization of passive euthanasia in India. According to the standards, a close friend should be consulted in the event that parents, a spouse, immediate family, or parents must make the decision to halt treatment or end life support. The changes to passive euthanasia were triggered by the Aruna Shanbaugh case.

2) Anamika Misra:

A Kanpur woman wrote to the Prime Minister requesting passive euthanasia for her daughter, Anamika Misra, who had muscular dystrophy disease. Her father, Shashi Misra, who was 59, died due to the same disease. It is a genetic disorder that leads to the increase, weakening, and breakdown of skeletal muscle. She said the letter she wrote to the PM seeking help for financial assistance was assisted by 50,000 Rs.

3) Uttar Pradesh's Jeet Narayan:

In 2008, Jeet Narayan, a resident of Mirzapur, Uttar Pradesh, made an appeal for passive euthanasia on behalf of his four sons: Durgesh (22), Sarvesh (18), Brijesh (13), and Sushil (10). All of them were completely immobilized and paralyzed from the neck down. He corresponded with the President of India, but unfortunately, his request was eventually turned down.

4) Dennis Kumar, Kanyakumari:

In 2008, Dennis Kumar, a resident of Kanyakumari district, made a plea to the district collector, requesting permission for passive euthanasia for his infant son who was afflicted by an

unidentifiable illness. He sought this due to his inability to afford the medical treatment expenses. Regrettably, the court turned down his request.

WORLDWIDE PASSIVE EUTHANASIA SCENARIO

Passive euthanasia is currently legal in six jurisdictions:

1. **The Netherlands:** On April 1, 2001, passive euthanasia became legal. 1. After receiving every form of palliative care that is available, a person may pass away with dignity under the Ministry of Public Health and support for well-being.
2. **Belgium:** On May 28th, 2012, passive euthanasia will be legalized. Belgium is among the five nations where doctors are permitted to carry out euthanasia at a patient's request, and it is one of the two countries, alongside the Netherlands, that allows this procedure for individuals with mental health issues.
3. **Luxembourg:** On March 19, 2009, the Passive Euthanasia Bill was adopted by the Chamber of Deputies. The practice of passive euthanasia was subsequently approved by Colombia's constitutional court on December 15, 2014.
4. **Canada: Passive Euthanasia** was legalized by the Parliament of Canada on June 17, 2016. This bill received considerable multiparty opposition from the Senate, but after that, they made different amendments that were accepted by the House of Commons, except one.
5. **Victoria and Western Australia:** Victoria was the first one to accept Passive Euthanasia in June 2019, and Western Australia passed the same on December 2.
6. **Spain:** On June 25th, 2021, passive euthanasia was legalized by the Cortes Generales. The final reading was approved by the Spanish parliament on March 18, 2021, making it a law. King George VI approved it on March 24, 2021. The law came into force on the 25th of June 2021, exactly 3 months after.

CONCLUSION

To conclude, passive euthanasia doesn't mean taking the life of the patient. The doctor should do everything humanly possible to save the patient's life. However, some suffering is not

reversible, and to reduce the pain, death becomes the last option. India has initiated a national debate and working law to safeguard it and prevent misuse of it.

The court has clarified that while the right to life does not inherently encompass the right to choose to die, there may exist an independent right to make such a choice. The landmark Supreme Court judgment has provided a major boost to passive euthanasia. Therefore, passive euthanasia is always the right choice. As such, it is better to die rather than to live in traumatic and painful conditions.