

Assisted dying and neutrality

Clare Gerada (1) indicates that medical bodies should take a neutral stance on the issue of assisted dying and should not be publicly opposed to or support any change in legislation that may allow assisted dying for terminally ill, mentally competent adults. At the heart of the case for neutrality is that the decriminalisation of assisted dying should be a matter for society as a whole to decide, using parliamentary processes. No particular group within it should have a disproportionate influence on this decision.

On the other side, individual healthcare professionals, as responsible citizens, are entitled, perhaps obliged, to express their views about the ethical and clinical case for a law allowing assisted dying for the terminally ill.

I would like to underline two clamorous and key – cases happened in UK and in Italy and described in their different aspects by Paquita De Zulueta and me (2). I'd invite you to read there all the described and analyzed aspects.

Debates about assisted dying are so different but so similar in different Countries revealing the different visions of what constitutes the Good Life and what it is to be human.

The increasing secularisation of British Society has not led so far to the legalisation of voluntary or involuntary euthanasia, despite the greater emphasis on individual autonomy. Conversely, in Italy, where the Church occupies a more influential position, the law enshrines the doctrine of self-determination, but in practice this is hard to implement.

In both cases some kind of legal compromise was reached: in Italy there was an acceptance that individual's prior wishes are determinative, even though arguably that person no longer exists, and in England a subjective quality of life assessment was made that permitted treatment to be discontinued in the full knowledge that death would follow. Both decisions aimed to reflect a compassionate and holistic view of what it means to be fully human. (3,4).

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References

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