



Euthanasia and our worldview

To the Editor: As a generation, we are ill-equipped to deal wisely with ethical issues such as euthanasia. Our culture has chosen a humanism that makes 'man the measure of all things' as our philosophy. We have held to that even though the philosophy has not been able to create a basis of meaning and values since René Descartes' famous quote, 'I think, therefore I am,' in the 16th century. We know that the project has foundered for this reason in the pessimism of postmodernism, with its many contradictions.

Francis Schaeffer^[1] points out that Jean-Paul Sartre (1905 - 1980) summed up the problem with his concept that a finite point is absurd if it has no infinite reference point. With respect to ethics and morals, Schaeffer states that 'if there is no absolute moral standard, then one cannot say in a final sense that anything is right or wrong. By absolute we mean that which always applies, that which provides a final or ultimate standard. There must be an absolute if there are to be morals, and there must be an absolute if there are to be real values. If there is no absolute beyond man's ideas, then there is no final appeal to judge between individuals and groups whose moral judgments conflict. We are merely left with conflicting opinions ... we need absolutes if our existence is to have meaning.'

We have arrived at an ethical absurdity. We live in the torrent of a deteriorating culture, and we have no rock to cling to. And so we keep developing further ethical absurdities. For example, we say a fetus has no rights, and can be aborted for trivial reasons (in some jurisdictions up to term), yet we award huge compensation to mothers whose babies are born with cerebral damage because of perceived poor care of the fetus.

With no clear ethical absolutes, we struggle for wisdom in deciding whether to abandon ethical standards that have served our civilisation well down the centuries, and we turn to science for clarity and authority. But if we do not acknowledge that integrity in scientific endeavour also requires ethical absolutes, we have an unreliable authority. Without ethical absolutes, especially in the social sciences, a huge amount of work is produced with results carefully slanted toward proving an opinion already held by the researcher, usually one which is currently politically correct. A similar lack of wisdom can be detected in the laws we enact.

Part of the humanist ideal is the concept that we humans are no more than highly evolved mammals. When we make that judgment, we largely deny our humanness. The concept of the sanctity of human life is thrown out, together with the concept that we are made in the image of God. An important consequence is that we make much of physical wellbeing, but are generally soft on the psychological consequences of our decisions, and do not consider spiritual consequences at all. Our decisions are largely pragmatic, with little recognition of long-term realities.

In the West, our generation's discussion around euthanasia is a good example of all this. We find ourselves trapped in discussions about the legal concepts of autonomous individuality and dignity, which we think can make ethically acceptable the killing of selected individuals. But in our reductionist thinking, we deny a major aspect of our built-in humanness, the reverence for the life of another. Thus we suppress the essential importance of the high levels of post-traumatic stress disorder which expresses the guilt and grief experienced by family members and healthcare providers involved in active euthanasia and assisted suicide. We pretend that there are no spiritual aspects of dying which are cardinaly important in managing that process. We deny the humanness of longing for eternal life, and the relevance of that in our decision-making.

We pay little attention to the slippery slope experienced by European nations, which have progressed from making euthanasia available only to those few suffering from terminal illnesses with uncontrollable distress, to making it available for the suicidally depressed and those simply weary of life. We do that rather than helping them to find meaning and direction. We even offer euthanasia to children. We are not alarmed that we are in danger of substituting euthanasia for caring.

We shrug our shoulders when medical aids offer incentives for going the assisted suicide route rather than the route of terminal care, to protect their bottom line.

We are not appalled by this utilitarian thinking, which makes it acceptable to offer euthanasia to people with illnesses such as motor neuron disease, so that we can reap their organs for reimplantation. We think that might make them feel useful.

It is salutary to consider that Nazi Germany began with the euthanasia of children with major congenital abnormalities, progressed to the mentally retarded and then the disabled before it got to genocide of the politically undesirable. But we are blind to the possibility that the political development of modern nations can easily go that way too.

We are losing our humanness – our reverence for the persons of others, especially the vulnerable. It really is essential that our nation does not join this process, but fiercely guards the sanctity of life and continues to oppose every attempt to add euthanasia to our practice of medicine.

JV Larsen

Retired Obstetrician/Gynaecologist

1. Schaeffer F. How Should We Then Live? Old Tappan, New Jersey: Fleming H Revell Co. 1976:145.

S Afr J Bioethics Law 2018;11(1):4. DOI:10.7196/SAJBL.2018.v11i1.637