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April 12, 2022

ENG1121

Word Count: 2,007

U2 Annotated Bibliography

Introduction

What would be the impact in America if we legalized euthanasia? That is the question I hope to find some answer to by creating this document. I grew interested in this subject when I stumbled upon the moral quandary of euthanasia, whether or not it is right to allow someone to end their own life. I can see where both sides to the argument concerning euthanasia come from and can see their points. When it comes to this debate, I do not know which side of the argument I am on. I can see how some people would argue how it is not moral to let patient continue to living if their pain and suffering has become unbearable. I can also understand how people are afraid of the slippery slope euthanasia can possibly cause if it is legalized. This bibliography is an attempt to educate myself about this topic and better understand the possible impact euthanasia can have, whether the impact be positive or negative. I expect to find information and statistics about euthanasia in places where it is legal, such as the Netherlands. I also expect to find information about safeguards, since they would help mitigate any negative impact. I would also expect to find some interviews with patients and how they would feel if it was legalized, since euthanasia is a topic concerning them most of all. I believe there would be some problems euthanasia would bring and there would need to be safeguards and a list of criteria which need to be fulfilled before administering euthanasia.

Source Entries

Source #1:

Battin, Margaret P., et al. "Legal Physician-Assisted Dying in Oregon and the Netherlands: Evidence Concerning the Impact on Patients in 'vulnerable' Groups." Journal of Medical Ethics, vol. 33, no. 10, BMJ Publishing Group Ltd and Institute of Medical Ethics, 2007, pp. 591–40, <https://doi.org/10.1136/jme.2007.022335>.

The document starts with addressing the question the author wishes to answer, "Would legalizing euthanasia make it so vulnerable patients would be targeted and pressured into accepting it?" The

author first presents the slippery slope argument and data from Oregon and the Netherlands, where euthanasia is legal. The author also presents the legal background to give context to euthanasia in Oregon and the Netherlands. The author analyzes the data and finds that there are not many groups where there is a heightened risk of patients dying. The author ultimately concludes that there is no evidence that legalizing euthanasia will have a disproportionate impact on patients and vulnerable groups.

I am inclined to agree with the text, considering it presented a sound argument and supported it with evidence. I do not have any questions. Some information you might need to study in order to better understand this article is information concerning rates of death in other categories besides euthanasia, to get a better picture of what the other is talking about. I would ask the author if there is any way to help the people within the aids group concerning the heightened risk. This document tells me that there is most likely no great and disastrous impact legalizing euthanasia can have and it is most likely safe to do so.

I like the author's writing style and the way he organizes information. The author's intended audience are people who are concerned about a potential slippery slope with legalizing euthanasia. The purpose is to dissuade the notion euthanasia would have a large and devastating impact on our country by looking at the situation concerning euthanasia from other countries. The genre is effective and the choice makes sense, since the author is able to structure the document in a way where it is easy to understand. The author is credible, since she is a professor and medical ethicist and the document uses facts and data to support its claims.

” Uninsured people: no evidence of heightened risk

Three Oregon patients (1%) did not have documented health insurance, and in four cases, insurance status was unknown. In contrast, 16.9% of non-elderly adults in Oregon were uninsured (persons 65 and older are insured by Medicare). In the Netherlands, virtually all patients are covered by mandated nationwide health insurance.”

Source #2:

Benrubi, Guy I. “Euthanasia — The Need for Procedural Safeguards.” *The New England Journal of Medicine*, vol. 326, no. 3, Massachusetts Medical Society, 1992, pp. 197–99, <https://doi.org/10.1056/NEJM199201163260311>.

This article discusses the necessary safeguards for Euthanasia if it were to be legalized. The author starts by delving into both sides of the argument and showing why people would argue for each side. The author then moves on to discuss who would be suitable for the task of helping patients with the process of Euthanasia. The author explains in depth why certain physicians would be required. The author ends the article by stating how he believes it would be unethical to allow patients to continue suffering but also stating there needs to be safeguards in order to help the patient and protect the integrity of medical professions.

I agree with the text. I believe there needs to be several experts to deal with such cases, with an anesthesiologist ensuring it is painless and the psychiatrists ensuring the patient is of sound mind. I am not confused on anything. The article was concise and informative. Though, I do wonder what special requirements anesthesiologists would need to qualify to administer this treatment. I would probably need to look up studies about what anesthesiologists must do to enter their professions. I would thank the author for writing such an informative piece and help enlighten me. This document tells me that dealing with the repercussions of Euthanasia would be a long process, but it is possible to mitigate the repercussions of euthanasia and stop any abuse of it.

I like the author's writing style, though I do not think I have encountered a writing style I truly dislike. The author's intended audience are other physicians and higher ups in the government. The purpose for writing the article is to explain what would be needed to make euthanasia a safe process. The genre is effective because the author is putting this information in an article which is public and available for any other person in a medical profession to see. It makes sense since he wants other people to consider the safeguards. I think this is a credible author and document since the author is a doctor who graduated from University of Florida Health Science Center.

“The psychiatrist would be needed to conduct a complete evaluation of the patient, to try to determine whether the request for euthanasia was made from a relatively rational standpoint, as opposed to a state of pathologic depression.”

Source #3:

d'Ailly, & Suzuki, D. (1989). Nature of things. Euthanasia. Filmmakers Library.

The video explores the moral, legal, and ethical implications of euthanasia. David Suzuki, the narrator, starts with how medicine and medical technology have advanced and asks about when should patients be allowed to end their lives. Suzuki interview people from both sides of the argument. Some people share their own personal experiences and state how keeping people alive only to suffer for a few months then die is wrong and some physicians believe it is the responsibility of the doctors to make sure a patient's death is comfortable. Suzuki interviews people from Holland, a country where euthanasia is more or less legal. Suzuki discusses the legal paperwork which must be done, and how that causes doctors to falsify information. On the other side of the argument, people argue patients who request euthanasia do it more out of loneliness and depression than anything else and euthanasia would be used to eliminate marginal members in our society. Suzuki notes how death is inevitable, modern technology has allowed the postponement of death and the issues covered in the video should be discussed, otherwise the advancement of technology will keep us from accepting our own deaths.

I do not believe the video is something to agree or disagree with, since it is more of an honest look into the situation and the various opinions concerning the topic of euthanasia. I do not have any questions about the video. A person might need to research more about the legal background

of euthanasia in other countries besides the United States. If I could say anything to the creators of the video, I would compliment the creators on creating such a video, since it is very informative. This document tells me more people would be released from their suffering, since 300,000 in America are kept alive in a comatose state even though they may be suffering, and there would be a huge amount of legal work for people to sort through in order to make this system work. It also implies how more people would get some organs and body parts they may need from patients who expressed the desire to no longer live.

I like the structure of the video and the direction the creators took the video. The creator's intended audience are people who wish to learn more about euthanasia and wants to join the discussion about euthanasia. The purpose of this video is to inform the viewers about euthanasia. The genre is effective, since we can see the personal reactions and opinions of several people who are involved. The genre makes sense for what the creators want to do because it allows viewers to see multiple perspective and draw their own conclusions. The video is a credible source since David Suzuki is a known Canadian academic and science broadcaster. The video also shows the interviews of multiple people, who are doctors and experts on this topic

"I think that's very real possibility that if euthanasia does come to be accepted outside of the law and that concerned me very much that in fact we might be making decisions for people who might not be able to make decisions for themselves and we've seen that already in history, we've seen it in the Nazi, ah, era."

Conclusion

I have found, through my research, that euthanasia, while being a difficult and long process to do safely, is something which can be implemented into our system. There are a few people who have heightened risk of being administered euthanasia, but many other vulnerable groups have seen no heightened risk. Countries where euthanasia has been legalized have not shown signs of euthanasia being majorly abused. People have proposed several measures to ensure euthanasia is administered painlessly and with the patient's explicit consent. There are also a large amount of people who would benefit from being administered euthanasia because there are around 300,000 people who doctors keep alive for several months before dying. I have also seen the various reasons why people may advocate or oppose euthanasia being legalized. There is a large amount of legal paperwork which must be done with euthanasia and there is a long process where police may have to be involved in. I am rather surprised at the low amount of risk when it comes to administering euthanasia to vulnerable groups. I would have thought there would have been more risks, but it seems I was wrong. What I learned is important because it tells me the slippery slope fear is unnecessary with what we have seen in statistics in the Netherlands. There are also many proposed safety measures when it comes to euthanasia, which means there is less of a risk people would be able to abuse it. I think physicians and government officials should know this information because it can give more clarity on this situation and help them in their decision of whether or not to legalize euthanasia. There seems to be more and more of a demand to make

ethanasia legal in the public. People in the government and people working in the medical field probably have their own doubts and fears concerning this topic and they should know about this information.