Palliative Care: Ethical Solution in Accordance with Human Dignity at the End of Life

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Opinion

The Spanish Parliament has recently approved a bill to regulate and decriminalize euthanasia, and to convert it into a provision in the portfolio of common services of the National Health System. Many Spanish doctors are against this proposed law for two reasons:

i. Consider that euthanasia is not a medical issue, specifically, the president of the Spanish Medical Association says that euthanasia is a practice contrary to the medical profession;

ii. Insist, for example, the president of Palliative Care in Spain, in the social emergency not so much in the approval of a Law on Euthanasia, as in the approval of a National Law on Palliative Care. Indeed, from medical sectors it is affirmed that what Spain needs is a clear improvement, especially in specific resources, of palliative care, because thousands of people die with pain because they do not have access to receive them.

In this sense, the World Medical Association, in statements made on October 27, 2018, opposes assisted suicide and euthanasia reiterating its position to consider that euthanasia, that is, the deliberate act of ending the life of a patient, even if by his own will or at the request of his relatives, is contrary to ethics.

On the other hand, it is necessary to warn that to die and the illness are part of the human nature and for that reason, death has to happen in a natural way. Specifically, accepting the latter assumes that we should prepare for other people's death, but also, for ours. Moreover, if one wanted to “avoid” death as a natural fact, one would cease to be a person; and in euthanasia, unfortunately, this conception underlies. This option is a misunderstanding of the human nature and dignity at the end of life.

Death places us in the reality of what we are constitutively: limited, finite, weak, fragile beings. Illness and death are obvious signs of this vulnerability. In this sense, it is noticed that for every living being it is as natural to be born as to die. So too, suffering and pain are part of human life. The human being wants to live without suffering and pain. It is said that one wants to legalize euthanasia in order to avoid prolonging suffering; But is euthanasia the only way to avoid it? Certainly, with the euthanasia the suffering disappears, but at the price of eliminating also the one who suffers. We must eliminate pain and suffering, but not the person who suffers, and this is one of the goals of palliative care. What patients ask is to be valued, to be safe from the uncertainty of death, to be treated and taken care of professionally.

For this, the path can only go hand in hand with the medical service of palliative care that deals in an integral way with all the needs of the terminally ill patient, and not with euthanasia. Having said that, euthanasia also entails a great economic “saving”. On the contrary, caring for or caring for people with advanced non-oncological chronic diseases or a severely disabled person entails a considerable financial effort for the Public Health System. For all these reasons, palliative care immerses us in the anthropological reflection of our own limitation and fragility, since respect for human life and palliative care dignify the process of dying. These attentions are not aimed at the death of the sick, but take care of their life as it comes to an end, relieving their suffering and providing the means for a tolerable death. To palliate is to mitigate suffering, reaffirming the importance of life, but accepting that death is a human reality.

In others words, palliative care is the best way to help the sick person die, not “helping” him or her to end it. Palliative medicine does not intend to cause death or delay it, but rather constitutes a commitment to care that is compatible with dying with dignity in a humanized context. The option for palliative care is precisely what the doctor can ethically do as a doctor. Indeed, palliative care represents the only morally acceptable alternative to the natural end of human beings. Definitely, palliative care should be a right of all patients within the Public Health System with which to alleviate suffering and avoid pain. Consequently, the priority is that they reach everyone and that they are uniform and of quality.
Providing euthanasia when universal access to palliative care is not resolved is irresponsible, negligent and contrary to social justice. Why Spanish rulers are eager to offer euthanasia before palliative care? It is necessary, therefore, to approve a law that guarantees comprehensive attention to the needs of patients at the end of life and that eliminates their suffering, not a law to end them.