

Review

The sanctity of human life in the twenty first century: the challenge of euthanasia and assisted suicide

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Human life is sacred. The heartless and heinous destruction of human life in the name of euthanasia and assisted suicide is a great threat to the sanctity of human life which great books of religions enjoin. This paper seeks to examine from the Christian point of view, practice of euthanasia and assisted suicide which has become a great challenge to the sanctity of human life. It recommends among others that euthanasia and assisted suicide should be stopped because human life is valuable irrespective of how debilitated, deformed or degraded in human sight such life might look at a particular time.

Keyword: Euthanasia, Assisted Suicide, Sanctity, Human Life

INTRODUCTION

The sanctity of human life today has been mocked and messed up by biomedical scientists and researchers due to their quest for something new to solve a problem. This problem of messing the sanctity of human life, in some cases, arose as a result of free inquiry, which permits scientists to carry out scientific inquiry into all spheres of human life. They argue that "science would not have achieved so much for the comfort and utility of man", if not for free inquiry (Ozumba, 2003: 208). Stephen Stich advocates that free inquiry should not be regarded as a freedom that has no control. He therefore stresses that the right to free inquiry should be qualified freedom, which must be moderated by government (Ozumba, 2003:208).

If medical research into human life is not controlled very extensively by the government, there shall soon be a production of Chimera - a Greek myth with part of the body as lion, part goat, and part dragon (Glenn 1). Soon, there shall be a production of what Stuart Newman calls "humanzee" part human and part Chimpanzee (Newman, 1198:36). Joseph Fletcher has advocated for what he calls "Parahumans" (Fletcher, 1998:154-166) showing to what extent human life has been degraded.

In this paper, the attention of this researcher is focused on such issues as euthanasia and assisted suicide.

Writing on *The Right to Live; The Right to Die*, Koop centres on the sanctity of human life. Being a Christian, this great scholar who is regarded as one of United States' most prominent surgeons argues vehemently against euthanasia. Arguing from different perspectives, such as medical, personal, social and theological, he stresses that euthanasia is an evil meant to destroy the future of any nation that practices it. He further argues that there is no good reason for any medical doctor (or medical practitioner) to perform euthanasia. Citing Jean Rostam in his explanation for human sanctity he writes thus:

For my part I believe that there is no life so degraded, debased, deteriorated or impoverished that it does not deserve respect and is not worth defending with zeal and conviction... Above all I believe that a terrible precedent would be established if we agreed that a life could be allowed to end because it is not worth preserving... After eliminating what was no longer human, the next step would be to eliminate what was not sufficiently human, and finally nothing would be spared except what fitted a certain ideal concept of humanity (Koop, 1976:9).

The above quotation views human life as sacred and demands its preservation irrespective of how worthless it may look like in the eyes of people. Rostam is demanding the rationale in eliminating a particular human life and argues that it will mean that soon men will start to determine what is sufficiently human and what is not which will ultimately lead to eliminating what human life is not sufficiently human.

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John Harris, on the other hand, approaches human life from purely philosophical point of view. Writing in his work *The Value of Life*, Harris explores the principal ethical dilemmas that arise in the contemporary medical practice and research. Challenging the basic ideas of abortion, sanctity of human life, euthanasia and the value of life, Harris argue that the most difficult decisions could be answered when one considers the beginning and end of life. He explains that the foetus is not as valuable as an adult human being. He further explains that,

What we need to know is not when life begins, but rather when life begins to matter morally. And the correlated question is not 'when does life end'? But rather 'when does life cease to matter morally'? In short, when does life begin to have special value we believe attaches to human life and when does it cease to have that value?

By this statement, Harris has shifted from the issue of the sanctity of human life to the value of moral life. To him the foetus is not morally valuable and so could be eliminated by its mother. He also sees the terminally sick person as one who has lost the moral life that matters most and so should not be allowed to continue to be a waste pipe draining the resources of those whom he calls "the valuable ones".

Euthanasia and Assisted Suicide

William Morris, writing in *The American Heritage Dictionary of the English Language*, defines euthanasia as "the action of killing an individual for reasons considered to be merciful". The Council on Ethical and Judicial Affairs, a body set up by the American Medical Association for determining the legal and ethical issues in biomedical issues defines euthanasia as:

...the act of bringing about the death of a hopelessly ill and suffering person in a relatively quick and painless way for reasons of mercy.... The term euthanasia will signify the medical administration of a lethal agent to a patient's intolerable and incurable suffering.

In his work "Voluntary Active Euthanasia for the Terminally Ill and the Constitutional Right to Privacy", Wolhandler sees euthanasia as "the act or practice of painlessly putting to death persons suffering from incurable conditions of diseases". Adams, on the other hand, explains that euthanasia involves the refusal of "unwanted medical treatment or to have ongoing care withdrawn even though the patient will die if treatment is terminated". Dzurgba on his part sees euthanasia as "the killing of the sick, badly injured or very old in order to stop them from suffering. Etymologically, the word euthanasia is derived from the Greek words *eu*, "good", and *thanatos*, "death". Literally euthanasia can be interpreted as "good death".

A careful look at the definitions given above will reveal that the issue of euthanasia is a problem. In considering Moris' definition, one will ask, what mercy is in killing another individual? What joy does one derive in helping or assisting somebody to commit suicide? This is why Beauchamp and Davidson, 1974 believe that the issue of definition of euthanasia is so critical in determining the ethical issues there in. They explain that this is to distinguish between what is euthanasia and other issues such as abortion, suicide and murder or manslaughter. Beauchamp and Davidson explore so many definitions and go further to present a critique of each of them. One of such definitions presented by Beauchamp and Davidson is the one by Glanville Williams who sees euthanasia as either an assisted suicide or a killing by another for humanitarian reasons and by merciful means, generally with the consent of the person killed, in which case it is referred to specifically as voluntary euthanasia. Ozumba looks at Williams' definition and asks who determines what merciful means? He argues that a talk about good death, except in the Christian sense of dying a righteous man, may sound paradoxical. This is because "all other deaths are bad death because it ends one in hell-fire in eternity".

Writing on "Dying Well: Death and Life in the 90s", Gary E. Crum sees the ethical issue about abortion simpler than the complex issue of euthanasia. To Crum, euthanasia could be accepted in critical situation. He says,

As for pain control that might end my life a little sooner, or which might give me a less than complete consciousness in order to avoid great suffering, I would accept that based on the verse, 'Give strong drink unto him that is ready to perish, and wine unto those that be of heavy heart' (Proverbs 3:6 KJV).

By this statement, this Baptist Christian believes that euthanasia could be accepted under a certain condition especially where the terminally sick himself seek death. This is also the view Harris holds when he explains that "to deny people the power of choice over their own destiny is to treat them as incompetent to run their lives and is thus to make their lives subordinate to our purposes for their lives rather than treat their lives as their own".

Reacting to those Christians who believe euthanasia should be encouraged in extreme cases, Simon and Christopher Danes present three arguments to show the undesirability of euthanasia for Christians and non-Christians. Firstly, they argue that "it would work against the relationship of trust between a doctor and a patient". By this argument, Simon and Christopher Danes are of the view that it would be very unfair for doctors whose vocation is to save life to become a party to the death of the patient whether directly or indirectly. Secondly, it would be difficult to determine "whether a legal document

signed by a patient was really what the patient wanted". They stress that the patient might have changed his/her mind or was put under pressure by relatives who were not caring for him. Finally "it could be the thin edge of the wedge". This is a situation where a young man or woman sees the aged parent as a burden and connives with the medical doctor to end the life of the person. They conclude that "people have a duty to help others when they suffer, but not at any price. Killing someone who is ill is still murder, and it is 'playing God' to say who may live and who shall die".

Furthermore, there are other questions begging for answers in reference to euthanasia. First, who is to decide when an individual should die and why? Secondly, who is to decide whether a death is good or bad? What mercy is there in withdrawing care for an aged man or woman or terminally ill person to help him die? Are there not persons who physicians have given death sentence that have received miracles and are alive today? The major problem with euthanasia is that people have devalued human life so that it is now an acceptable thing that one's right to privacy includes his right to die when he chooses to, either through euthanasia or assisted suicide.

Classification of Euthanasia

Euthanasia has been classified into voluntary/involuntary and active/passive euthanasia.

Voluntary Euthanasia

LeBaron describes voluntary euthanasia as a kind of death, which is performed by another with the consent, may be in writing as in the case of a living will or advance directive. Council on Ethical and Judicial Affairs (CEJA) sees voluntary euthanasia as that which is provided to a competent person on his or her informed request. BBC writing on "Voluntary and Involuntary Euthanasia" defines voluntary euthanasia as a case where the patient wants to die and says so. He/she refuses burdensome medical treatment or demands that medical treatment be stopped, or life support machines be switched off. This individual may refuse to eat, or simply decides to die (1). Uduigwomen (2003) explains that voluntary euthanasia includes instructing another to act in accordance with his wishes. An example can be, when a person instructs his family not to permit the use of artificial life-supporting system, if he should become unconscious, or suffers brain damage and being unable to speak for himself or requests that he should be given a lethal injection, in the event that he suffers third degree burns over most part of his body. Thus, in voluntary euthanasia, the one who is to die consents to die.

Some scholars who support voluntary euthanasia believe that each person has the right to control his or her body and life and so should be able to determine at what time, in what way and by whose hand he or she will die. This idea stems from their belief that human beings should be as free as possible and that unnecessary restraints on human rights are a bad thing. On the other hand, the Christian scholars, who believe in inspiration of the scriptures, the sovereignty of God over his creation, and the sanctity of human life, disagree because they believe that the right to decide when a person dies belongs to God.

Involuntary Euthanasia

LeBaron sees this kind of euthanasia as "death performed by another without the consent of the person being killed". CEJA on their part defines it as "euthanasia performed without a competent person's consent" (CEJA, 1992:2230). Uduigwomen explains that in involuntary euthanasia, the one who is to die does not take the decision about death. The decision may be taken by his family, his friends or the physician himself". Proponents of involuntary euthanasia argue that in cases where one suffers from brain damage or serious brain hemorrhage and there is no hope of the person recovering, it may be necessary that another person makes an informed consent on his behalf. Arguing in favour of involuntary euthanasia, Immanuel Kant has argued that when someone is losing his previous dignity by suffering and sickness, we help him by death. On the other hand, Phillipa Foot has argued that "the application of involuntary euthanasia is never permissible because no one has the right to interfere with another's will in taking his life, without his permission, actual or perhaps assumed" (Uduigwomen 2003)

Passive Euthanasia

Gifford says "passive euthanasia involves allowing a patient to die by removing [him] from artificial life support systems such as respirators and feeding tubes or simply discontinuing medical treatments necessary to sustain life". This type of euthanasia is popularly called 'letting die'. In passive euthanasia or letting die the doctor is, not directly responsible or involved in terminating the life of the person, though in today's world, one may sue the doctor for negligence. The doctor may only remove the support system, which has been sustaining the patient whose life is ebbing and hopeless (Ozumba, 2003). Adams argued that passive euthanasia can be termed "the right to die" (Adams, 1992:2021-2022)

Active Euthanasia

In contrast with passive euthanasia, active euthanasia involves positive steps to end the life of a patient, typically by lethal injection that is capable of causing the patient to die (Dzurgba, 2005). This means that the physician here performs the immediate life ending action such as administering a lethal injection.

Some have seen a distinction between passive and active euthanasia believing that it is acceptable to withhold treatment and allow a patient who is really to die even if the treatment were to continue, to die. They argue that it is never acceptable to kill a patient by a deliberate act.

Others have seen no difference at all between passive and active euthanasia claiming that stopping treatment or removing the life support machine is a deliberate act. This group believes that switching off a respirator requires someone to carry out the action of throwing the switch. If the patient dies as a result of the doctor switching off the respirator then although the patient dies from the debilitating sickness, it is also true that the immediate cause of their death is the switching off of the breathing machine. BBC on "Active and Passive Euthanasia" explains that,

In active euthanasia the doctor takes an action with the intention that it will cause the patient's death. In passive euthanasia the doctor lets the patient die. When a doctor lets someone die, they carry out an action with the intention that it will cause the patient's death, so there is no real difference between passive and active euthanasia, since both have the same result: the death of the patient on humanitarian grounds, thus the act of removing life-support is just as much an act of killing as giving a lethal injection.

Assisted Suicide

This occurs when a physician provides aid to a patient so they can commit suicide. CEJA explains that the difference between euthanasia and assisted suicide is in the degree of the physician's participation. While euthanasia has to do with the physician using lethal injection to end a patient's life, "assisted suicide occurs when a physician facilitates a patient's death by providing the necessary means and or information to enable the patient to perform the life-ending act (e.g. the physician provides sleeping pills and information about the lethal dose, while aware that the patient may commit suicide". The major difference therefore lies in the behaviour of the physician.

Arguments in favour of Euthanasia

The first reason proponent of euthanasia present is that an advanced terminal illness is causing unbearable suffering to the individual. So the person has the right to die by seeking to end his life early. To this group when one no longer bears his suffering, especially in the case of a debilitating illness or terminally ill person, that individual can chose to die painlessly by asking for lethal injection.

Another reason advanced by these proponents of euthanasia is that when a grave physical handicap exists that is so restricting that the individual cannot, even after due care, counseling, and re-training, tolerate such a limited existence, in such a case where one's privacy is no longer respected due to the illness, the person can demand euthanasia.

The third reason is that of the right to die. Many people think that each person has the right to control his or her body and life. To this group every body has the right to determine issues that are related to his life and death. This is because human beings are free moral agents and are independent biological entities with the right to take and carry out decisions about themselves thereby providing the greater good of society. Their firm belief is that death is the end of every human being and nothing else after death.

Others have argued from the point of scarce medical resources. They explain that it is rather absurd and immoral to spend scarce medical resources on one who will die. They therefore argue that instead of spending on one who will eventually die, it is better to channel such resources to the living and those who will live. One question we may ask here is how is, one sure that the one who is well and healthy today may not die tomorrow and how is another sure that the one who is sick today cannot receive healing tomorrow miraculously?

Arguments against Euthanasia

Having presented some arguments by proponents of euthanasia, we also argue against this practice. Firstly, from a religious point of view, euthanasia is one of man's attempts to intrude into the authority and sovereignty of God. This is because it is only God who has the right to decide when a person should die. Koop (1976:88), in corroboration with this view, states that "although death seems imminent to a physician and although he knows it is impossible to turn it away with the armamentarium at his disposal, death can never be exactly predicted as to time". What this means is that death has remained a

mystery and something that is beyond humans to really understand in full. This is why no one should under any guise, kill any body or help anybody to die in the name of mercy.

Secondly, whatever right one has is limited by his obligations. The decision to die by euthanasia affects other people such as the family, friends, healthcare professionals and the community at large. Therefore, if one must take his life through euthanasia or assisted suicide, he/she should make sure he/she balances the consequence for them (guilt, grief and anger) against his/her rights.

Another important fact against euthanasia is the sanctity of human life. Human life is sacred and sacrosanct and has great value irrespective of the threat of sickness or handicap. Human life is expensive in the sight of God and in the constitution of many states. Therefore killing through euthanasia and assisted suicide devalues human life. It must therefore be made known that "death is the opposite of life, but the process of dying is part of life; dying is one of the most important events in human life" and so should not be entered into carelessly (BBC, "Arguments in Favour of Euthanasia").

Ozumba (2003) argues further that euthanasia is hedonistic in its approach to life. Life is not all pleasurable but a mixture of pain and pleasure. We know that pain and suffering are not pleasurable to the human body so that one may wish to die, just like Job did, but when the situation changed he became happier.

Euthanasia also exalts the science of medicine at the expense of divine will and purpose. Euthanasia shows a pessimistic attitude to life causing its culprit to suffer premature closure. How is the person sure that there cannot be an overturn of the diagnosis next hour or that the cure cannot be invented next day (Ozumba, 2003). Even if there is right to die, that does not mean that doctors, who are supposed to "do no harm", have a duty to kill. So no doctor should allow himself to be forced to help the patient who wants euthanasia.

A Careful study of euthanasia has helped us to discover that secular humanists founded the principles on which the view of euthanasia today on human life is based. They do not believe in any creator and so man was not created but evolved. To them, there are no God-given values and so man determines what his right should be. The Judeo-Christian tradition, on the other hand, believes that God created the universe and man is a created being. They believe in God-given values and so man discovers the right and wrong. It is the secular humanist worldview that has permeated the advanced medical profession causing euthanasia to become an issue. We therefore state that euthanasia of all kinds is murder, suicide, homicide. It is therefore, indeed immoral for any body to indulge in any form of it. This position is based on the following reasons:

1. Euthanasia destroys societal respect for life. Doerflinger (1989) and Koop (1976) in their separate works have argued that the society becomes desensitized toward death to the point where life is no longer valuable. Euthanasia, in the view of this researcher, serves to degrade humanity and leads to a variety of social ills. Human life will be devalued and violent crimes and murder will become a daily occurrence.

2. Euthanasia is against the sanctity of human life. Human life is sacred before God because man was made in the image of God (Genesis 1:27). It is therefore wrong to kill any human being for any reason except when found guilty in a law court of an offense that demands capital punishment. It is wrong to be associated with any plot, agreement or arrangement to directly or indirectly, under any cover (euthanasia or mercy killing) take any body's life. God cannot count him guiltless who kills another man. It is written "whoever sheds the blood of man, by man shall his blood be shed; for in the image of God has God made man" (Genesis. 9:6 NIV).

3. Euthanasia is a suicide or murder. The scriptures have emphatically proclaimed, "Thou shall not kill" (Exodus 20:13 KJV). When one decides to take his life, he is simply rejecting God's sovereignty over his life and also attacking the sanctity of human life. Whether it is voluntary or involuntary, active or passive euthanasia or assisted suicide; human life is sacred and should not be taken by any body under any guise.

4. It is not merciful to kill a sufferer. The Scripture in 2 Samuel 1: 1-16 narrates the story of an Amalekite soldier who claimed to have killed Saul to prevent him from dying a shameful death in the hands of the Philistines army. He expected to receive honour and promotion from David for "mercifully killing" King Saul, instead David killed him for killing the LORD's anointed. Killing a deformed infant or a suffering adult or one at the throes of death does not avoid human misery; it rather inflicts the misery of death on the person. On the other hand, if euthanasia were meant to avoid suffering, it is not worth it that the sufferer should be killed to avoid or alleviate his suffering. Euthanasia is wrong from all ramifications and is in contrast with everyone's natural indignation to continue living. That one chooses to die as a result of frustration, ignorance, and a temporary feeling of hopelessness does not necessarily mean that one should agree to kill him. What will the killer achieve by killing him or her? Who says that the medical doctor who gives the lethal injection is merciful towards the sufferer? Are there not so many cases where medical doctors go into euthanasia simply to renegade his responsibility of caring and treating his patient?

The Scripture has the story of Elijah's frustration after receiving the threat to his life from Queen Jezebel. Elijah ran for his life and demanded, "I have had enough,

LORD.... Take my life; I am no better than my ancestors. Then he lies down under the tree and fell asleep. All at once an angel touched him and said, 'Get up and eat'" (1 Kings 19:1-9 NIV). In that period of frustration that Elijah asked God to kill him, why did God not kill him since euthanasia demands that anybody in pains or sorrow or frustration and demands for death should be killed? Job in the same way had a debilitating sickness that would have killed him. He got to the point of frustration that he even wished death. Even his wife told him that his life had no value anymore so he should terminate it by simply cursing God. But Job would not do that and the Bible records that the later part of Job's life were better than his beginning. This implies that one should not take his/her life because it may not yet be over with him/her.

5. Euthanasia cheapens the value of human life. Human life is so precious that the merciless act of euthanasia cheapens its value. Since it is based on secular humanistic ethics, which do not consider the value of human life but sees man like all other lower animals which one kills at will. We are of the view that no society can engage in the wholesale slaughter of innocent life, in the name of mercy, without paying a sobering price for it. Geisler argues that:

The value of life is significantly cheapened by such callous disregard for human beings. When we do not respect life before birth, it affects our attitude toward life after birth. When we do not respect the dying, it affects our attitude toward the living. Human life is a continuous and communal web. 'For none lives to himself alone' (Rom. 14:7). Hence, what affects one member of the race affects all.

CONCLUSION

In concluding this paper, one may ask concerning how a Christian will treat a brother or sister who is under life support but whose case, from all indications, will not get better but will end in death. In the first instance, no doctor, who knows that a patient's case will not get better, who gives any life support. But where such happens and the case is irreversible the decision to remove the life support should be by consensus of the pastor, doctor, lawyer and family. God should seriously be sought first to know his perfect will repeatedly in prayer for healing. The removal of the life support machine here is not euthanasia but a demonstration of faith in the Lord Jesus Christ for healing. And when the cause of death is medically irreversible and no divine intervention is forth coming, it is morally justified to stop unnatural efforts to prolong the process of dying. This means that the patient should be cared for with water and food. By this act it may be permissible to carefully take care of the dying providing all that he/she needs and allowing the natural cause of death to take its turn.

Though, we have a duty to prolong human life, and if medical or technical aids are available, they should be rightly utilized. However, the duty to preserve life should be differentiated from the obligation to prolong death. The Bible does not in any place command us to prolong the agony of death. One should understand that attempting to avoid the inevitability of death is in fact contrary to the principles of human mortality (Romans 5:12; Hebrews 9:27).

This paper therefore recommends as follows:

1. That human life whether inside the womb, debilitated by sickness, age or deformed, is valuable and so should not be killed in the name of research, euthanasia or assisted suicide.
2. That human life is sacred and so should be honoured and respected. God will not hold anyone guiltless who sheds human blood.
3. Human life has value. This value is not based on the quality of the life but on the sacredness of the life. This means that no one should judge the value of human life based on quality as Harris did, but on its sacredness being that man was created in the image of God.

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