

Letter to the Editor

Euthanasia

Dear Editor,

I read with interest the article on euthanasia published in a recent issue of *AIM*.¹ In that article, it is mentioned that termination of a brain-dead patient by a physician is a type of euthanasia. However, I have another point of view.

Euthanasia is “the act or practice of killing or permitting the death of hopelessly sick or injured individuals (as persons or domestic animals) in a relatively painless way for reasons of mercy.”

² One of the key words in the definition is “killing.” But, how can you kill someone who is already dead?

Intermingled with philosophy, science, religious beliefs and superstition, the concept of death is complex and controversial.³ The most universally-accepted definition of death has been provided by the Uniform Determination of Death Act (UDDA) which states that “an individual who has sustained either irreversible cessation of circulatory and respiratory functions, or irreversible cessation of all functions of the entire brain, including the brainstem is dead.”⁴ A patient is pronounced brain-dead when he or she irreversibly loses his or her brain (including the brainstem) function, hence, the definition of UDDA. To kill someone, no matter what the reason, you have to find him or her “alive.” And, killing a person (a potential organ donor) for improving quality of life or even saving another person (the recipient) is clearly a breach of ethical codes. Therefore, contrary to Dr. Nayernouri’s view, I believe that termination of a brain-dead patient should not be termed euthanasia.

Conflict of Interest: None

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2. “Euthanasia”. Merriam Webster online dictionary. Available from: URL: <http://www.merriam-webster.com/dictionary/euthanasia> (Accessed, February 1, 2011).
3. Delmonico FL. The concept of death and deceased organ donation. *Int J Org Transplant Med.* 2010; **1**: 15 – 20.
4. Uniform Determination of Death Act. 12 Uniform Laws Annotated 320 (1990 Supp).

Dear Editor,

We read with interest the Opinion of Dr. Nayernouri recently published in *AIM*.¹ Admittedly a clear concept of death is as am-

biguous as an accurate definition of life. However, the present consensus of the issue rests on decades of intensive debates regarding the constituent criteria of both “life” and “death.”²

The unequivocal point here is that what makes a human being alive, is the integrative whole of present or potentially restorable cognitive functions and a viable brain stem. When those conditions are unmet, discontinuation of life support cannot be equated with “euthanasia” since the most distinctive species-specific attributes are already lost, implying that aside from sanctity of the body, moral and legal issues pertain only to a dead individual.

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References

1. Nayernouri T. Euthanasia, terminal illness and quality of life. *Arch Iran Med.* 2011; **14**: 54 – 55.
2. Delmonico FL. The concept of death and deceased organ donation. *Int J Org Transplant Med.* 2010; **1**: 15 – 20.

The author's reply:

Drs. Habibzadeh, Malek-Hosseini and Vessal are quite correct to point out that the termination of life support systems in the case of brain-dead patients is not euthanasia.

I took great care in my ‘opinion’ article to distinguish between such cases and that of ‘voluntary euthanasia,’ the main purpose of my article. I defined such euthanasia as ‘physician assisted termination of life’ in the terminally ill who are *compos mentis* and ‘request’ their lives to be terminated due to incapacitating pain or disability.

My plea was for legalization of ‘voluntary euthanasia’. The termination of life support from ‘brain-dead’ patients is universally accepted by the medical profession and most religious advocates, despite vociferous opposition from ‘pro-life’ groups.

I only mentioned ‘involuntary euthanasia’ as it enters the definition of euthanasia in general but is not ‘voluntary euthanasia’ as defined in my article.

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