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Death with Dignity

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Overview of the Issue

I. Euthanasia is defined as a doctor intentionally killing a person through the administration of drugs, at that person’s voluntary and competent request.

II. Physician-assisted suicide is defined as a doctor intentionally helping a person commit suicide by providing drugs for self-administration, at that person’s voluntary and competent request.

III. Palliative care is defined as an approach that improves the quality of life of patients and their families facing the problems associated with life-threatening illness, through the prevention and relief of suffering by means of early identification and impeccable assessment and treatment of pain and other problems physical, psychosocial, and spiritual.

IV. The practice of euthanasia is an ethical dilemma. Many feel that the Hippocratic Oath obligates physicians to preserve life, and that Paliative care is the appropriate course of treatment for terminally ill patients.

V. Many laws draw out how the process for pharmacists to dispense drugs for euthanasia and PAS. These state, for example, that pharmacists in Belgium are given good protection from prosecution.

VI. Life expectancy can range from 3 to 12 years, which increases in those who choose to die by the aid of their physicians.

VII. For many countries, life expectancy can range from 3 to 12 years, which varies based on the cause of the disease.

VIII. Generally, the 23rd and 24th weeks are considered ambiguous.

Which Determinants of Health could Contribute to It?

I. Age is a significant health determinant in who receives euthanasia, but difference between the genders is small.

II. In Belgium, 53.5% of those euthanized were between 70 and 90 years old (Caldwell, 2014).

III. The policies of countries influence the amount of people euthanized: countries that allow euthanasia see yearly increases in those who choose to die by the aid of their physicians.

IV. Life expectancy is reduced with age, which influences consideration of euthanasia.

V. The diversity population around the globe are perhaps the most likely of all age groups to consider suicide (Ward et al., 2010).

VI. According to physicians in the Netherlands, 17% of euthanasia requests were from patients who were tired of living, which is not a substantial reason for the procedure to be carried out (Ward et al., 2010).

VII. Life expectancy also decreases with terminal illness, another factor that often leads to euthanasia.

VIII. For domestic patients, life expectancy can range from 3 to 12 years, which varies based on the cause of the disease (Boisvert & Vathorst, 2016).

IX. The death with dignity movement, which encompasses euthanasia, is a current trend in healthcare that negatively affects the public health of nations and adversely impacts the profession of pharmacy.

Health Indicators Direct and Indirect Impact

II. Directly impacted

A. Life expectancy

B. Life expectancy is reduced with age, which influences consideration of euthanasia

C. The diversity population around the globe are perhaps the most likely of all age groups to consider suicide (Ward et al., 2010).

D. According to physicians in the Netherlands, 17% of euthanasia requests were from patients who were tired of living, which is not a substantial reason for the procedure to be carried out (Ward et al., 2010).

E. Life expectancy also decreases with terminal illness, another factor that often leads to euthanasia.

F. For domestic patients, life expectancy can range from 3 to 12 years, which varies based on the cause of the disease (Boisvert & Vathorst, 2016).

III. Indirectly impacted

A. Premature birth

B. Premature birth can lead to health complications, such as cerebral palsy, developmental delay, and breathing difficulties (Centers for Disease Control and Prevention, 2015).

C. Goringen Protocol (GP), which allows involuntary euthanasia in newborns with congenital disease, has been adopted in some European countries (Voskuil & Leenders, 2015).

D. 77% of neonatologists in France and 68% of pediatricians in Flanders, 73% of neonatologists in France and 68% of pediatricians in Flanders, who believe that premature birth weights during 2012.

References


Cedarville University School of Pharmacy’s Mission

The school of pharmacy develops exceptional pharmacy practitioners focused on meeting the physical, emotional, and spiritual needs of patients through servant leadership. The school pursues innovative, ethical solutions to health-related issues in diverse populations through collaborative teaching, research, and practice.

Overview of the Impact of the Issue

I. In Europe and the United States, euthanasia is a growing health issue.

II. Several countries and states in the U.S. permit euthanasia including: Belgium, Switzerland, Netherlands, Luxembourg, the state of Washington, Oregon, Vermont, and California with more attempting to pass laws permitting physician-assisted suicide (Radbruch et al., 2016).

III. A. The lethal medications generally are only around $35-00, which is much cheaper than the costs for cancer care which can be between $1769 and $3517 after two years (Schofield, 2005).

B. In Oregon and other states that would allow euthanasia, health care benefits for the poor have been terminated by the state in favor of funding euthanasia (Economic Aspects, n.d.).

C. Euthanasia negatively impacts the spirituality of the public.

D. The practice of euthanasia admits to the populace that their certain type of life that are “not worth living” (Arguments Against Euthanasia, n.d.).

E. Long-term acceptance of voluntary euthanasia leads to a depriving of life, which increases rates of euthanasia and other types of suicides (Arguments Against Euthanasia, n.d.).