

Euthanasia and Law in Europe



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Euthanasia and Law in Europe

This book is a successor to Euthanasia and Law in the Netherlands (Amsterdam University Press 1998). This second edition emphasizes recent legal developments and new research, and has been expanded to include a full treatment of Belgium, where, since 2002, euthanasia has also become legal. Also included are short descriptions of the legal situations and what is known about actual practices in a number of other European countries - the UK, Switzerland, France, and Spain. The book strives for as complete and dispassionate a description of the situation as possible, covering in detail: --- the substantive law applicable to euthanasia, physician-assisted suicide, withholding and withdrawing tre

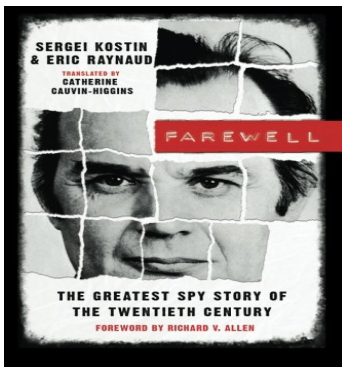


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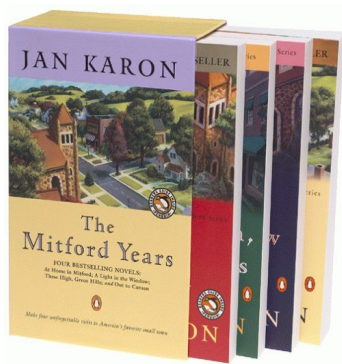


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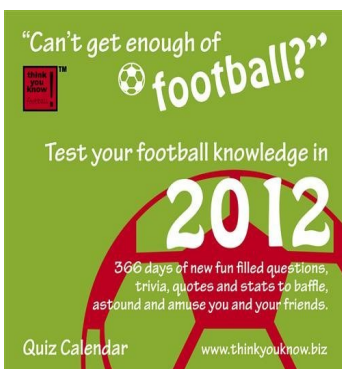


The Moral World of the Qur'an (London Qur'an Studies)

This book analyzes for the first time in English the ethical theory that underpins Qur'anic legislation by providing a classification of specific verses in which Islam's holy book discusses moral issues. The principal purpose of this book is to demonstrate the ways in which the Qur



The Mitford Years, Books 1-4 (At Home in Mitford / A Light in the Window / These High, Green Hills /



Think You Know Football 2012: Can't Get Enough of Football?

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What others say about this ebook:

Review 1:

**John Griffiths, Heleen Weyers, & Maurice Adams
Euthanasia and Law in Europe**

**(Oxford, UK & Portland, OR: Hart Publishing: [...] 2008) 595 pages
(ISBN: 978-1-84113-700-1; hardback)
(Library of Congress call number: KJC8357.E96G75x 2008)**

Updating and expanding Euthanasia and Law in the Netherlands, 1998.

**The authors present a comprehensive review and commentary
on the laws and practices concerning life-ending decisions
in the following countries:**

**Netherlands, Belgium, England and Wales,
France, Italy, Denmark, Norway, Sweden, Spain, & Switzerland.**

**All show increasingly acceptance of life-ending decisions,
but some countries have more advanced laws and controls.
Holland and Belgium have the most developed systems,
but the rates of making life-ending decisions in the other countries
are similar, even where 'euthanasia' is still not legally-recognized.**

The first half of the book is devoted to the Netherlands.

**In Holland, doctor-assisted death
includes both 'euthanasia' and 'physician-assisted suicide'.
Both kinds of help in dying fall under the same regulations.
The only difference is taking pills (physician-assisted suicide)
or receiving a lethal injection from the doctor (euthanasia proper).**

**The most surprising disclosures are the high frequency of
life-ending decisions as part of normal medical practice.**

**These include: (1) increasing pain-medication at the end of life;
(2) terminal sedation to keep the patient unconscious until natural death;
& (3) ending all medical treatments and life-supports
when it becomes clear that the patient will never recover.
Because all of these life-ending decisions take place in medical settings,
the doctors are the ones who recommend such changes in care,
which will result in the death of the patient.**

**Exact numbers for these end-of-life medical decisions
are very difficult to determine**

**because there are no systematic ways of finding the cases
and putting them into discrete categories.**

Death-certificates can be studied.

**These will show deaths openly declared to be 'euthanasia'
or 'physician-assisted suicide'.**

But the termination of medical treatments is seldom mentioned.

Doctors can be polled about how often they help their patients to die.

**But (especially where aid-in-dying is not yet legal),
doctors do not want to incriminate themselves**

by admitting that they have used methods of helping that are not yet approved by the laws of their countries.

But doctors do routinely help their patients to die. And these practices are within normal medical care and the medical ethics of their respective medical associations.

About half of all deaths in some European countries take place with a meaningful element of choice. For contrast, the other deaths taking place within medical institutions occur while doctors are still trying to save the patient from death. The full range of medical treatments are still being applied and all appropriate forms of life-support are still operating. But the patient dies despite all such efforts to prevent death. This reviewer calls such deaths being "treated-to-death". Perhaps about 20-30% of all deaths fall into this category.

The Netherlands has the most elaborate laws and controls. Specially-trained doctors are available as euthanasia consultants for all doctors who might be called upon to help patients to die. Whenever a doctor agrees to euthanasia or assisted suicide, the doctor must report such deaths to a Regional Review Committee. About 3% of total deaths in Holland are so reported. Since the new euthanasia law went into effect in 2002, no one has been charged with violating the law. And technical violations of consulting and reporting requirements have not led to any prosecutions of doctors.

For an analysis of 13 safeguards for euthanasia now in Dutch law, search the Internet for these exact words: "Guidelines for Euthanasia in the Netherlands".

Euthanasia and Law in Europe is required reading for anyone who wishes to comment on the end-of-life practices in Europe. All previous information is out-of-date and no longer applicable. Critics of the right-to-die will have to revise their critiques of Holland in light of much new information in this book.

And all who favor the right-to-die will find much useful information here. Which of the laws, practices, & regulations should be copied elsewhere? Has the right-to-die already been realized in normal medical practice that allows reasonable life-ending decisions? If we are not required to suffer until we die, perhaps better cooperation with our doctors is all we need so that we will be granted a peaceful and gentle death when the best time comes.

If you are interested in other books favoring the right-to-die, search the Internet for this exact expression: "Books Supporting the Right-to-Die".

James Leonard Park, advocate of the right-to-die with careful safeguards.

Review 2:

Euthanasia and Law in Europe (2008) is the definitive book that unpacks existing data on euthanasia, assisted suicide and other medical behaviors that potentially shorten life (MBPSL) in The Netherlands, Belgium, England, Wales, France, Italy, Scandinavia, Spain, and Switzerland. This book is a follow-up to Euthanasia and Law in the Netherlands (1998) and offers the most even-handed and meticulous examination of practices around end-of-life that I have seen on the topic. It is a must read for anyone interested in learning more about the history, development, and current policies at the end of life in Europe.

The book leads with the Dutch material on euthanasia, assisted suicide and other MBPSL. The Netherlands is the country with the longest standing legal practice of euthanasia and assisted suicide, legalizing these practices by court decision in 1984 and by law in 2002. Griffiths and his colleagues offer a well-researched accounting of figures presented in the van der Wal and van der Maas study, along with discussions of data from a number of other sources. Chapter 4 should be read by anyone interested in understanding what exactly national figures on euthanasia and other MBPSL report, particularly as it relates to practices that may be considered on the "slippery slope" around euthanasia. Chapter 6 offers a thoughtful account of end-of-life policies as it relates to neonatology.

The section on Belgium offers some of the new and current data now available from that country, which legalized euthanasia and assisted suicide in 2002. This is followed by short chapters on a number of other European countries.

For readers looking for a meta-analysis of end-of-life policies in Europe, see chapters 17-20. Chapter 19 offers a careful and even-handed examination of euthanasia in the context of "slippery slope" arguments.

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