

Alexa Duffy

Mrs. Andrea Shore

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The Ethics of Euthanasia and Who Should Decide

Consciousness is typically defined as awareness of one's surroundings. It's what gives man thought, innovation, individuality; it's what links man to the outside world. As famous philosopher Descartes put it, "I think, therefore I am."

During sleep, this awareness is lost. But only temporarily, as once the body finishes recharging for the night, consciousness can be swiftly regained. In a coma, it's not so easy. For those in a comatose state, this loss of consciousness lasts indefinitely, and failure to recover is a real possibility.

The right to life should always be protected, but how does this apply to those barely alive at all? Those in a vegetative state? Keeping a comatose person alive requires major funding, constant medical attention, and endless stress on the family. If a patient is bound to die, should this brief period of suffering be skipped altogether through use of euthanasia?

The decision is not something to be taken lightly. Comatose patients are effectively relying on the best judgment of others to determine their fate, a judgment bound by circumstance, limited resources, and human error. Euthanasia is a heated topic in of itself, illegal in most countries around the world and only put to use if death and/or prolonged suffering is certain.

Thus, given the sheer weight of the decision, and the many compounding factors to consider, the decision to end a comatose patient's life should be left up to those who know best: medical professionals.

For one, only medical professionals can determine the specific state of a comatose patient, which is important when considering whether a patient's life is worth saving. Through research, advanced medical equipment, and technical expertise, doctors can determine an individual's level of conscience past physical appearance.

This is shown in the case of John-Dominique Bauby. Bauby suffered from locked-in syndrome, which, although isn't entirely the same as being in a coma, is similar in that in both cases the patients' sense of speech and movement is severely limited. Despite these limitations, Bauby retained near perfect cognition, and was even able to write a memoir by communicating "with his speech therapist" through "eye movements" (Claassen and Edlow, par. 11). In cases such as these, a hidden inner life was only revealed because advanced technology and medical personnel were made available to the patient.

With locked-in syndrome, it's well known that the patient is still aware. For comatose patients, it's not as obvious. There's many stages to being in a coma, ranging from the permanent vegetative state, where death is likely, to the minimally conscious state, where the patient has a real chance at recovery. Even more mysterious is the newly discovered covert consciousness - the state in which a comatose patient has moderate levels of consciousness that can only be determined through "EEG and functional MRI assessments," and not by physical signs (Claassen and Edlow, par. 14). The discovery of covert consciousness only adds to the important role technology and medical advancement plays in society. If a comatose patient's classification is the

determinant on whether or not their life is considered saving, then this classification must be as accurate and scientifically-based as possible.

In addition to medical professionals having more access to advanced technology, medical professionals deal with moral quandaries on a regular basis. They have dedicated a large portion of their life to the trade, and have likely seen and assisted with countless difficult cases. This experience allows them to see objectively into a comatose patient's condition, rather than basing their actions on emotional ties or personal values.

Of course, that is not to say that technology will always be perfect, or that doctors are the epitome of ethics. Only that their judgment is careful, well-researched, and based on the best current knowledge available. And for a topic as sensitive as euthanasia, one can only ask for the best.

Work Cited

Claassen, Jan and Edlow, Brian L. "Some People Who Appear to Be in a Coma May Actually Be Conscious." *Scientific American*, 1 November 2022,
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