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EUTHANASIA: A Dignified Death

EUTHANASIA: A DIGINE DEATH

FABENI, Pricila[1]

MATOS, Elzira[two]

Summary

Goals: The present study aims to carry out a theoretical analysis of the right to a dignified death, based on the principle of human dignity and ethics at the end of life. Some very important concepts and procedures will be presented for understanding the topic, including euthanasia, dysthanasia, assisted suicide and orthothanasia, in addition to the autonomy of will that must be taken into consideration in terminally ill patients. **Method:**The methodology used in this article is qualitative and bibliographical research on the topic in question.**Results:**Death with dignity in cases of terminally ill patients is a subject that deserves more attention, since in some situations there is nothing more to do, as it is known that the patient will not survive. It is important to highlight that a person who is in full mental health and has made the decision regarding their death in a free and responsible manner, must have their will (desire) taken into consideration, as being in those uncomfortable (terminal) situations, in addition to the suffering , of anguish, also affects your morale.**Conclusion:**The subject of euthanasia is very old and the population is somewhat afraid of having a clear dialogue about death, as for some people it is the end point in itself. Thus, they leave the topic largely ignored. But the State must, through specific cases with terminal patients, analyze and let the patient or family choose death, a decision that should not be seen as disrespecting the Constitution.
Key words: Dignity. Right. Death.

Abstract

Objectives: The present study aims to conduct a theoretical analysis about the right to a dignified death, based on the principle of human dignity and ethics at the end of life. Some very important concepts and procedures for understanding the topic will be presented, including euthanasia, dysthanasia, assisted suicide and orthothanasia, in addition to the autonomy of will that must be taken into consideration for patients who are in the terminal stage.**Method:**The methodology used in this article is for qualitative and bibliographic research on the topic in question.**Results:**Death with dignity in cases of terminally ill patients is a subject that deserves more attention, since in some situations there is more to do, as it is known that the patient will not survive. It is important to emphasize that that person who is in full mental health and has made the decision regarding his death in a free and responsible manner, must have his will (desire) taken into account, as he is in those uncomfortable (terminal) situations , in addition to suffering, of anguish, also affects their morale.**Conclusion:**The subject of euthanasia is a very old one and the population is afraid

[1]Students of the 3rd semester of the Bachelor's Degree in Law at the State University of Mato Grosso-Campus Pontes e Lacerda. Email: prifabeni2@gmail.com
[two]Master Professor at the State University of Mato Grosso-Campus Pontes e Lacerda. Email: elziramatos@hotmail.com

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to talk clearly about death, because for some people it is the end point in itself. Thus, they leave the subject on the subject too ignored. But the State must, through concrete cases with terminally ill patients, analyze and let the patient or family choose to die, a decision that should not be seen as disrespecting the Constitution.

Keywords: Dignity. Right. Death.

1. Introduction

Death is still seen today as a taboo, even though we know that it is certain for everyone, what we don't know is the exact moment it will happen. The development of medicine allowed the cure of various diseases and the extension of life. However, this progress is heading towards an impasse when it comes to seeking a cure and saving a life at any cost in which death is inevitable. One of the greatest fears of human beings is having their life maintained at any cost, even if it involves a lot of suffering, with only ICU equipment as company, or perhaps not even that, as hospitals cannot always provide this assistance.

This work will address the concepts of euthanasia, dysthanasia, orthothanasia, assisted suicide, among others, which are necessary to understand and know whether Brazil accepts such life-ending procedures, especially when dealing with terminally ill patients. One can stop and reflect, until when life should be prolonged, could it be that in the same way that there is the right to a dignified life, shouldn't there also be the right to a dignified death, and who should make such a decision?

Scientific and technological development in recent years has extended the limits of life and changed the face of death, which will inevitably reflect on legal-criminal dogmatics. In Brazil, at the current time, there is legally nothing specific about euthanasia in the Penal Code. The legal intervention of the cessation of life is one of the most complex and current points in criminal law.

Therefore, there is an urgent need to organize a current and humanized analysis of euthanasia, taking into account the indispensable and continuous consensus between bioethics, constitutional foundations and criminal law. Still in Brazil, there is a lack of more detailed studies on euthanasia in the criminal area. The methodology used in this article is qualitative and bibliographical research on the topic in question.

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2 Theoretical Foundation

The right to life establishes the first right of any individual, thus being protected in international acts, in the Constitution and also in infra-constitutional law. With the end of the Second World War, the dignity of the human person became one of the greatest ethical agreements in the world. While in the modern world the dignity of the human person was the axiological center of legal systems.

Dignity as autonomy, as individual power, is the understanding that is subject to the great Human Rights documents of the 20th century. It involves the capacity for self-determination, as well as the right to decide the direction of one's life and to spontaneously develop one's personality. Individual autonomy allows the subject to make relevant moral choices, taking responsibility for the decisions that were adopted.

The dignity of the human person and individual autonomy at the end of life is a very complex topic, which when discussed causes divergent opinions. The dignity of the human person can be understood as something intrinsic to each and every human being, it is an unavailable element and cannot be renounced or alienated. It is a principle that will never have a concrete and limited concept, as each individual is different from the other, each with their own characteristics and values. Any person who causes any attack on human dignity must be punished by the criminal system. It is worth noting that, just like the dignity of the human person, bioethics and biolaw are also two important institutes that are related to the human being.

Bioethics was born as a branch of knowledge, whose purpose is to analyze ethical effects that scientific development favors, helping people to reflect on the possible consequences of advances in science on human life. And for the author Fernanda Schaefer,

> (...) Bioethics designates the ethical problems generated by advances in technological, biological and medical sciences", Biolaw would therefore be the legal affirmation of permissions for medical-scientific behaviors, and sanctions for non-compliance with these norms (SCHAEFER , 2007, p. 33).

It is very important to reflect on bioethics and also on Biolaw, because, in this way, conflicts and decisions that are linked to medicine will be resolved in a way that there is no abuse and that the principles are not violated. Both bioethics and biolaw cannot agree with facts that could harm the law

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belonging to people. Therefore, it is of great value to think about bioethics, so that professionals in the field can perform their function in a correct, professional and humane way, thus avoiding the use of human beings for other purposes.

It is through Bioethics and Biolaw that one can debate and question topics related to euthanasia, orthothanasia, among others. Furthermore, there is much debate under which circumstances euthanasia and orthothanasia can be performed and whether there will be punishment for those who commit a certain procedure.

With the advancement of medicine and technology, there are even some questions about the immortality of human beings. For society, it is still very difficult to discuss death, as no one thinks about dying, but about living, having a dignified life.

The Constitution contains in its art. 5th, rights that are inherent to the individual, rights that aim at the dignity of the person. In addition to the right to life, we have the right to freedom, equality, security and property.

It is known that without the right to life, human beings would have no other rights, so it can be said that this right is the main right for human beings. However, we cannot leave aside the right to dignity, especially in cases where patients are in serious situations, that is, in a terminal state. Often patients have been in hospitals for a long time, and there is no improvement in their situation, they suffer from treatments, medications and thus lose the joy of living. When they lose the desire for life, they do not feel that they have a dignified life and dying with dignity becomes more important than their life.

Euthanasia, also known as a good death, occurs when the patient knows that his illness has no cure or assumes such a situation that he will not have the minimum conditions to have a dignified life, so he asks the doctor or a third party to take his life in advance. , thus avoiding suffering, physical and psychological pain.

> Euthanasia is understood as the conduct in which someone, deliberately driven by strong moral reasons, causes the death of another, a victim of an incurable disease in an advanced state and who appears to be in great suffering and pain. Euthanasia would be justified as a form of liberation from the suffering caused by a long period of illness (MARTINS, 2010, p. 21).

In Brazil, euthanasia is a crime, it is illegal and is also considered unethical by the medical code, however there is orthothanasia that is accepted in our country. According to doctor Rachel Duarte Moritz, orthothanasia would be letting people die, while euthanasia would be making them die, that is, death would occur gradually, naturally, while euthanasia would be a death considered or seen as quick, which would occur through injected medications. to the patient, or by turning off medical devices. The article *death as it is: dignity and*

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individual autonomy at the end of life, by authors Luís Roberto Barroso and Letícia de Campos Velho Martel, point out that orthothanasia,

> It is about death at its appropriate time, not combated with the extraordinary and disproportionate methods used in dysthanasia, nor hastened by external intentional action, as in euthanasia. It is an acceptance of death, as it allows it to take its course. It is a practice "sensitive to the process of humanizing death, to relieving pain and does not incur abusive prolongations with the application of disproportionate means that would impose additional suffering" (BARROSO; MARTEL, 2010, p. 5).

Thus, we understand that orthothanasia is the possibility of suspending the artificial means that subject the terminally ill patient to aggressive procedures, which will prolong their life when this is no longer possible, given the (irreversible) conditions in which they find themselves. Orthothanasia is also called a dignified death, that is, it is a natural death with all appropriate medical aid, through full intervention in human suffering.

There are also assisted suicide and dysthanasia procedures. In assisted suicide, there is a method in which the patient himself takes his life, but there is help from third parties, such as doctors, family members, friends, among others. Our legal system criminalizes assisted suicide, thus condemning anyone who practices such a procedure.

> Assisted suicide refers to the taking of one's own life with the help or assistance of third parties. The act that causes death is the responsibility of the person who ends his own life. The third party collaborates with the act, either by providing information or by making available to the patient the means and conditions necessary for the practice. Aid and assistance differ from induction to suicide. In the first, the will comes from the patient, while in the other, the third acts on the will of the passive subject, in order to interfere with his freedom of action (BARROSO; MARTEL, 2010, p.7).

While dysthanasia is a procedure that aims to prolong the patient's death using all plausible means, even if there is no hope for the patient's cure.

> Dysthanasia is understood as the attempt to delay death as much as possible, using all available medical means, whether ordinary or extraordinary, proportional or not, even if this means causing pain and suffering to a person whose death is imminent and inevitable (BARROSO; MARTEL, 2010, p. 4).

Dysthanasia is nothing more than an artificial prolongation of the patient's life, who no longer has the chance of being cured or recovering their health according to health science. In dysthanasia, it is not prolonged to the patient's life, but rather his

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death. And in certain cases, instead of helping the patient or allowing a natural death, it ends up postponing their suffering.

Therapeutic obstinacy and futile treatment are linked to dysthanasia. The first concerns the medical conduct of combating death in every possible way, it is as if the patient were going to be cured. The second are extraordinary techniques and procedures, which do not have the capacity to improve or cure the patient, but which prolong life, even generating suffering, in such a way that the predictable benefits are very low in relation to the damage caused.

And finally, there is palliative care, which is inseparable from orthothanasia and is related to the use of all possible technology to reduce the patient's physical suffering, thus improving the patient's quality of life. And the renunciation of medical treatment involves the refusal to initiate or undergo one or some medical treatments.

3 Results and discussions

This question about Euthanasia or any of its modalities is something very complex, some individuals are in favor of euthanasia, dysthanasia, orthothanasia, assisted suicide and other means of interrupting life, whether in terminally ill patients or not, and there is a opposing party against any type of interruption of life, as they maintain that human life is a supreme legal good that must not be interrupted under any circumstances, and that must be protected by both the State and the doctor, including the holder himself.

Finally, we must emphasize that death with dignity in cases of terminally ill patients is a subject that deserves more attention, since in some situations there is nothing more that can be done, as it is known that the patient will not survive. Furthermore, individual autonomy must be taken into account, as it is through this that the individual draws up plans and carries them out.

It is important to highlight that a person who is in full mental health and has made the decision regarding their death in a free and responsible manner, must have their will (desire) taken into consideration, as being in those uncomfortable (terminal) situations, in addition to the suffering , of anguish, also affects your morale. Accepting the end of life is recognizing death as an unconditional part of life and human existence, as natural and predictable as being born.

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3 Final considerations

The debate about euthanasia is as old as life in society. And in the same way is the fear of having a clear dialogue about death, which for some is the end point in itself, thus leaving the subject on the topic largely ignored.

The reality is that, with the technological improvements that have occurred, the person, as a patient, has become a simple object for doctors to practice their profession, which is certainly an extreme choice.

In view of the above, a considerable change in the medical positioning according to the vision of the topic was understood, being of great importance. The paternalistic concept that only the doctor has the right to choose whether to continue life or end it is distanced, with the autonomy of the patient's will being preserved ahead of the material fact. Regarding this transition, there are people who support it, arguing that human life is a supreme and absolute legal good, and it is up to the State, represented by the medical professional, to protect it in any way, preventing the end of the person's life.

In this context, the patient's rights would often be subject to the interests of the State, which defines the use of all available measures that can prolong the patient's life, even if it is against their will, distancing any possibility whatsoever. the practice of euthanasia.

The main objective of the theoretical-based research was to present support that supported the right of those who have a serious illness, with no expectation of cure, or even for people who are in an irreversible state, to have a dignified death according to with their beliefs and values.

The case of a person as a patient refusing some treatments that aim to prolong their suffering is meaningless, because they would be disrespecting the sanctity of life. It would be contradictory for this person, or their family, to decide on euthanasia just to avoid unnecessary suffering, claiming that death is ineluctable.

Taking into account exclusively the character of inalienability and the inviolability of the right to life, which is a supreme good par excellence, it certifies the illegality of the practice of euthanasia, not allowing the family member, the doctor, or the patient himself to decide on death, even if whether it is your own and motivated by piety, or based on the dignity of the human person.

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Arriving at a sealed concept of what life is is not easy. At least it is considered an unworthy life when a person who is a patient finds himself in frequent day-to-day circumstances, confined to bed, supported by devices, unaware of what is happening around him, unable to fulfill his intimate needs alone.

It is necessary to pay close attention when studying the influences operated by moral, ethical, religious and legal values regarding the preservation of life in situations that cannot be reversed. Responding to a patient or family member regarding their complaints about dying is not easy, but even if it is their right, the argument is still that human life is sacred, keeping them alive in whatever condition they are in, in whatever space of time they need.

Respect for human life is a legal order of constitutional order, requiring the dignity of the right to die to be seen, after all, the dignity of the human person is not the possibility of leading their life and realizing their personality according to their own conscience, as long as they do not reach the right of the next one.

Foreign legislation has regularly analyzed the subject of euthanasia and for some countries it is seen as a model of privileged homicide. But, some other countries make use of the practice. Brazil is extremely against the practice, inserting a crime following other forms of homicide into the Penal Code.

Accepting the practice of euthanasia carries many risks and dangers hidden in some of its forms. The science surrounding these risks is essential for working on the topic in the legal environment.

However, it is worth noting that even though the subject is controversial, it does not take away the urgency and need to discuss the topic explicitly. This way, jurists can have support in specific cases, thus changing the scenario we have today in Brazil.

The right to life and dignity are obligations of the State, and it must ensure dignity for human beings by providing mechanisms that prohibit any act that violates life, restricting private autonomy, related to their individual rights, supporting the right to dignity and freedom.

Thus, the time is now to implement public actions aimed at protecting the Democratic Rule of Law, defending life not only because of the obligation to live carrying all the suffering of a terminal illness treatment, but rather, protecting life with a focus on the dignity of the human person .

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