



Presidenza del Consiglio dei Ministri

NATIONAL BIOETHICS COMMITTEE

BIOETHICAL ISSUES RELATIVE TO THE END OF HUMAN LIFE

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abstract

The NBC analyses the problems connected to the use of medicine and technology in the final stages of human life, the implications of which appeal to the conscience of individuals and society in general. The Committee discusses the philosophical perspectives relative to the dignity of the dying person, stressing the great importance of death, which cannot be reduced to a mere biological or medical event. The awareness of the mortal condition makes man responsible for the exercise of his own freedom and gives human life a meaning that contemporary culture, by means of the removal and medicalisation of death, risks forgetting.

The NBC looks at the question of persistent therapy, or that is, ineffective treatment that is oppressive and disproportionate with respect to the benefits that it can bring. It is hoped that awareness will increase with regard to the fact that the abstention from persistent therapy is a duty, especially in extreme situations such as terminal illness and persistent vegetative state. As far as concerns the brain dead patient, intensive care is considered licit only for the purposes of permitting organ donation.

As far as concerns advance treatment statements, the NBC highlights how on the one hand this instrument can be considered useful to valorise the patient's decision-making autonomy, and on the other the difficulty becomes evident of equating advance refusal to treatment to real refusal given by a competent person, above all when it is a question of life-saving therapy. An intermediate solution is therefore proposed, which considers the advance declarations non-binding, even if they are important guidelines from a juridical point of view.

The Committee expresses its appraisal of the use of palliative care, recognising an important value in the practices of the humanization of death. Support is given to the dying person by starting pain therapy, considered legitimate even at the cost of suppressing the state of consciousness of the dying person and with the risk of shortening their life, as long as this is done without the intention of carrying out euthanasia. Palliative care also requires the spiritual accompaniment of the dying person and a vocation to care in the global sense, and is hence not only physical but also psychological and existential.

The Committee stress how the proper use of palliative care may contribute to putting the problem euthanasia into a different perspective. The NBC dwells on the problem of euthanasia, highlighting the most important aspects under an ethical profile and the reasons that can push the patient towards a solution dictated by 'abandonment' and a decision taken in the absence of a truly serene judgment.

Furthermore, the opinion denounces the risk that, through the legalisation of euthanasia, the aims of the medical profession become distorted and the social perception of life is weakened. The danger of abuse and a lack of commitment to terminal patients is indicated as being a concrete possibility of slipping towards forms of non-voluntary euthanasia.