

Managing the Intricacy of Long-term Experiences in Individual Autonomy in the Context of Assisted Suicide Debates

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Description

Assisted suicide, also known as physician-assisted death or aid-in-dying, is a highly controversial and ethically challenging topic that has sparked debates on moral, legal, and medical grounds. It involves providing assistance to a terminally ill individual who wishes to end their life, typically through the administration of lethal medication prescribed by a physician. The concept of assisted suicide raises complex questions surrounding autonomy, compassion, the sanctity of life, and the role of healthcare professionals. One of the primary arguments supporting assisted suicide is rooted in the principle of individual autonomy. Advocates argue that individuals facing unbearable suffering due to terminal illness should have the right to make decisions about their own lives, including the timing and manner of their death. Respect for autonomy implies acknowledging an individual's right to control their own destiny, even in the face of impending death. Proponents of assisted suicide emphasize the importance of providing a humane option for those experiencing severe physical pain, emotional distress, and loss of dignity in the final stages of a terminal illness. Assisted suicide, they argue, offers a compassionate means to alleviate suffering and grant individuals a measure of control over the timing and manner of their death. Some supporters of assisted suicide contend that allowing individuals to choose the timing of their death could contribute to more efficient allocation of medical resources. In cases where continued medical treatment is unlikely to improve the patient's quality of life, the resources used for such treatments could be redirected to other patients who may benefit more significantly.

Jurisdictions that have legalized assisted suicide often frame it within the context of broader patient rights. The right to refuse medical treatment or to discontinue life-sustaining measures has long been recognized, and proponents argue that extending this right to include assistance in dying is a logical and ethical progression. Opponents of assisted suicide often argue from a moral and religious perspective, emphasizing the sanctity of human life. They contend that intentionally ending a life, regardless of the circumstances, contradicts the inherent value and dignity of human existence. From this viewpoint, life is considered sacred, and deliberately hastening death is seen as morally unacceptable. Critics express concerns about the potential slippery slope associated with legalizing assisted suicide. They fear that once society accepts assisted suicide for individuals with terminal illnesses, it may gradually expand to encompass those with chronic conditions, disabilities, or even non-terminal illnesses.

This raises questions about where to draw the line and the potential for abuse.

The medical profession's traditional commitment to preserving life and relieving suffering without intentionally causing harm is a central argument against assisted suicide. Some healthcare professionals argue that participating in assisted suicide contradicts the fundamental principles of medical ethics, which prioritize the well-being and preservation of life. Opponents highlight the importance of addressing the psychosocial factors that may lead individuals to seek assisted suicide, such as depression, social isolation, or inadequate palliative care. They argue that improving access to comprehensive end-of-life care, mental health support, and pain management could offer viable alternatives to assisted suicide. The legality of assisted suicide varies significantly worldwide. Some countries and regions have embraced it as a legal and regulated practice, while others strictly prohibit it. The legal landscape reflects diverse cultural, religious, and ethical perspectives on the issue. Jurisdictions that have legalized assisted suicide typically implement strict safeguards and regulations to mitigate the risks of abuse and ensure that the decision-making process is transparent and well-informed. Safeguards often include multiple medical assessments, waiting periods, and explicit consent requirements.

Ensuring that individuals seeking assisted suicide have the mental capacity to make informed decisions is a crucial ethical consideration. The involvement of healthcare professionals in assisted suicide raises ethical questions about their role in intentionally causing a patient's death. Some argue that healthcare providers should have the right to conscientiously object to participating in assisted suicide based on their personal or religious beliefs. The arguments in favor of assisted suicide stress individual autonomy, relief from suffering, and the responsible allocation of medical resources. The legal and ethical considerations surrounding assisted suicide are complex, with global variability in laws and regulations. Safeguards and regulations play a crucial role in mitigating potential risks and ensuring that the decision-making process is deliberate, well-informed, and free from coercion. As society changes with these moral, legal, and medical challenges, ongoing research and careful consideration are essential. Ultimately, the debate surrounding assisted suicide underscores the need for a compassionate approach to end-of-life care, emphasizing comprehensive palliative care, mental health support, and a commitment to preserving human dignity in the face of terminal illness.