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Contents

Editorial: ABC6 in Turkey Universal Declaration on Bioethics and Human Rights	169 170
Universal Declaration on Bioethics and Human Rights	170
	1 / 0
Ethics of Concerns and Life Cessation Decisions: When	
Emotions are All What Remains	178
- Dragan Pavlovic & Snezana Divac	
Bhagavad Gita on Divine Values: A Pathway for	
Ethical Evolution	183
- Kamal Kumar Dua	
Green Whispers	185
- S Murali	
Utilization of the race concept in the medical sciences	187
- Luzitano Brandão Ferreira	
Report of the 2005 Asian Bioethics Association (ABA) Board	
Meetings and General Meeting	190
Report of the First UNESCO Bangkok Bioethics	
Roundtable (BBRT1)	191
- Darryl Macer	
Report on Bioethics Education Textbook Project Meeting	
(Sept. 2005)	195
ABA Membership, IAB Genetics Network,	196
Contents list of the new Text/Resource Book - A Cross-Ci	ıltural
Introduction to Bioethics	197
Conferences	198
Ordering Information	200

Send papers to the editor in electronic form if possible. Please use reference style used in News section, do not use automatic footnotes or endnotes. Papers are peer reviewed.

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Deadline for the January 2006 issue is 8 January, 2006.

Editorial: ABC6 in Turkey

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The Sixth Asian Bioethics Conference was held in Sanfurlia, Turkey from 14-18 November, 2005, at Harran University. It was a joint Congress between the Asian Bioethics Association and the Turkish Bioethics Association, with simultaneous interpretation between Turkish and English. In the five days of plenary sessions there were many papers presented by a range of authors. Some of the proceedings will be placed on the Eubios Ethics Institute website in the coming months, in the links section to the Asian Bioethics Conferences. Please move your Internet links to the new site: www2.unescobkk.org.org/eubios. Members of the Asian Bioethics Association should renew their subscriptions for 2006, and without payment please accept the Internet versions of the journal only. The voluntary fee contribution of ABA remains determined by the individual means of members, which has a great diversity.

The conference included some hot debates on questions such as the universality of bioethics, with regard to the UNESCO Declaration on Bioethics and Human Rights, the text of which is also included in this issue of the journal. Please note that the title is not including universal norms, which was in the earlier drafts in 2004 and which was dropped after the feedback during global consultation on the draft. The appropriate cultural implementation of the Declaration will be a focus of a number of meetings in the coming year. I also attended the Fourth World Conference of Bioethcis in Gijon, Spain, 21-25 November, which endorsed the UNESCO Declaration.

In this issue is a range of papers reminding us of the diversity of views on bioethics, and topics, and the free expression of views that is the essence of bioethics. Please also see the conference list for news of some forthcoming events which promise forums for reflection and action during 2006.

With greetings as we approach the end of 2005, for the new year, 2006. The January issue will see the return of a News section, which will have a lot of events to mention that have occurred in global bioethics and publications during

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Ethics of Concerns and Life Cessation Decisions: When Emotions are All What Remains

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Summary

Background. It is generally claimed that, in some exceptional circumstances, the taking of human life may be justified on moral grounds. Rare but possible or largely theoretical life situations are often presented to describe either a dilemma within which all outcomes involve loss of human life, or a dilemma which offers at least two alternatives. whereby to act in a way to not maintain human life could be morally preferable. In practical situations, in some rare occasions when such inevitable decisions (to terminate or not human life) have to be taken - when no alternative exists, the decision could not be left to be accidental but would have to be based on same reasons. We argue that the taking of human life could not be morally justified, and we propose here a solution based on emotional motives. The aim of the essay is, therefore, to examine moral reasons for or against maintenance of human life in medically uncontroversial circumstances in the patients whose mental life is estimated to be absent.

Ethics of concerns. The problem of the justification of the taking of human life is not only a moral but, above all, an ontological (existential) question which, consequently, could not be morally justified and requires other conceptual frame of reference. In medical practice, the currently accepted criteria for the termination of life support are morally acceptable reasons including patients' desire, together with medical reasons, like absence of mental life, for example the case of Terri Schiavo, March 2005), as well as the certainty that sensible life could not be prolonged. A decision which should be taken has to accommodate to all concerns that are involved. However, our concerns are closely linked to our emotions and may relate not only to persons but also to physical objects. If our intentional life were understood to be based on our concerns and if our acting would be understood to be predominantly, also, biased by our concerns, the emotional attitude of the actor would have to be largely influencing almost all hers/his decisions. These would include decisions that not necessarily have to have a direct link with emotions, like various rational decisions, and would certainly include moral decisions.

Applying the morality of concerns. The reasons for the continuations or cessation of the life support may be based on direct or indirect patient's interests and/or Interests of others. If there are no patient's interests, when rational choice is missing, and when moral arguments fail, decisions could be based on reasons based on the *emotional concerns*, which are only morally justifiable reasons that remain, while reasons stemming from material motives could not be accepted.

Conclusion. The emotional approach may be of particular value in the above described circumstances, and in critically ill patients where a dilemma exists as to whether to maintain life support or not, when all other approaches would fail, and should be estimated as necessary and sufficient for decision making. Those persons that invested the most of emotions (the closest relatives of the patient) would be the persons whose opinion should significantly influence a decision about life cessation in patients that otherwise would not qualify for life support. Then, intensive communication with the persons emotionally concerned would be an appropriate method that may lead to the decision which could satisfy moral and ontological criteria.

Keywords: death, decisions, killing, ethics of concerns, sympathy, empathy

1. Introduction

The dispute over whether killing could be justified has a very long history. Indeed, killing humans has probably been a practice ever since humans came on the earth. Interestingly, the more we became "civilized", the more killing seems to have taken place. A need for the justification of killing, obviously, increased with the development of civilization, yet the matter became, at the same time, more obscure. A particular problem has been encountered when trying to justify the taking of human life in self-defence, euthanasia, capital punishment, and in war. The obstacle is not solely the inability to rightly judge the conditions one faces when deciding, like in the euthanasia, whether the conditions for such actions are at hand [1] or, in war, for example, whether the utilitarian version of an argument suffices or not [2]. The more basic problem has been, we will claim, that people have tried to solve the problem within the framework of religion and morality which could not, in principle, provide a basis for rational behaviour in these extreme situations. Thereby, taking human life has been, at the same time, forbidden and permitted.

As mentioned, one of causes of the problem has been the fact that the conditions that would allow for the taking of human life in self-defence, euthanasia or "just war" could not be exhaustively defined. Therefore, the disputes over the theoretical possibility of justifying or not justifying such acts, have been permanent and without hope of being solved in principle. Moreover, capital punishment contained an additional problem: the inability to show why, in principle, one should kill a human being who had committed a crime. The theory of retributive justice had many adherents who developed strong arguments in its favour [3, 4], in spite of the fact that its basic principles could not be proven acceptable, since it was not possible to show, in principle, what exactly it was that somebody deserved. Moreover, how can the taking of life be considered a kind of punishment when it results in the removal of the punished. Also, justification for the taking of life does not lie in preventive punishment. Therefore, the basic principles would fail. Either predictions are never certain or, after being executed, the criminal would not experience anything at all and the retribution would fail. This is also not deterrence, since a number of investigations have shown that the effect of deterrence is, to put it simply, absent [5]. Finally, such action does not provide sufficient satisfaction to the victim, his/her family, or to those who loved the victim.

Similarly, no form of consequentialism could, in principle, provide the right answer as to what should be done, since there is no certainty as to how various agents, which cannot be controlled, would behave and the outcome stays uncertain. Thereby, teleological attempts have been condemned to failure. On the other hand, the deontological approach can hardly be of any help since, although it may be useful to find out what is right and wrong to do in principle. The theory cannot prescribe an action that would contradict its basic

principles - this being exactly what would be needed to justify killing.

Whether emotive metha-ethics [6, 7] has failed will be out of scope of this paper. However, we will claim that although it probably failed [8] it may be of value in the field that we will maintain to be "outside" ethics. We argue that the taking of human life could not be morally justified, and we propose here a solution based on emotional motives. Aim of the essay is, therefore, to examine moral reasons for or against maintenance of human life in medically uncontroversial circumstances in the patients whose mental life is estimated to be absent.

2. Moral Theory of Concerns

The problem of the justification of the taking of human life is not only a moral but, above all, an ontological (existential) question which, consequently, could not be morally justified and requires other conceptual frame of reference. Let us examine this more closely.

The problem of the moral justification of the taking of human life, we claim, does not belong entirely to the moral frame. Therefore, the problem of killing humans can not be solved in a moral frame. Morality is a result of human intellectual enterprise. It presupposes a human individual who reflects upon her/his obligations towards the outside world: what should be done, what ought to be done, and what should not be done. Man is a subject of morality and its destruction removes morality entirely. The deontological approach to morality is, obviously, a result of human intellectual development and education. All other approaches to moral problems are not much different. Teleology would be impossible without the human mind, for example. Killing human beings is, then, inevitably bound to renouncing morality by removing its very subject. To oppose this would be to claim that we can live without morality, which would be similar to claiming that we can live without other humanly specific mental activities, which is absurd. This would remove our human essence. To claim that we can continue to live and not be human any longer, would be equally absurd.

To make our ideas clear, we need some repetition. First, we would like to emphasize some key terms that will be used — sympathy and empathy [9, 10, 11] and, then, move into describing our relationships to the objects or persons in the external world which determine in what kind of active positions we are and in relation towards the external world and its content. As Eisenberg and colleagues have defined [11]:

"Empathy (is) an affective response that stems from the apprehension or comprehension of another's emotional state or condition and is similar to what the other person is feeling or would be expected to feel. (...) Sympathy is an emotional response stemming from the apprehension or comprehension of another's emotional state or condition, which is not the same as what the other person is feeling (or is expected to feel) but consists of feelings of sorrow or concern for the other."

In Eisenberg's view:

"(···) pure empathy is not other-oriented. However, with further cognitive processing (assuming that the individual is old enough to differentiate between one's own and others' internal states), an empathic response usually turns into either sympathy, personal distress, or some combination (perhaps alternating) thereof'.

This difference is important, although not so much for our present argument where we will remain inside of the broader frame of concerns in general.

3. Direct and Indirect Concerns

Our world, as we perceive it, is inhabited by other minds, animals, plants and things, i.e. material objects, as well as mental objects. All of these may deserve our direct (primarily other people, i.e. other minds) or indirect (the rest of our

perceived world) moral (or other) concern, this depending on the degree by which they may relate to the other minds, other human beings (persons) [12]. However, the primary and direct subject of morality and our moral concern are human beings.

One builds multiple relations with one's surroundings. One likes or dislikes the objects, facts or persons; what they do or not do, approve or disapprove of. All kinds of intellectual and psychological relationships are established. Whether these be cognitive, behavioural, automatic responses or attachments to the objects or persons, all generate a vast variety of concerns. Man is active towards the surroundings in various ways. establishing, thereby, concerns about fulfilment of these activities. These concerns vary in intensity and kind. Many of our relations can be described in terms of the pleasure they foster. This may be simple, physical pleasure (i.e., taking a warm bath) or artistic pleasure (enjoying a piece of art), to name a couple. There may be a combination of "pleasures", such as watching or doing sports. Participating in sport, fosters a corporal satisfaction, as well as, a mental satisfaction, which is not only related to the feeling of movement of one's own body, but, also, to the visual satisfaction while performing or seeing a performance of movements.

Regarding the many concern types, the possibilities are endless. Only one group of concerns are moral concerns. The others are our aesthetic concerns, intellectual or social concerns (dependent on activities which are subject to a person's preferences and values: what discourages/encourages and what one [dis]approves of). In addition, one cares about one's own life, the lives of others, the existence of objects, other living beings, and our "world". Two of these groups of concerns are relevant to what we are talking about - one being moral and the other being existential concerns. Existential concerns are more basic. The former are about the content of our world, the latter about our world in its totality. This is a crucial distinction.

In general, our concerns will be positive or negative. Positive would mean that we approve of doing something, like doing something, or, even, believe that we have to/ought to do something. The opposite would be true of the negative concerns. We experience pleasure or pain in a number of them; though, not in all. Deontological principles or teleological reflections play an important role in determining our motivations. Our sense of justice could, for example, play a role in these concerns without necessarily involving a sense of empathy or sympathy [13]. These would also constitute a particular group of moral concerns. Given the substantial number of our concerns, their fulfilment or lack of fulfilment does not necessarily produce pleasure of pain. We may be quite indifferent to them. Direct concerns are different. Direct concerns would be those objects/subjects we care about; not because of some other reason, object, or subject; but for the object/subject itself.

Indirect concerns are equally important. We are concerned about the concerns of other people or living beings (even those of animals) and sympathize with them. Our concerns about the concerns of other people (other minds) are particularly strong, thus caring whether other people are satisfied or not. But we sympathize only if we can recognize their concerns. As Hume puts it: "sympathy with persons remote from us, (is) much fainter than that with persons near and contiguous" [14]. We are capable of recognizing "concerns" which animals may have. We, for example, recognize that animals may experience pain or pleasure and, often, admit to caring very much about them. Our concerns about other minds' concerns or about the concerns or feelings of other living creatures could be, in the appropriate circumstances, also our moral concerns. We may therefore indirectly care about some physical objects which concern others. For example, we may not be concerned at all about some book, but if somebody else does, the destruction of the

book could introduce indirect feelings of sympathy for the object and, even, incite our moral concerns.

We, also, strongly sympathize with people who are anxious about their existence. On the other hand, we are prepared to not care about animal lives if we are aware that animals do not have such concerns. In general, we are able to not sympathize with living beings (including humans), thereby excluding moral concerns. Our moral concerns need objects of concern and we need the capability to sympathize with these objects. Imagine, for example, that the whole world would be destroyed with the exception of one person; destroying all subjects of his concern. He would remain without the entire collection of the subjects of his moral concerns and, we presume, without his moral life.

As we have seen above, sympathy is important for, both, direct and indirect concerns, although largely independent of the nature of the objects. Whether the object of our concerns is a person or not is not particularly decisive. When the justification of animal killing is in question, it seems to be of little relevance whether the animal is a mammal or not. What is certainly relevant, is whether the animal feels pain or whether it has a kind of mental life, yet such considerations are largely neglected. Our human relationship with a particular animal seems to be of more importance in fostering eventual sympathy and inciting such in other people. Enormous numbers of highly developed animal species are killed just for food and, this, without much hesitation, as long as no human being is suffering because of that act.

Let us examine just a few more examples. To make direct and indirect concerns more clear, we would like to further discuss the interests of people. One type of our moral concerns appears when we know that other people are concerned about the preservation of forests, for example, yet we are not. The destruction of the rainforests in the Amazon, could then become our moral concern, not because of the rainforests themselves, but because of the people concerned about the destruction of forests. This would be an indirect concern. Similarly, we could, also, develop concerns for people who fear being killed or mistreated, starving, or suffering in various ways - only if we have developed concerns for them previously. Interesting example brings Aronson [15]. He was calmly watching the news from Vietnam War with his little child. At certain point the little child asked him what was "napalm", and he explained it briefly. At that instance the child started to cry. He admitted that he was surprised by the absence of sympathy we can develop for other people sufferings in the world of meaningless world that we live in. Or, we would say, how much self involvement we need to fully appreciate others as human beings.

If this would be all that matters, then the killing of human beings who are in deep narcosis, having no friends or relatives who, except may be those who are outside of that imagined situation, cared whether they stayed alive or not, would not be problematic. Our reality sometimes displays such behaviour. In war, for example, when all our compassionate feelings are extinguished by war propaganda and political, moral corruption; we tend to approve of killing. This is how we finally arrive at accepting the proposed justifications for the killing of human beings. If concerns are absent, as in these situations, human beings are capable of ignoring all moral principles. It seems that the presence of concerns is decisive for remembering the moral principles.

4. Existential Concerns

As mentioned above, killing humans may be denied on moral grounds, yet it is also possible, even within the moral sphere, to develop arguments which try to justify killing; as in war, capital punishment etc. We claimed above that these attempts always fail because the problem is not only moral, but also existential; concluding that killing could not be justified by a moral argument. Moreover, being an existential issue —

outside of morals - its moral justification would be quite irrelevant. We claim here, however, that while living with unsolved moral concerns, we are still faced, in such dilemmas, with existential concerns as well. The solutions to the existential concerns, provided the solutions exist at all, have to be looked for outside morality. Before attempting to search for a solution, let us examine how existential concerns apply to physical objects.

The example with the book that we gave above is only one. Similarly, our concerns as to whether or not our TV set is going to break down and we would have to buy another one is a type of existential concern. We may be concerned about all the objects that surround us, even though these objects may provide no particular pleasure. Their disappearance may trouble us if we consider them to be making up our world; they are part of our life. As long as their disappearance belongs to the works of nature, like the disappearance of the mountain after a volcanic eruption, we suffer little or not at all from existential concerns. But, if this would be the result of human intervention, it may trouble us. An "act of nature" does not usually trouble us as an immoral act; although it can, if the destroyed object is of personal concern of somebody else. One could conclude that an "act of nature", at its very base, awakens our existential concerns. However, it stops there. It does not provoke an existential crisis. Material objects are not minds, nor are they a dwelling place for any mental or intellectual enterprise. This is only man himself.

To describe the existential dilemma, the expression "immoral" seems, then, to be quite inappropriate. Consequently, not only fallacious arguments, but, also perfect moral arguments simply could not pertain when talking about the killing of humans. This is a sphere where moral disputations do not belong. "Amoral" may be a better word to describe such behaviour, since an act of destruction towards the very subject of morality (human being), as I stated above, is outside morality. For the same reason, a discourse about war, which promotes the very act of killing human beings, is outside of moral discourse; although it may be descriptive, metaphoric, or emotional. Perhaps, we can develop some existential or ontological discourse on the topic, but ethical discourse would lead to the absurdities that we have already mentioned.

5. Existential "Solution"

Whether or not an existential argument in this matter has a solution is controversial. There are, indeed, circumstances when the killing of humans is technically difficult, if not impossible, to avoid. Such are the cases of concrete self-defence or in wars undertaken to protect a population under direct attack. Imminent attack is not included, not only because the future can not be predicted with certainty, but, also, because it is not possible to precisely define such a condition. Indeed, it is not possible to precisely define in advance a direct attack or real self-defence situation either. They are known only after the act, when, of course, it is too late for any other action.

As we have demonstrated above, moral argument would not offer a justification for killing. If the situation were such that a decision to act in some way has to be taken, obviously, we would have to decide on some other, non-moral grounds. In such a dead-end situation we may retreat and choose not to decide, i.e. not to act. Of particular relevance in medical ethics would be a decision of the physician not to induce, actively or passively, life termination in some medically uncontroversial circumstances. This is a right that the physician in question certainly has, that is little discussed in the medical ethics. As mentioned above, there are situations where, both, acting and not acting would lead to outcomes that may be equally undesirable, and where not acting may represent, by the means of some other agent which, acting in our absence, would, in fact, be an "active" option.

What other grounds could be used if we can not be morally justified in our actions in all available outcomes? We are always aware of our intentional background and, in the absence of a rational and just choice, we would only be in a situation, preserving rationality, within which we could only opt for some reasons that spring now, not from our moral principles and presuppositions, but from our individual motives: we would have no choice but to turn to ourselves.

In his Nobel Price inaugural Lecture, Bertrand Russell [16] wrote: "All human activity is prompted by desire. There is a wholly fallacious theory advanced by some earnest moralists to the effect that it is possible to resist desire in the interests of duty and moral principle. I say this is fallacious, not because no man ever acts from a sense of duty, but because duty has no hold on him unless he desires to be dutiful. If you wish to know what men will do, you must know not only, or principally, their material circumstances, but rather the whole system of their desires with their relative strengths.

Occasionally, we believe (perhaps contrary to what Russell thought) that some of the desires in some people may spring from their intellectual occupations and their knowledge. However, the number of such desires is small and such people are rare. To achieve this, we would have to subordinate all our other concerns to our intellectual concerns and subordinate all our feelings to a single one, that being our concerns for the values of knowledge. And this we are incapable of doing.

In the extreme situations mentioned, humankind is left without much of learned moral principles, and alone with bare desires and their motives. These motives will be of various kinds and we listed number of them when speaking about concerns. We will take just two extremes: material and emotional. If we would presuppose a moral attitude, i.e. continuing to act morally by consciously choosing our motives for action, it would seem quite acceptable that emotional grounds for acting would replace moral motivation in a situation where acting morally would not be possible. This would be a situation where our emotional concerns would be our only available resources. A frequently cited example is the situation where one has a choice: either to take one human life or to let a number of people die, including the mentioned one. These situations probably never occur. Let us assume, for this occasion, that they do occur and that the outcomes are certain. The decision would still be, according to what we have said, an emotional one. The claims that it may be an entirely technical solution (killing one instead of letting many die), is based on the certainty of the possible outcomes, which, in reality, are never at hand. The Moscow theatre disaster in October 2002 is one example where a group of terrorists intended to kill a great number of spectators. Moscow authorities decided to sacrifice a smaller number of spectators in order to save the majority. However, it has never been publicly investigated just how certain the claimed certainty was. Such decisions, although they may be universally approved in principle, may not be universally acceptable in every particular instance because they are specific to the particular decision maker who decides to act immorally and take the emotional burden.

7. Difficult issues

Whether some motives for an action are nobler then the other or how does altruism, euthanasia or the Doctrine of Double Effect - DDE [17] fits in the emotional frame? It will be not referred here to the Aquinas version of the DDE ("killing one's assailant is justified, provided one does not intend to kill him"). Today much cited utilitarian version of DDE will be used where it is maintained that if to achieve good effects some not so important bad effects have to be produced, the action may be approved, or its inversed form: if the bad effects are just unacceptable, the action has to be cancelled.

On the pure ethical ground, the material motives would not be acceptable as a first line of choice. A hierarchy of motives is certainly a social construct which is not equally distributed. There are societies where the above hierarchy would not be easily accepted. As some recent wars demonstrate, our western society is often more inclined to value material interests higher then emotional ones. It may be argued, that the material advantages gained would, in the end, serve high moral purposes, such as the achievement of social justice. better healthcare, education, or similar benefits. These are all highly hypothetical possibilities, which therefore need no further discussion. Similar reasoning would apply to the medical ethics, including the application of the accepted rules used when taking decisions as to whether to maintain or not to maintain human life of the patients in otherwise medical or ethically-non-controversial circumstances. These include currently accepted criteria for the termination of life support which constitute morally acceptable reasons, including patients' desire, together with existential reasons; including medical reasons (absence of mental life, for example), certainty that life could not be prolonged, etc.. The emotional approach may, in these circumstances where all other approaches would approve an uncontroversial decision, be of particular value and should be estimated as necessary and sufficient for decision making. We are bound to believe that our approach, although it does not spare metha-ethical emotivism from shortcomings, opens a field where emotivism may find its full value.

Being unjustifiable on rational ground, the altruistic behaviour would fit perfectly well an emotivist logic. On the contrary, it is often tried to approve euthanasia by moral and rational arguments, which, following what we have claimed above, can not be done, while by emotional arguments could. Some legislatures (German for example) have adopted some rules as, it is claimed, quite practical. One is "in dubio pro vita" (when in doubt, decide for life maintenance) about which has been argued elsewhere to be an open end rule always forbidding euthanasia and to be as such without much practical use [18]. Similarly in certain legislatures, rephrasing the rule "salus aegroti suprema lex" into "voluntas aegroti suprema lex" ("well-being of the patient is the highest law" into "the will of the patient is the highest law") lead to the obvious consequences: obligation of the physician to help a patient has been conditionally cancelled and the obligation perverted into explicit duty to fulfil patient's whish. Indeed, the latter rule may be not only in contradiction with the former, imposing a duty not to help in healing the patient if he/she does not want it, but sometimes, it requires that physician acts in a certain way (by withholding or terminating active life support) so as to permit patient's death - if this is patient's desire. If the right of disposing of himself/herself is accepted for everybody, patient and physician have equal rights and "voluntas" of one does not override that of the other. The requests for active or passive euthanasia may simply be, and quite often are, in opposition to physician's moral principles and such ethical stance may be emotionally charged very strongly indeed. Killing human being, in an active or passive way, may result in pain, suffering and long lasting emotional trauma for the actor, and this gives him/her full right to avoid executing such "duties". In theory, an application of the inverse form of DDE (see above) would be warranted in these cases, whereby the effects of moral and emotional injury to the attending physician would prevail. This would then justify refusal of some physician to fulfil the desire of the patient to terminate life in both ways, either active or passive. A physician should have a right NOT to kill the other human being (in an active or passive way), similarly to the right that all other men and women certainly have. The reality is different though. Such right is sometimes recognised for some religious groups, but it is denied to the individuals if based only on pure ethical grounds, what is logically inconsistent. Even greater absurdity is in the acceptance, at the same time, of its opposite - acceptance of the right to kill, in war, for example. These contradictions would be avoided if that difficult issue would be understood to be reaching over and above morality and considered in an existential frame, which we proposed in this paper.

In medical practice, the currently accepted criteria for the termination of life support are morally acceptable reasons including patients' desire, together with medical reasons, like absence of mental life, for example the case of Terri Schiavo, March 2005), as well as the certainty that sensible life could not be prolonged. A decision which should be taken, has to take into account all concerns that are involved. However, our concems are closely linked to our emotions and may relate not only to persons but also to physical objects. If our intentional life were understood to be based on our concems and if our acting would be understood to be predominantly, also, biased by our concerns, the emotional attitude of the actor would have to be largely influencing almost all hers/his decisions. These would include decisions that not necessarily have to have a direct link with emotions, like various rational decisions. and would certainly include moral decisions.

Applying the morality of concerns. The reasons for the continuations or cessation of the life support may be based on: Direct or indirect patient's interests and/or Interests of others. If there are *no patient's interests*, i.e.:

- 1. Lethal outcome is inevitable but patient can not be declare dead.
 - 2. Irreversible loss of mental life
 - 3. No medical indications for continuation of life support
- 4. Continuation or cessation of life support neutral towards patient's interests
- 5. Unknown what "a moral personality" (Rawls, 1972) would want
- 6. No judicial grounds for continuation or termination of life support (patient's desire unknown).
 - 7. No additional "patient's interests" that would help decide

In these cases, when rational choice is missing, and when moral arguments fail, decisions could be based on reasons based on the *emotional concerns*, which are only morally justifiable reasons that remain, while reasons stemming from material motives could not be accepted.

8. Conclusion

We have argued here that when deciding to terminate human life, what appears to be "morality" has primarily to do with our concerns and that these concerns may be of two kinds: moral and existential. Whether or not we are going to approve or disapprove of some action in such circumstances will depend largely on the concerns we would have for the particular object. Concerns may be further divided into direct and indirect concerns and are both based on the sympathy or empathy we have developed towards the objects of concerns. While the solution of moral problems may be sought in moral arguments, the existential problems would require existential arguments. The problem of killing humans is a moral problem that can not be morally justified. It extends beyond morality and is, in the end, an existential problem which cannot be solved by moral argumentation. Existential argumentation concerning the killing of humans may be pursued after moral argumentation has been exhausted. These would include currently accepted criteria for the termination of life support which constitute morally acceptable reasons, including patients' desire, together with existential reasons; including medical reasons (absence of mental life, for example the case of Terri Schiavo), certainty that life could not be prolonged,

Valid existential argument may include an emotional basis which can not be universally acceptable, since it is specific to the particular decision maker, but the approach may be approved in principle. These principles would also apply for the critically ill patients where a dilemma exists as to whether to maintain life by means of active life support or not. The emotional approach may, in these circumstances where all

other approaches would approve an uncontroversial decision, be of particular value and should be estimated as necessary and sufficient for decision making. Those that invested the most of emotions (the closest relatives) would be the persons that should be favoured to exercise that delicate authority of forbidding life cessation decision in the patients that otherwise would not qualify for life support.

Indeed, the emotional approach may be of particular value in the above described circumstances, and in critically ill patients where a dilemma exists as to whether to maintain life support or not, when all other approaches would fail, and should be estimated as necessary and sufficient for decision making. Those persons that invested the most of emotions (the closest relatives of the patient) would be the persons whose opinion should significantly influence a decision about life cessation in patients that otherwise would not qualify for life support.

Then, intensive communication with the persons emotionally concerned would be an appropriate method that may lead to the decision which could satisfy moral and ontological criteria.

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