

# End of Life Situations: Religious & Utilitarian Perspectives

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**Abstract:** Life and death are no more looked upon as mystic events. In India people looked at death as the final act to be lived through at home surrounded by near and dear ones, bidding final good byes. Then progress ushered in an era of machines and tubes, which made it possible to prolong life processes. Often in modern medicine, we come across situations where life can be sustained indefinitely, but without a meaningful existence. Who should make such a decision, regarding postponing the inevitable - doctor or patient?

The Karma theory comes in the way of the Hindu and the Buddhist way of thinking which does not allow life to be cut short in any way. If life is cut short, then the soul has to take rebirth again to complete the cycle of birth and death, and can be redeemed only when all the karmic debts have been repaid. The cost of keeping a person on life support systems can be unaffordable to many families, yet some face huge hardships to continue on life support for a few days more, expecting some supernatural force to intervene. Although autonomy of the patient is venerated in the developed countries, in India the ground reality is different. The physician is torn between his duty to inform the patient on one side and the family's wish that physician should make the decision on behalf of the family, without directly involving the patient.

In a resource limited settings of a religio-cultural pot-pourri, should there be a different hierarchy of bioethical principles? Despite, patient wanting to be on the ventilator for as long as he or his family wishes, in the event of his not affording, can we say the principle of utility takes precedence over autonomy? Our existing bioethical guidelines do not adequately address the utilitarian dilemmas. These issues need to be discussed in public fora, for more awareness.

**Key words:** end-of-life decisions, utilitarianism, religious perspectives

## Introduction:

Anayasena maranam  
Vina dainyena jeevanam  
(Sanskrit verse)

"To lead a life without pity and court death without pain"

Religion is defined as a set of beliefs concerning the cause, nature, and purpose of the universe, especially when considered as the creation of a superhuman agency or agencies, usually involving devotional and ritual observances, and often containing a moral code governing the conduct of human affairs<sup>1</sup>. All religions are governed by a code of ethics. Therefore a person, who is religious is expected to be ethical, but the converse need not be true. In general religions of the west, at times called as middle eastern religions (Judaism, Christianity, Islam & Zoroastrian) are monotheistic, whereas the eastern religions, also referred to as far eastern (Hinduism, Buddhism, Jainism, Sikhism, Taoism, Confucianism, Shintoism, etc.) are polytheistic.

**Eastern Religions:** Eastern religions often do not ask for adherence to a particular creed, but only a mind open to the existence of the divine. The theistic dimension is not stressed. The divine is omnipresent and reveals itself in nature.

The latter forms of religion are based on an ethics of personal realization, wherein, religion precepts are not to be taken as commandments, rather as guidelines. The stress is on intentions. Intentionality plays a central role and people are invited to cultivate mental attitudes of love, sympathy, impartiality and compassion. This kind of ethics originates from a human need of personal realization. By its very nature, the ethics of self-appreciation unfolds itself in contemplation. The ethical question doesn't take shape in terms of "what shall I do?", but rather in terms of "what meaning has life?"

**Hinduism:** Hinduism has grown to become the world's third largest religion, after Christianity and Islam. It claims about 837 million followers - 13% of the world's population<sup>2</sup>. It is the dominant religion in India, Nepal, and Bhutan. Hinduism is based on the doctrine of reincarnation, and karmic theory of being reborn to clear old debts before being released from the cycle of life and death. Cutting short a life before its actual time, could mean, a balance of unaccounted karmas, for which the soul would have to be reborn<sup>3</sup>. According to Hinduism, the soul (atman) is immortal, while the body is subject to birth and death<sup>4</sup>. From this perspective, time is not unidirectional, as is observed in western religions, but cyclical from life to death to rebirth.

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Death is preordained and occurs at the exact time when all the 'karmas' (debts) are paid off. Hindu philosophy tells, of a long-held belief that every person is born with a fixed deposit of breaths and dies as soon as that number of breaths has been taken. Yama, the God of Death, keeps the records of every living being. The concept of transmigration of the undying soul, from one body to another is central to the Hindu religion. In other words, a soul may in this life take a human body and in the next that of a snake or any other creature. This why in Hindu religion all living beings are connected and status of animals is higher than that accorded in other religions.

Since the beginning and the end of life are special events often associated with religious beliefs and rituals, dying for each individual assumes different meanings, depending on his religious background. This is all the more visible in communities with strong family ties. Hindu families traditionally run strong on family ties. The father is the central figure and often takes decision on behalf of the family members. Choice of the individual, is overridden by the decisions for the greater good of the family. Arthur Koestler describes this as 'bapucracy', where 'bapu' is a respectful way of addressing one's father<sup>5</sup>. In many Indian societies, individuals are so comfortable with someone else making decisions for them, that even in times of serious illness, the doctor, in consultation with the family head, makes choices and takes decision on behalf of the patient (paternalistic attitude).

**Cost of health care:** Scientific and technological revolutions of the West have inexorably marched all over the world, remaking nations and traditions<sup>6</sup>. India too has accepted the Western science of healing, along with its paraphernalia. There are increasing admissions to Intensive Care Units, increasing situations of prolongation of life and increasing ethical quandaries over end-of-life situations for medical personnel to consider. Spiralling costs of patient care in intensive set-ups compounds the decision-making process. In the USA, it is estimated to cost around \$ 2000-3000 per day<sup>7,8</sup>. In India too, the cost per day per patient, even with modest calculations amounts to INR 1973/- (40 USD). This gains significance in light of the fact that majority of the population lives below poverty line, as defined by the World Bank as per capita income of less than \$ 1.25/day<sup>9</sup>.

**Hindu Ethics & End-of-Life:** Health care professionals have to deal with death & dying situations, while considering the local beliefs, customs & religious practices. The ethics of religion play an important role in decisions involving terminal events. Euthanasia or preponing death is almost an anathema in most Hindu based religions. Hinduism's unitive philosophy gives it a prima facie bias on the side of preserving life under all conditions, and therefore it condemns all acts destructive of life. In the Indian context, patient looks upon a

doctor as *Vaidyo Narayano Hari*, meaning that the doctor is embodiment of God, who should guide them in their time of need, through his wisdom. The Western concept of autonomy does not hold much water in the Indian context.

Yet Hindu ethics allows for flexibility in respect to individual intentions, motives and situations<sup>10</sup>. Sporadic cases of requests for euthanasia make waves in the press and media. One recent incident, involved a 25 year old young man with muscular dystrophy of Duchenne (Venkatesh). In the terminal stages of his life, he requested early death and multiple organ donation. His mother moved the legal system but was denied the request for euthanasia<sup>11</sup>.

**The Utilitarian Model:** Utilitarianism is the idea that the moral worth of an action is determined solely by its contribution to overall utility: that is, its contribution to happiness or pleasure as summed among all persons. It is thus a form of consequentialism, meaning that the moral worth of an action is determined by its outcome: put simply, the ends justify the means. According to the utilitarian opinion, the end of human action, is necessarily also the standard of morality; which may accordingly be defined, the rules and precepts for human conduct, by the observance of which an existence such as has been described might be, to the greatest extent possible, secured to all mankind; and not to them only, but, so far as the nature of things admits, to the whole sentient creation<sup>12</sup>. **A utilitarian** model, emphasizes consequences & maximization of good.

Good ethics has been described as beginning where the law ends. The moral conscience is the precursor to the development of legal rules for social order. Law and medical ethics thus share the goal of creating and maintaining social good and have a symbiotic relationship<sup>13</sup> (George Annas, Standard of Care: The Law of American Bioethics, New York, Oxford University Press (1993)).

**Conclusion:** While dealing with end-of-life situations, the health care professional has to understand the background of the religious perspectives and the wishes of the family out of which arises the final health care decision.

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