“EUTHANASIA – THE MEDICAL SUICIDE”
IN A BUDDHIST PERSPECTIVE

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ABSTRACT

Euthanasia is a medical concept which is explained as medical suicide whereupon the request of the patient or patient’s relatives that who suffer from agony due to incurable or terminal medical illness is facilitated to end his/her life using medications. The main purpose of this concept is to provide a solution to such patients who are experiencing endless suffering due to continuous pain caused by an illness. However, Euthanasia has received many criticisms over time since it was first practiced. In a Buddhist perspective, this concept is somewhat controversial as Buddhism is an untarnished religion which has refrain from any form of destruction to others or even to self. One of the major moral values of Buddhism is not to harm to any sentient beings and compassion and loving-kindness are highly appreciated in Buddhism. Therefore, this research paper will follow an analytical approach to consider whether the concept of ‘Euthanasia’ the medical suicide is comparable with Buddhist teachings. A Comparison of the above-mentioned facts more other factual information will be explored related to this thematic area by using Pāli canon as a primary source. Also, many viewpoints in medical literature related to Euthanasia and critical and analytical investigations are the secondary sources of this research.

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INTRODUCTION

Euthanasia is a medical concept simply explained as the medical suicide with the permission of the patient that who suffers from agony or incurable or terminal medical illness. The main purpose of this concept is to give a solution to such patients with endless suffering, but this concept has received many critics over the time since it was first practiced. Many statuses in their own context disagree and in the some agree with this medical issue related to ethical and legal concerns. In a Buddhist perspective, the above concept is somewhat controversial as Buddhism is a complete harmless religion to others even self. Therefore, this research paper is a critic investigation to analyze whether the concept of Euthanasia, the medical suicide is agreeable with Buddhist teachings.

RESEARCH PROBLEM

The one of the major moral values of Buddhists is not to harm to any forms of living beings. Therefore, compassion and loving kindness is highly appreciated in Buddhism. Nevertheless, as a prominent religion in the world the question is asked, whether Buddhists can agree with the concept of Euthanasia while accepting the boundless living kindness is a question that remain unsolved. Therefore, this is a search for any evidence that can agreed with euthanasia through Buddha’s teachings, During Buddha’s period did the Blessed one faced to this type of situation among his disciples and if the Blessed one faced a situation like what was the verdict then?

RESEARCH METHODOLOGY

While comparatively the above-mentioned facts with the assistance of Pali canon as a primary source this thematic area will be explored. Also, the viewpoints on modern medical classification of Euthanasia and critical and analytical investigation are the other methodologies as well as the secondary source of this research.

HYPOTHESIS

Buddhism follows a positive attitude on modern concept euthanasia – medical suicide while considering taking one’s life as an offense.
DISCUSSION

Fear of death is a result of craving for existence. Life is dear to all. Although the death is an eternal and a definite phenomenon that one should face and experience in due course of time, many tend to disregard it upon face of life. It is obvious that following death, one’s all mental and physical process will come to an end and the physical body is nor more than a futile fire-wood without life. Even knowing that the human senses drives away the conscious mind from this simple reality.

Life is not more than a time duration between birth and death. Since it’s a time span this self-rejection of the reality of death makes the life interesting to live. It’s interesting to see the drive of the ones who go beyond this interest to live and commit suicide due to many human problems and life’s circumstances that are not uncommon. Many religions consider the suicide as a great sin or as an unwhole-some act. Also, at some occasions, the same act had been interpreted in a contradictory. In Buddhism, taking other’s life is a sinful deed as well as incentive for death. But as an atheistic religion Buddhism has always accepted and valued the concept of free-will. Therefore, one’s right is respected in implementing his/her own decisions. In this approach, it is debatable that whether Buddhism truly accepts or rejects one’s decision to take his/her life away.

It is no doubt one’s suicide is rejected by a civilized society because whole human institutions are to help people to live. Therefore, suicide is defined as a personality disorder. Even though in medical scope the concept of euthanasia known as medical suicide is followed in the benefit of a patient who is suffering from endless pain. It is also explained as the medical suicide with the permission of the patient that who suffers from agony or incurable or terminal medical illness. The main purpose of this concept is to give a solution to such patients with endless suffering. Nevertheless, as Leo Alexander point out it is problematic to define what are the incurable illnesses, what are the criteria for them, how could we get the permission from the patient for a medical suicide. (Alexander: 1949:40) In modern medical science, they had denoted some conditions for medical suicide while some countries agree and disagree. In the point of view of a patient euthanasia is four-fold
as, involuntary euthanasia, voluntary euthanasia, pre-voluntary euthanasia, and non-voluntary euthanasia. (Harry: 2000: 293) The first involuntary euthanasia was done by Nazis against phylactic patients and other inadequate. It is simply equal to murder. The second, voluntary euthanasia, when a patient request for his/her death and the action is taken by a doctor. Here doctor help to suicide the patient in his/her own will. The third pre-voluntary euthanasia is also a request of an individual predicting if he/she becomes mentally incapable in future, then under such situation, he or she want his/her life terminated. Fourth non-voluntary euthanasia a request done by patient’s relatives or guardians for patients’ medical suicide, when patient is in unconscious situation to request his/her suicide.

The concept of euthanasia was most well-known and publicized in present due to the case of Terri Schiavo in United States. Schiavo suffered a heart attack in 1990 which left her in a persistent vegetative state, with almost no brain function. She was kept alive with a feeding tube for over a decade before her husband began a campaign to allow her to die. This was a very public case with a lot of supporters for both sides. Some felt that keeping her alive with no chance of waking up was simply prolonging her suffering, while others felt that killing her would be immoral. On March 18, 2005, her feeding tube was officially and legally removed, which led to her death on March 31. One of other significant case on euthanasia is the medical suicide of George V. George was the King of United Kingdom from 1910 until his death in 1936. In the first World War, George was seriously injured when he was thrown from a horse, which exacerbated existing breathing problems he had due to his excessive smoking. This, along with many other illnesses led to his extended vacation which continued until his death. On the 20th of January, 1936, George was in such bad health that he was mumbling and cursing. In order to preserve his dignity, his doctor gave him a lethal injection of cocaine and morphine. With reference to above whether there a controversial medical suicide had been followed by medical history.

It is not permitted euthanasia for all patients who suffers from endless pain. In medicine, it occurs four conditions for euthanasia
as the patient must be suffering from unbearable physical pain; death must be inevitable; death must be drawing near and patient must give consent.

Though concept of euthanasia is discussed in modern highly there isn’t any universal attitude among nations whether the concept is acceptable or unacceptable. With reference to early Buddhism, it is more considerable to know Buddhist attitude on euthanasia. Buddhism never encourage directly or indirectly to harm any kind of being. In one hand medical suicide is a murder and in other hand, the purpose of euthanasia is to make free the patient from his endless suffering and therefore it is able to bring a numerous satisfaction for the patient. In this dilemma, it is a question whether euthanasia is acceptable for a sustainable society.

Contemporaneously, Buddha also faced to some situations of his disciples’ suicides which is similar to the conditions of euthanasia. One of the incidents comes in Cannovāda sutta of middle length discourse of Blessed ones. Ven. Canna was a monk suffering from an incurable ill and numerous pains. By hearing Ven. Canna is ill Ven. Sāriputta and Ven. Mahācunda visited to see Ven. Canna. When both monks were seated near Ven. Canna, he mentioned that ‘I’m not alright. The pain is terrible and growing, not fading; it’s growing is evident not it’s fading. The winds piercing my head are so severe, it feels like a strong man drilling into my head with a sharp point. The pain in my head is so severe, it feels like a strong man tightening a tough leather strap around my head. The wind piercing my belly are so severe, it feels like an expert butcher or their apprentice is slicing my belly open with a meat cleaver. The burning in my body is so severe, it feels like two strong men grabbing a weaker man by the arms to burn and scorch him on a pit of glowing coals. I’m not well, I’m not alright. I don’t wish to live.’ (Majjhimanikāya: PTS: 3.262) Here, through the statement of Ven. Canna it is well clear that he was suffering from unbearable physical pain and he is willing to suicide due to his situation. After listening to Ven. Canna’s statement Ven. Sāriputta and Ven. Mahācunda were ready to serve Ven. Canna including medical treatment. The both monks advised and solaced Ven. Canna, not to suicide. Further, they had a dhamma discussion and as soon as Ven. Sāriputta and Ven. Mahācunda left the place
Ven. Canna suicided he himself by using a knife. (Majjhimanikāya: PTS: 3.265) When this incident was informed Lord Buddha by Ven. Sāriputta he asked for Blessed one where has Ven. Canna reborn in his next life. Here the Blessed one replied Ven. Sāriputta as ‘The mendicant Canna died blamelessly.’ (Majjhimanikāya: PTS: 3.266) According to the sutta it is clear Lord Buddha did not accuse the action of Ven. Canna.

Another incident that we can find in Vakkalī sutta of connected discourses of Buddha. As in the sutta Ven. Vakkalī was dwelling in a potter’s shed, sick, afflicted and gravely ill. (Saṃyuktanikāya: PTS: 3.119) Though he needed to pay his homage to Blessed one he was unable to leave the place where he was due to his illness. Therefore. He addressed his friend, approached the Blessed One, pay homage to him in my name with your head at his feet and inform him that Ven. Vakkalī is sick, afflicted and gravely ill. After Buddha got to know Ven. Vakkalī is ill Lord Buddha visited to see Vakkalī. When Buddha asked Ven. Vakkalī about his health he told Buddha that he is suffering from a ‘unbearable pain; not bearing up; not getting better. Strong painful feelings are increasing in me, not subsiding, and their increase, not their subsiding is to be discerned.’ (Saṃyuktanikāya: PTS: 3.119) Subsequently, Lord Buddha and Ven. Vakkalī had a discussion on non-self and at the end, the Blessed One returned. As soon as Lord Buddha left Ven. Vakkalī addressed his attendance to lift up him on the bed and carry him to the Black Rock on the Isigili Slope. On the slope of the mountain, he spends the rest of day and night there. Lastly, by using a knife Ven. Vakkalī suicided he himself due to his numerous pains. After Ven. Vakkalī’s suicide the Blessed One told, ‘However, Bhikkus, Vakkalī died with a consciousness unestablished.’ (Saṃyuktanikāya: PTS: 3.123) This incident also prove that the Blessed One did not condemn the suicide of a patient who is suffering from an unbearable pain.

Godhika sutta of Saṃyuktanikāya, further illustrate an incident of suicide. Ven. Godhika also was a disciple who dwelled on the Black Rock on the Isigili Slope. At the begging, he reached a temporary liberation of mind but fell away from that temporary liberation. (Saṃyuktanikāya: PTS: 1.120) This was happened for seven times finally Ven. Godhika decided to use the knife because of
his failure. When the Māra the evil one got to know Ven. Godhika is getting ready to suicide as soon as possible he informed the Blessed One, ‘O great hero who has vanquished the death; your disciple is longing for death. He intends to take his own life; restrain him from this.’ (Saṃyuktanikāya: PTS: 1.120) Even though Lord Buddha did not mind the information of the evil one Māra and replied him, ‘wise does not attached to life; having drawing out craving with its root, Godhika had attain final Nibbāna.’ (Saṃyuktanikāya: PTS: 1.122) Later, after Godika’s suicide the Blessed One visited with monks to Black Rock on the Isigili Slope and saw in the distance the Ven. Godhika lying on the bed with his shoulder turned. The sutta end mentioning that Ven. Godhika had attain Ultimate Bliss Nibbāna. By referring to the Sutta it is clear Lord Buddha knew that Godhika’s is getting ready to suicide and Buddha did not want to stop him. Other significance is Ven. Godhika decided to suicide because of the anomy of failing from the liberation of mind. Even though the commentary state that Ven. Godhika fold from temporary liberation of mind because he was suffering from an unbearable illness. (Saṃyuktanikāya aṭṭhakathā: PTS: 1.183)

The Dhammapadhṭṭhkathā, commentary of Dhammapadapāli, records the story of Sumanā who was a daughter of Anātha Piṇḍika the prominent devotee of Lord Buddha. Sumanā was lady obtained second fruit of the path but remained unmarried. She was in a great disappointment because of the failure in finding a husband. Finally, due to this anomy, she refused to until her death. After the death of younger daughter Anāta Piṇḍika visited the Blessed One sadly and informed the suicide of his beloved daughter Sumanā and Lord Buddha by seen from his divine eye told Anāta Piṇḍika she had born in Thusita heaven. (Dhammapadhṭṭhkathā: PTS: 1.150-152) This is a point to prove the people who are suicide does not born in the stage of deprivation and Buddhism pays a neutral attitude on the people who suicide.

Mahāparinibbāna Sutta reports the Buddha relinquishes his will to live. (āyu sanskāra) (Dighanikāya: PTS: 2.106) According to the sutta Buddha relinquishes his will to live when he was eighty. The Blessed One also was unable to nourish the physical body because it was subject to decay rapidly. Even during the period of
Buddha some monks had come and received the permission for the relinquishment for their own lives and the blessed one accepted it. As it is mention in Udānapāli Ven. Dabbamalla visited Lord Buddha and informed that he is ready to relinquishes his will to live and Buddha replied whatever you with it is the time for that. (Udānapāli: PTS: 92) In accordance to modern interpretation of relinquish the will to live is not considered as a suicide. As an adequate scholar in this subject, Dr. John Leach denotes that, ‘Psychogenic death is real. It isn’t suicide, it isn’t linked to depression, but the act of giving up on life and dying usually within days is a very real condition often linked to severe trauma.’ (Leach: 2018) Accordingly, the above statement modern scientific knowledge does not go against the concept of relinquishment as an offense or a self-murder.

In other hand, it is a major offense for a monk (pārājīka) to encouraging or admiring one’s death. (Pārājikapāli: PTS: 3.67) It is no doubt Buddhism totally rejects getting one’s life for both laity and clergy. The first precept recommended for laity, define as, ‘Abandoning the taking of one’s life, refraining from taking one’s life, without stick or sword, scrupulous, compassionate, trembling for the welfare of all living.’ (Majjhimanikāya: PTS: 1.179) Here it is well mentioned that taking one’s life is the infraction of the precept. In this context, it is a controversial the doctor’s duty in euthanasia within the patient. In modern medical suicide patient must have the recommendation of his/her doctor and in the help of the doctor, he/she can receive his/her medical suicide. In this case, there is an argument by helping to suicide (whether it is euthanasia or medical suicide) or recommending a patient for suicide, does the doctor participate for taking one’s life. According to Buddhism, one’s action decided as wholesome or unwholesome, good or evil, merit or sin by considering the volition and the result. If an action is done by an unwholesome volition it is a sin or evil. In other hand, if an action done by wholesome volition it is considered as merit or good. (Dīghanikāya: PTS: 3.214)

Similarly, after conducting an action, if the result generate regret, it is considered as unwholesome or sin or evil and if the result could reap gratified happy at heart, it is considered as wholesome or merit or good. (Dhammapapāli: PTS: 9) Here, if the doctor is serving
his/her patient with a great sympathy thinking that the death is the only medical treatment for the ill and if the patient also requesting the medical suicide after the patient's medical suicide doctor does not have any penitence, doctor does not violate the first precept.

The euthanasia is defined as administration of a painless death of a patient suffering from incurable and painful illness which is in the terminal stage. In some parts of the world especially in the East, this concept of euthanasia is not welcomed due to government regulations as well as public opinions. When taking euthanasia into consideration from a Buddhist’s perspective one can see the similarities in the way some noble monks who had left the free will to continue their lives and requested Buddha the permission to attain the eternal bliss. And one should notice that Buddha himself left his will to live (āyu sanskāra) at his last part of life coming into the conclusion that his mental and physical existence no longer required. Also, one should understand at the same time that the Buddhist perspective on murdering or incentive for the death is a highly sinful deed in any circumstances.

CONCLUSION

The concept of Euthanasia - medical suicide had been accepted by several western countries as well as in some parts of Asia. One can say in a Buddhist perspective the concept of Euthanasia seems applicable within its boundaries. According to Buddhism taking one’s life or even appreciating the death or suicide is a major offense for clergy and laity without any doubt. But with the reference to early Buddhist teachings, the concept of free will grants the permission the immunity to act according to one’s thoughts and emotions within the identified moral structure. Some monks who simultaneously lived in Buddha’s period and suffered from incurable pain were suicided themselves and Buddha was silence during such circumstance. The modern concept Euthanasia - the medical suicide is an action that can get by a patient who suffers from incurable ill or agony under certain criteria. Therefore, through a critical investigation, we can get to know though Buddhism rejects any kind of killing beans directly or indirectly, Buddhism follows a positive attitude regarding the concept of Euthanasia.
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