Euthanasia controversy in China: do we have the right to die?

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Jianhua Mao presented the concept of the research. Wei Zhou, Chenchen Hu and Anqi Li wrote the initial manuscript together. Qing Wang and Yuqiang Sun make constructive suggestions. Xinyu Wang, Siyi Jin and Jiayi Si helped to improve the language. All the authors reviewed the final version.

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Abbreviations
PAS, physician-assisted suicide.

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Abstract
This research examines the contentious issue of euthanasia and physician-assisted suicide in the context of China’s unique conditions. Historically, the debate over euthanasia has been influenced by moral philosophy and ethics, and euthanasia is illegal in China at present. The research explores the difficulty in making euthanasia legalized across five key dimensions: financial, medical, social, legal, and psychological factors. We conclude that while there is a desire among some terminally ill patients for euthanasia, the current situation in China makes it unsuitable for legalization. The profound question of one’s right to die remains a significant moral and judicial challenge, indicating the need for continued dialogue and nuanced understanding of this complex issue.

Keywords: euthanasia; physician-assisted suicide; China; legislation
Background

Throughout the history of moral philosophy and ethics, few topics have generated as much debate as euthanasia. Euthanasia is recognized as being either active or passive [1, 2]. Passive euthanasia usually means withdrawing life support, while active euthanasia means injecting lethal under the help of physicians [3]. Arguments about the ethics of euthanasia and physician-assisted suicide (PAS) date from ancient Greece and Rome, where many people preferred voluntary death to endless agony [4]. In modern society, there have many legally practices for euthanasia and PAS over the last 30 years. Both euthanasia and PAS are illegal in some developed countries, such as Luxembourg, Netherlands, Belgium, Colombia, and Canada [5]. However, euthanasia-related ethics and legality are still controversial until now [6, 7]. For instance, 8 states in USA have legalized PAS, including Oregon, Washington, Montana, Vermont, California, Colorado, Hawaii and New Jersey, while the others have not passed the relevant laws [5, 8, 9, 10].

Different from European and American countries, the attitude of Asian people towards euthanasia and is conservative. For example, Indians advocate passive euthanasia instead of active euthanasia [11]. According to a cross-sectional study in Hong Kong, China, more than half of the participants who are medical students hold a negative attitude towards euthanasia [12]. Attentionally, there is no law regarding euthanasia in China at present.

In the contemporary history of China, the most famous incident that has prompted people to deeply contemplate euthanasia is none other than Wang Mingcheng's application for euthanasia for his mother and himself, separately in 1986 and 2003 [13]. A doctor called Pu Liansheng assisted Wang's mother in ending her life as she endured tremendous pain due to ascites resulting from hepatic cirrhosis. Wang and Pu were initially arrested but were later released as they were held innocent of the charge. Dramatically, Wang was diagnosed with gastric cancer with hepatic metastasis and the pain was difficult to manage even with analgesics. He requested euthanasia for himself, but this time the hospital refused. Based on extensive controversy about the above case, it is worth discussing whether euthanasia should be legalized in China.

China, a socialist and developing country, has a long history of more than 5,000 years. It is hard to determine whether to make euthanasia and PAS legalized based on complex financial, medical, social, legal and psychological circumstances [14]. This article seeks to explore the multifaceted nature of the debate on euthanasia as well as the difficulties in legalizing it in China from the following five aspects.

Financial factor

The economic burden of terminal illness cannot be overlooked. With medical costs soaring and the social security system straining under the pressure of an aging population, euthanasia is sometimes seen as a practical solution to reduce financial strain on families and the healthcare system [15]. However, this perspective can lead to worrying implications about the value of life and the potential for abuse.

In terms of the relationship between economic development and human beings, the ultimate goal of economic development is human development, which is to improve people's quality of life and their living environment [16]. When a person is on the verge of dying due to illness and cannot recover at all, euthanasia may be an effective way to prevent the patient's quality of life from continuing to decline and maintain his dignity. Therefore, euthanasia is in line with economic and social development from the perspective of Chinese development trend. In addition, waste of medical resources is a heavy economic burden for developing countries compared with developed countries. The persons willing to receive euthanasia suffer from incurable diseases. Maintaining their life requires expensive medical expenses, for example, a retrospective study conducted in Shanghai indicated that the annual cost of maintaining a vegetative state in Shanghai is about 100,000 yuan in 2009, which a common family in China simply cannot afford [17]. From an economic point of view, spending so much money to maintain a life that cannot be cured and create any value according to modern medical conditions is undoubtedly a serious waste of money and time. Advocates for euthanasia and PAS consider implementation of euthanasia can not only reduce the financial burden of families, but also effectively save medical resources and ensure other patients to get effective treatment [16].

However, some people hold opposite view for from the point of financial factor euthanasia. There are two main arguments against euthanasia. One is that life itself owns the greatest economic value from a philosophical perspective [19]. As long as life exists, it is valuable and priceless. And life is equivalent, whose value cannot be measured by economic value. The idea that one person's life can be sacrificed to attenuate the patient’s family financial burden is against the principle of value of life, which will result in serious consequences of life inequality, leading to the occurrence of some people transplanting other people's lives. The other argument is that the subjects of euthanasia, though already on the brink of death, are still alive, so that they may benefit from the latest developments in medicine. If the patient is not euthanized, the newest medicine may break the limit of 'incurable disease', and the patient may be completely cured and returned to the society to create economic and social value for society. From an economic standpoint, it is difficult to determine whether euthanasia is more beneficial than harmful.

Medical factor

China's healthcare system is undergoing significant reform, but it still faces challenges in providing palliative care, where the focus is on comfort and quality of life rather than cure [20]. The lack of resources for and understanding of palliative care often leaves terminally ill patients in pain and without dignity in their final days, which inevitably brings the discussion of euthanasia to the forefront. Based on literature collection, some medical factors may influence the legalization of euthanasia and PAS in China (Table 1) [21–24].

Social factor

China's cultural and philosophical traditions are deeply rooted in Confucianism, Taoism, and Buddhism, all of which emphasize the sanctity of life. In Confucian thought, the principles of filial piety and benevolence dictate that one must respect and care for one's elders and that taking a life, even one's own, violates the natural order and harmony [25]. Taoism, with its emphasis on following the natural course of things, suggests that life and death are part of the Tao and must remain undisturbed by human action [26]. Buddhism also promotes the sanctity of life, with the first precept prohibiting the taking of life [27]. These philosophical underpinnings have historically influenced the Chinese stance on euthanasia, fostering a societal norm where the practice is largely rejected and frowned upon [28, 29].

However, the rapid socio-economic changes and exposure to global philosophies have introduced new dimensions to this traditional view. The rise of individualism and personal autonomy, as witnessed in many Western societies, has begun to challenge the collective and duty-bound mindset of traditional Chinese culture. Younger generations in urban centers are increasingly advocating for the right to choose their life's course, including their end [12].

Legal factor

Li Peigen, an academician of the Chinese Academy of Engineering, has proposed the legislation of ‘euthanasia’ and been willing to have the right to choose euthanasia for himself [30]. At present, according to the Criminal Law of the People's Republic of China and the amendments to the Criminal Law promulgated by the Supreme Law, euthanasia is completely consistent with intentional homicide in terms of both subjective guilt and objective manifestation, as well as in the object of infringement. If euthanasia is deemed legal by the law, it could potentially lead to cases of intentional homicide. Legalization might only proceed if China's existing laws can distinguish between euthanasia and intentional killing. Moreover, one of the bases for the
Table 1 The possible medical factors and their corresponding explanations that hinder the process of legalization

<table>
<thead>
<tr>
<th>Medical factor</th>
<th>Explanations</th>
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<tr>
<td>Medical Ethics</td>
<td>The Hippocratic Oath traditionally taken by physicians upholds the principle of &quot;do no harm,&quot; which can be interpreted as being at odds with the practice of euthanasia [21]. Debates around medical ethics, the sanctity of life, and the role of a physician in end-of-life care can influence the stance that legislators take on the issue.</td>
</tr>
<tr>
<td>Palliative Care Availability</td>
<td>The development and availability of palliative care services in China can impact euthanasia legislation [22]. Effective palliative care can alleviate suffering and improve the quality of life for terminally ill patients, potentially reducing the demand for euthanasia.</td>
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<td>Healthcare Resources</td>
<td>Limited healthcare resources in some regions from China for terminally ill patients may influence discussions about the legality of euthanasia [23]. There can be a concern that the legalization of euthanasia might lead to its misuse or pressure on vulnerable patients, especially in resource-constrained settings.</td>
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<td>Diagnosis and Prognosis Accuracy</td>
<td>The ability of medical professionals to accurately diagnose conditions and predict life expectancy is crucial. Uncertainty in prognosis can be a significant barrier to legitimizing euthanasia because of the risk of ending the life of a patient who might have had the potential for recovery or a reasonable quality of life.</td>
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<tr>
<td>Technological Advances in Medicine</td>
<td>Improvements in medical technology that extend life or potentially cure previously terminal conditions can affect attitudes towards euthanasia. If new treatments offer hope, the push for legalizing euthanasia might be weakened.</td>
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<td>Mental Health Considerations</td>
<td>The assessment of a patient's mental health is critical in decisions about euthanasia. Determining mental competence and ensuring that the choice for euthanasia is free from depression or other influencing mental health conditions is essential. However, the recognition rate of global mental disorders and treatment of mental disorders in China is far below the world average [24].</td>
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</table>

If the above medical problems are not solved, the legalization of euthanasia and PAS in China will face a difficult path. PAS, physician-assisted suicide.

discussion of legalization is that most people must have a basic understanding of the issue and a tendency to identify with it. As China has a large population, it is difficult for most Chinese to achieve an agreement about the sensitive tissues of euthanasia and PAS.

Psychological factor

Psychological factors mainly influence both doctors and patients, as they are indeed involved in the activity of euthanasia. Endangered patients are euthanized by doctors.

Doctors try their best to come up with the best treatments to cure patients when euthanasia is illegal. If euthanasia is legalized, Chinese doctors will face more moral challenges. Although the pursuit of dignified death is a progress in human ideological civilization, doctors will lack the motivation to explore and solve medical problems when most dying persons select euthanasia. To make matters worse, doctors may experience a sense of guilt or even develop psychological issues from assisting patients in dying [31].

Additionally, the elderly in China are easily affected by euthanasia laws because they do not want to burden their children. This may allow many patients who are hopeful of being cured to choose euthanasia actively [32].

Attentionally, the traditional Chinese value system emphasizes family integrity and filial piety. The psychological burden on family members making decisions regarding euthanasia for a loved one can be immense, and this can affect public opinion and, by extension, legislation.

Conclusion

Euthanasia is what some dying patients in China yearn for, but many situations presented in this article show that it is not yet suitable to be carried out in China.

In the euthanasia case, the problem that really can test the judge may not be a provision written in the code, but an eternal question from the patient: "Do we have the right to die?"

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