

POSITION PAPER

EUTHANASIA
AND
ASSISTED
SUICIDE

Church^{of the}
Lutheran
Brethren

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INTRODUCTION

Humanity has a natural desire to be in control. This urge drives much of the decision-making surrounding the national euthanasia discussion. Becoming involved in ethical decision-making regarding end of life issues has become a part of many people's lives. Upon what do they base their decisions? Some people base their point of view on popular opinion and what they believe to be common consensus, but others make such decisions on the basis of their religious beliefs and personal faith.

Our society seems to define life by going beyond physiological definitions about what constitutes life. Such terms as "lacking sufficient quality of life," "tragic circumstances," "unwanted, burdensome," "vegetable," "devoid of meaningful life" and so forth are often used to depersonalize individuals or whole classes of human beings. Once depersonalized these people are seen as burdens or problems, rather than as human beings who hold ultimate value because they were made in the image of God. As individuals in our society attempt to make decisions about what life is and what it is not, the ultimate value placed upon life is diminished. Acts such as partial birth abortion and euthanasia, once considered barbarous are now everyday occurrences.

Medical and technological advancements have produced dilemmas heretofore unknown for individuals and families. For example, we are able to keep a person alive by artificial means long after the body is capable of sustaining life. This produces complex situations in which life and death decisions must be made by individuals, families, doctors and judges. Add to this matrix the willful decision of some to actively end their own lives and to enlist the assistance of others, including doctors, and the result is much confusion, fear and controversy surrounding the end of life issues.

As the people of our society age, the financial burden of caring for an aging population strains our medical resources. Society is tempted to find ways to lessen the burden by narrowing the definition of meaningful life. Some people in both government and the private sector contend that, in the interests of cost containment we cannot afford to devote resources to people who will soon die or whose lives are deemed to lack sufficient quality. Therefore, in the view of some, the right-to-die becomes an obligation to die.

As Christians, we view these developments with great concern. We fear their impact on the elderly and the infirm, who face emotional, financial, and legal pressures to choose to die rather than burden their families. We should be similarly concerned about the impact on the medical profession, whose members' identity as healers is compromised by their potential role as executioners.

The goal of this position paper is to help provide biblically-based guidance when making end of life decisions. Particular attention is given to the meaning of life, death, pain and the right to die. Other rights addressed are that of suicide, physician-assisted suicide, and the refusing or withholding of care. We understand that each decision will be submersed in a blend of unique particulars. To make a blanket statement to cover all circumstances, beyond what the Bible clearly states, is both unrealistic and inappropriate. We trust that the principles outlined in this paper will provide meaningful biblical direction when faced with making end of life decisions.

I. LIFE IS A GIFT FROM GOD, OVER WHICH WE HAVE STEWARDSHIP BUT NOT ABSOLUTE CONTROL.

A. Life is a gift from God

“So God created man in his own image, in the image of God he created him; male and female he created them.” Genesis 1:27

“This is the written account of Adam’s line. When God created man, he made him in the likeness of God. He created them male and female; at the time they were created, he blessed them and called them ‘man.’”
Genesis 5:1-2

“And the Lord God formed man from the dust of the ground and breathed into his nostrils the breath of life, and man became a living being.”
Genesis 2:7

*“...and the dust returns to the ground it came from, and the spirit returns to God who gave it.” Ecclesiastes 12:7 “The God who made the world and everything in it is the Lord of heaven and earth and does not live in temples built by hands. And he is not served by human hands, as if he needed anything, because **he himself gives all men life and breath and everything else.**” Acts 17:24-25*

“Do you not know that your body is a temple of the Holy Spirit, who is in you, whom you have received from God? You are not your own; you were bought with a price. Therefore honor God with your body.” 1 Corinthians 6:19-20

Life did not originate from man but was given by God Himself. God’s blessing is upon human life. Hence, the highest purpose of life is to bring glory to God.

B. Life is precious to God

“Therefore I tell you, do not worry about your life, what you will eat or drink; or about your body, what you will wear. Is not life more important than food, and the body more important than clothes?” Matthew 6:25

“What good will it be for a man if he gains the whole world, yet forfeits his soul? Or what can a man give in exchange for his soul?” Matthew 16:26

God highly values life in the temporal world as well as the eternal.

C. Life should be precious to humans

“After all, no one ever hated his own body, but he feeds and cares for it, just as Christ does the church...” Ephesians 5:29

A human’s natural desire to is care for his or her own life. This motive is revealed in the Bible to be common to the human experience.

D. Life is to be lived with a focus on God

“For to me, to live is Christ and to die is gain.” Philippians 1:21

“If we live, we live to the Lord; and if we die, we die to the Lord. So, whether we live or die, we belong to the Lord.” Romans 14:8

“All these people were still living by faith when they died. They did not receive the things promised; they only saw them and welcomed them from a distance. And they admitted that they were aliens and strangers on earth.” Hebrews 11:13

Our temporal lives tend to center on personal experience, but the Christian knows that there is much more to life than what we experience on earth. The Christian also knows that temporal life on earth affects life hereafter.

E. The days of our lives are ordained by God

“All the days ordained for me were written in your book before one of them came to be.” Psalm 139:16b

“Man’s days are determined; you have decreed the number of his months and have set limits he cannot exceed.” Job 14:5

“Before I formed you in the womb I knew you, before you were born I set you apart; I appointed you as a prophet to the nations.” Jeremiah 1:5

*“For we are God’s workmanship, created in Christ Jesus to do good works, **which God prepared in advance** for us to do.” Ephesians 2:10*

“...let us run with perseverance the race marked out for us.” Hebrews 12:1b

We do not have the authority to determine the extent of our life, God does. God seeks to accomplish His purposes each and every day of our lives. God uniquely sets the course for each person.

F. Life is more than mere physical reality

“Therefore we are always confident and know that as long as we are at home in the body we are away from the Lord. We live by faith, not by sight. We are confident, I say, and would prefer to be away from the body and at home with the Lord.” 2 Corinthians 5:6-8

“For to me, to live is Christ and to die is gain.” Philippians 1:21

Though life is a precious gift from God, the Bible teaches that there is more to our existence than our physical lives. Christians know that this life is but a journey and that heaven is their ultimate destination. We long for the time when we will be absent from the body and at home with the Lord. Death is gain for Christians.

G. God has final jurisdiction over life and death

“The Lord brings death and makes alive; he brings down to the grave and raises up.” 1 Samuel 2:6

“I believe in God, the Father almighty, maker of heaven and earth.”

“What is meant by these words, ‘I believe in God the Father almighty, maker,’ etc? Answer: I hold and believe that I am a creature of God; that is, that he has given and constantly sustains my body, soul, and life, my members great and small, all the faculties and so forth; my food and drink, clothing, means of support, wife and child, servants, house and home, etc. Besides, he makes all creation help provide the comforts and necessities of life – sun, moon, and stars in the heavens, day and night, air, fire, water, the earth and all that it brings forth, birds and fish, beasts, grain and all kinds of produce. Moreover, he gives all physical and temporal blessings – good government, peace, security. Thus we learn

from this article that none of us has his life of himself, or anything else that has been mentioned here or can be mentioned, nor can he by himself preserve any of them, however small and unimportant..." (Dr. Martin Luther, *The Large Catechism*)

There are natural laws which appear to govern our existence, but the Christian recognizes that God is the First Cause of all that supports life as well as ends life.

THEREFORE:

- A. Death should not be actively induced. It should be the result of illness or injury and should not be caused by dehydration or starvation.
- B. If someone is not dying but has a chronic disabling condition (including brain injury), that person has a right to food and water, as well as comfort and care.

II. DEATH IS NOT THE ORIGINAL DESIGN OF GOD, BUT IT IS A REALITY IN OUR FALLEN WORLD

To speak about death and the meaning of death, we must first define it, and then consider its ultimate purpose.

Medical science uses two basic definitions of death: (1) "heart death," said to take place when the heartbeat ceases to register on an electrocardiogram (EKG); and (2) "brain death," said to take place when brain waves cease to register on an electroencephalogram (EEG). With increasing frequency, medics are able to resuscitate a person whose heart has stopped beating and who is considered "heart dead." Partially for this reason, medical science seems to be moving to define death as "brain death."

Scripture views death differently. *James 2:26* states, "*For as the body without the spirit is dead, so faith without works is dead also.*" In the biblical view, death occurs when the human spirit leaves the human body. However, there is no precise test, scientific or otherwise, by which we can determine when this takes place. That being the case, Christians should regard the medical definition, "brain death," as the best available indicator of death. Likewise, medical personnel should use the best scientific evidence of death, "brain death" as well. While Christians can accept this test as the medical evidence of death, they should not lose sight of the true meaning of death as found in Scripture. We should also remember that while God's Word is eternally true, medical technology changes with time. While "brain death" seems to be the best indicator today, it may be supplanted by new technology in the future.

Scripture tells us that death entered the world as a result of sin (Romans 5:12; 1 Corinthians 15:21) and as the penalty for sin (Romans 6:23). Death is sometimes described as separation — separation of the person from the world and other people, separation of the soul from the body, and for the unbeliever, separation of the person from God. But for the believer, death is swallowed up in the victory of Christ over sin and death on the Cross (1 Corinthians 15:54-56), and to be absent from the body is to be present with the Lord (2 Corinthians 5:6-9).

Christian teaching does not regard death as just a part of the life-cycle, as many pagan religions regard it. Rather, death is our enemy (1 Corinthians 15:26) and is identified though not equated with hell and with Satan (Revelation 20:13-14;21:8). We recognize that God sometimes uses the sufferings associated with death to strengthen the believer's faith and character and to prepare the believer for eternal life with Him, and that He sometimes uses the believer's perseverance through suffering as a witness and example to others.

“Like water spilled on the ground, which cannot be recovered, so we must die. But God does not take away life, instead, he devises ways so that the banished person may not remain estranged from him.” 2 Samuel 14:14

III. GOD IS ULTIMATELY SOVEREIGN OVER MATTERS OF LIFE AND DEATH

Some argue that the use of life support systems is at best superfluous, and at worst an interference with the sovereign will of God, because if God wants to keep a patient alive, He doesn't need life support systems to do it. God can preserve the life of a terminally ill patient even without extraordinary life support, if He wills to do so. God can also take the life of a terminally ill patient even despite extraordinary life support, if He wills to do so. The real question is, what should be the attitude and response of the Christian, and especially Christian medical personnel, in such terminal situations?

Today's society is fond of saying, “It's my body, and my life, and I can do what I want with it.” But Scripture says otherwise:

“Do you not know that your body is a temple of the Holy Spirit, who is in you, whom you have received from God? You are not your own; you were bought at a price. Therefore honor God with your body.” 1 Corinthians 6:19-20

God created us; God redeemed us; we are His. Since our lives are not our own, we do not have the right to terminate our own lives.

“No man has power over the wind to contain it; so no one has power over the day of his death . . .” Ecclesiastes 8:8a

Society and government also have some claims upon our lives. For this reason the Supreme Court has repeatedly recognized that the individual does not have an absolute right to terminate his or her life. The state has legitimate interests in preserving human life, among them the future contributions that individual may make to society, whether in the work force, the armed forces, government, economic, artistic, or other. Furthermore, allowing individuals to terminate their lives leads to a cheapening of human life in general.

For these reasons, the Supreme Court in 1997 upheld the constitutionality of a New York statute prohibiting suicide (*Vacco v. Quill*, 138 L.Ed.2d 834), and a Washington statute which prohibited physicians and others from causing or aiding in suicide (*Washington v. Glucksberg*, 138 L.Ed.2d 772). Writing the majority opinion on both bases, Chief Justice Rehnquist noted that:

“For over 700 years, the Anglo-American common law has punished or otherwise disapproved of both suicide and assisting suicide Sir William Blackstone, whose Commentaries on the Laws of England not only provided a definitive summary of the common law but was also a primary legal authority for 18th and 19th century American lawyers, referred to suicide as ‘self-murder’ and ‘the pretended heroism, but real cowardice, of the Stoic philosophers who destroyed themselves to avoid those ills which they had not the fortitude to endure.’” (*Glucksberg* at 782).

Rehnquist added that:

“The prohibitions against assisting suicide never contained exceptions for those who were near death.” *Id.* at 784.

At first glance, physician-assisted suicide may seem more benign than other kinds of suicide. But it actually compounds the ethical dimensions of the issue, for it places the medical profession in the role of taking life rather than preserving life. While the physician may believe he or she is acting out of humane and benevolent motives, in reality he is usurping for himself a role that belongs only to God, that of taking human life. In a very few situations it might be argued that God has delegated that role to certain people, such as soldiers in time of war, police protecting the public from criminals, executioners for those convicted of capital offenses, or those engaged in legitimate defense of themselves or others. But nowhere does Scripture justify a physician or anyone else killing an innocent person to relieve suffering or for other supposedly merciful reasons. With these considerations in mind, Chief Justice Rehnquist noted that “the American Medical Association, like many other medical and physicians’ groups, has concluded that ‘physician-assisted suicide is fundamentally incompatible with the physician’s role as healer.’” *Id.* at 797.

The Court's ruling that the Constitution does not contain or imply a right to physician-assisted suicide did not close the issue. The Court said the Constitution does not prohibit the states from banning suicide. The Court did not say the states must prohibit suicide. In other words, the Court's decision leaves the other branches and levels of government free to consider the issue and fashion appropriate laws and policies. As Chief Justice Rehnquist concluded his opinion,

“Throughout the Nation, Americans are engaged in an earnest and profound debate about the morality, legality, and practicality of physician-assisted suicide. Our holding permits this debate to continue, as it should in a democratic society.” *Id.* at 797.

In *Vacco v. Quill*, the Court referred back to a 1990 decision, *Cruzan v. Director, Missouri Dept of Health*, 111 L.Ed.2d224 and recognized “the distinction between letting a patient die and making the patient die.” *Vacco* at 846. In *Cruzan*, the Court looked at withdrawing life support from terminally ill comatose patients. The Court recognized that the state's interest in preserving life is less compelling when a patient is terminally ill, because a terminally ill person is unlikely to make substantial contributions to society. Accordingly, in the *Cruzan* case the Court upheld a Missouri law which allowed the removal of life support from a terminal comatose patient, upon a showing by clear and convincing evidence that removal of life support would be that patient's desire in these circumstances.

This ruling raises just cause for concern among Christians. On the one hand, we recognize that individual citizens and their families have the right to make certain personal decisions without government interference. On the other hand, the Court treads upon dangerous ground when it measures the right to live or the right to die based upon what contributions one might make to society. God does not necessarily measure “meaningful life” the way man does. God may have reasons for keeping a terminally ill person alive that we are unable to fathom.

Dealing with the issues surrounding the dying process can be a beneficial part of a person's life and that of his or her loved ones. As long as person is living, God has a purpose for his or her life. When He does allow suffering, He always does so with a purpose in mind, although that purpose may be unknown to the individual suffering and to his or her loved ones. The book of Job contains profound wisdom about human suffering. Job tells us, finally, that while God always has reasons for allowing humans to suffer, we often do not know with certainty what those reasons are. God allowed Job to suffer to resolve a conflict between God and Satan – a conflict that Job knew nothing about at the time. He may allow us to suffer to build our endurance (Romans 5:3-5). He may allow us to suffer to enable us to empathize with others (It seems the most compassionate people are usually those who have undergone great suffering themselves). He may allow our suffering to glorify Him as a witness to a loved one, or maybe to a medical provider, to show that person how a believer handles suffering. Or He may allow us to suffer as our

final preparation to be with Him. God used Paul's thorn in the flesh, whatever it was, to keep him humble and dependent upon God's grace (2 Corinthians 12:1-11).

The Christian has a duty to keep on living, and to preserve other human life, recognizing that God has the final jurisdiction over death. Certainly Christians, and particularly those in the medical profession, should actively work to alleviate suffering because Scripture commands us to do so. If Christians oppose suicide and euthanasia, we incur an increased obligation to ensure that terminally ill patients are comfortable. But we should always recognize that God is in sovereign control over pain and suffering as well as over life and death, and He may have reasons for allowing pain that are above our human understanding. Besides working to alleviate suffering, Christians should help people to learn and grow through the suffering process.

“For my thoughts are not your thoughts, neither are your ways my ways,” declares the Lord. “As the heavens are higher than the earth, so are my ways higher than your ways and my thought than your thought.” Isaiah 55:8-9

“Even though I walk through the valley of the shadow of death, I will fear no evil, for you are with me, your rod and your staff, they comfort me.” Psalm 23:4

“And we know that in all things God works for the good of those who love him, who have been called according to his purpose.” Romans 8:28

THEREFORE:

- A. Christians must reject any *deliberate actions* taken for the *purpose* of causing or hastening death i.e., euthanasia. This may include direct action (e.g., administering a lethal injection) or withholding of medical treatment or care (e.g., denying lifesaving medical treatment to a disabled child that would be provided to a normal child or denying food and water.)
- B. If death is imminent and the dying process is irreversible, there is no obligation to provide or continue medical *treatment* that offers no hope of recovery.
- C. Christian medical personnel should be firmly pro-life, that is, firmly in favor of using available means for preserving life, recognizing, of course, that ultimately the question of life or death is in the hands of God.
- D. Christians are encouraged to dictate their end-of-life requests via the establishment of a “living will” or advanced directive and to let family members know of their end-of-life desires, in order to ensure that their lives are not terminated prematurely.

IV. THE PHYSICIAN'S ROLE IS TO HEAL, NOT HARM

A. The Meaning Of Pain

Pain is a sensation that hurts. It is an unpleasant sensory and emotional experience associated with actual or potential tissue damage. While pain arises from a variety of interrelated physical and psychological causes, pain is subjective in the sense that no person can fully communicate the precise nature and degree of his or her pain to another person.

While pain is, by definition, unpleasant, it often serves useful purposes. Pain serves as a warning that something is wrong. Chest pain may warn a person that he needs to see a cardiologist. Pain in the ankle or knee may tell an athlete that he needs to stay out of Saturday's game. Pain in the stomach may tell us that we need to eat or, depending upon the type of pain, stop eating. Without pain, many dangerous illnesses and injuries would go undetected and untreated.

B. The Right To Refuse/Withhold Care

A person has the right to refuse treatment, the right to exercise the rights of a resident of the facility and as a citizen or resident of the United States, and the right to be free of interference, coercion, discrimination, or reprisal from the facility in exercising their rights. If a person has been adjudged incompetent under State law, his or her rights are exercised by the person appointed under State law to act on their behalf. If a person has not been adjudged incompetent, any legal surrogate designated under State law may exercise that person's rights to the extent permitted under State law.

THEREFORE:

- A. If it is uncertain whether or not a person is dying, medical treatment should be provided to give that person the chance for survival.
- B. If death is imminent and the dying process is irreversible, the person has a right to comfort care and pain relief.
- C. Allowing a person to die when a disease process is irreversible and death is obviously imminent in hours or days is *not* euthanasia. Patients — or, when they are not able to speak for themselves, their families — have the freedom to refuse medical treatments which will not cure, improve, or control their disease process, treatments which will impose a burden beyond any benefits.
- D. When a person cannot speak for himself/herself, it falls to the family to make decisions for him/her. The key question at this time must be “What is God's will for this person in light of the Scriptures?” not, “Is this person's life worth living?” or “What is best for us?”
- E. In all discussion of euthanasia and assisted suicide, it is important to differentiate between *care* and medical *treatment*.

Care meets the basic needs — nutrition, hydration, warmth, shelter, emotional and spiritual support — of all people, sick or well. Today, many seek to define food and water as medical treatments that can be withheld to hasten or cause death. This is unacceptable. This does not apply to the time when someone is so close to death that his or her body cannot metabolize food; then feeding may be useless and excessively burdensome. In all other cases, care must never be withheld.

Medical treatment is aimed at curing or controlling acute or chronic health problems. Physicians can use standard treatment in many situations while more advanced or serious situations require aggressive treatment. Standard treatment consists of medical therapy, such as medications, and surgical procedures commonly used to relieve health conditions and other problems due to injuries or illness. When treatment becomes medically futile or the burden of that treatment outweighs its benefits, it must be evaluated considering the best interests of the patient while first and foremost glorifying God and obeying His Word.

- F. As Christians, we are obliged to consider the will of God (Deuteronomy 32:39). The basis of any decision, therefore, is whether a given treatment will benefit or burden the life of a patient, not whether the life of a patient is useless, burdensome or worthy of care.

“For I am convinced that neither death nor life . . . nor anything else . . . will be able to separate us from the love of God which is in Christ Jesus our Lord.” Romans 8:38-39

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