

## **Brief Document on the Islamic Perspective on Assisted Dying**

*Prepared by Shaykh Dr. Umar Al-Qadri for the Joint Committee on Assisted Dying meeting scheduled for December 5, 2023, to explore the viewpoints of religious, faith-based, and other philosophical groups on the topic of Assisted Dying.*

### **Introduction:**

In Islam, the sanctity of human life is a fundamental principle emphasised in both the Holy Qur'an and various Hadiths. The prohibition against suicide is explicitly stated, with verses such as "Do not kill yourselves, for verily Allah has been to you most merciful" (Chapter 4, Verse 29) and "Take not life which Allah has made sacred" (Chapter 6, Verse 151).

The Hadith text further reinforces the prohibition of suicide, even in the face of unbearable pain (Sahih Al-Bukhari 1365 & 6606).

According to all Muslim jurists, Islam stands united against euthanasia and assisted suicide. These acts, often euphemized as "assisted dying," are unequivocally regarded as murder in Islamic teachings. Islam rejects all forms of assisted suicide, be it voluntary or non-voluntary, direct or indirect, active or passive.

### **Reasons for Opposition:**

#### *Sanctity of Human Life:*

Islam places paramount importance on the sanctity of human life, considering interference in the natural course of death as forbidden. The Holy Qur'an stresses the predetermined timing of an individual's death by Allah, discouraging actions like assisted suicide or euthanasia.

#### *Endurance and Patience:*

Islamic doctrine encourages patience and endurance in the face of hardships, suffering, and illness. These challenges are viewed as opportunities for spiritual purification and growth, aligning with the belief that Allah's mercy prevails even in difficult times.

#### *Conscientious Objection:*

Islam recognises the right to conscientious objection, allowing medical professionals and patients the autonomy to abstain from participating in procedures that may hasten or assist in a patient's death.

## **Concerns regarding Assisted Dying:**

### *Underlying Causes of Health Issues:*

We are concerned that legalising assisted death may lead individuals with health issues like depression to choose death rather than addressing the underlying causes of their conditions.

### *Pressure on Vulnerable Populations*

Legalisation of assisted death may increase pressure on people with disabilities or the elderly to choose death to avoid being perceived as burdensome to others.

### *Neglect of Long-Term Care:*

We fear that the healthcare system may begin to neglect long-term care and chronic diseases in the elderly if assisted death is legalised.

## **Permissibility of Forgoing of Medical Care**

Islamic rulings permit the forgoing of medical care under specific circumstances. This is considered permissible when a patient's death is deemed inevitable or in situations described as "futile" or "useless." Instances where there is "no chance of survival" or when physicians have "lost hope for life" are also considered grounds for the permissibility of forgoing medical care. Some jurists not only permit but recommend the forgoing of medical care, particularly in situations involving terminal pain. Their endorsement adds weight to the discourse on ethical decision-making in end-of-life scenarios.

### *Distinction Between Life Support and Ancillary Interventions*

Islamic rulings draw a clear distinction between two categories of end-of-life treatment: life support and ancillary interventions. While life support treatments, such as assisted mechanical ventilation, are deemed permissible to stop, ancillary treatments including nutrition, hydration, pain control, and antibiotics are advised to be continued.

### *Futility Considerations and Clinician Flexibility*

Assessments of futility permit clinicians to withdraw or withhold life-sustaining treatment. In Islamic jurisprudence, there is an absence of strict criteria for determining treatment futility, granting clinicians flexibility, and relying on their expertise in the decision-making process. According to some jurists, the assessment of futility may require the consensus of three specialists to ensure a thorough and well-informed evaluation.

### *Decisions on Withholding and Withdrawal of Medical Care*

Decisions on withholding and withdrawing medical care are guided by specific conditions justifying these actions. These include terminal or inevitable death, situations where there is no hope for a cure, and cases involving the loss of *Idrak* (part of the brain that perceives) or the inability to stay alive without life-sustaining interventions such as a ventilator.

### *Conditions Justifying Withholding of Medical Care*

Further considerations involve conditions justifying the withholding of medical care, such as a patient being unfit for resuscitation, an illness unresponsive to treatment with certain death, incapacitated patients or states of mental inactivity, untreatable brain damage, and situations where resuscitation would be inappropriate or ineffective.

### *Brain Stem Death*

Most scholars permit the discontinuation of life support in the condition of brain stem death. Some jurists equate brain death with death itself, and confirmation by three expert physicians is required.

## **Pain Control in Palliative Care/End-of-Life**

### *Severe Pain in Non-Terminal Patients*

In addressing pain control in palliative care, non-terminal patients are advised to endure severe pain with patience. However, seeking physician assistance in actively ending one's life due to pain is considered equivalent to murder.

### *Severe Pain during the Final Stage of Illness*

When severe pain occurs during the final stage of illness, Islamic rulings, consider it an acceptable indication for withholding or discontinuing care. Importantly, this is distinguished from "mercy killing," as it involves no positive action by the physician. Justification is provided for stopping medication when recovery is unlikely and pain is increasing, differentiating this practice from assisted dying, as it involves leaving what is not obligatory or recommended, with no responsibility on the physician's part. Emphasis should be on the introduction of appropriate pain killing medications and measures to alleviate the pain and suffering of the patient in question. It is crucial for treating physicians to exercise extreme care and caution when administering potent painkillers and muscle relaxants. Striking a delicate balance is essential to ensure the patient's comfort while avoiding the unintentional induction of a coma, which could be misconstrued as an early step toward euthanasia, a practice strictly forbidden in Islam.

## **Conclusion:**

The opposition to assisted dying in Islam is rooted in the profound respect for the sanctity of human life, adherence to religious teachings, and ethical considerations within the medical profession. The concerns raised encompass the potential consequences of legalising assisted death, emphasising the need for addressing root causes, providing emotional support, and maintaining the dignity and value of every human life. The nuanced approach in Islamic teachings towards forgoing medical care underscores the importance of ethical decision-making in end-of-life scenarios, recognising the delicate balance between respecting the sanctity of life and allowing for compassionate care in the face of inevitable death.