

Special Article

Nurses' View in Greece and Abroad on the Choice of Euthanasia in Patients with Terminal Cancer

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Abstract

Introduction: Cancer is a disease that affects many people worldwide. Researches support that it is the 2nd most common cause of death. During the disease, patients suffer not only physically but also psychologically, especially those who are in the final stage. For this reason, these patients are feeling dependent and tired of the whole situation they are facing, wanting to end their lives through euthanasia.

Purpose of the study: The investigation of nurses' attitudes towards the controversial issue of euthanasia and the right of terminal cancer patients to it.

Methodology: An extensive review of the relevant literature was carried out, searching and selecting research studies and review articles in Greek and English language in international databases (PubMed, Google Scholar, National Library of Medicine, ScienceDirect).

Conclusions: A greater basis must be given on the subject of euthanasia to clarify it. Especially in the Greek area, no specific attitude has been given towards this, as a result of which there are not so many studies regarding this issue. Further investigation of this topic can bring more advantages to nursing and medical practice as mistakes in offering health services to end-stage cancer patients can be found, and even new ways or methods to improve them. Finally, most of the people will be able to understand the reason for the patient's desire for euthanasia.

Keywords: cancer, euthanasia, physician-assisted suicide, withdrawal treatment

Introduction

Cancer as being a very serious disease affects the patient not only physically but also psychologically. The symptoms that appear in his/her body affect negatively his/her personal image and therefore his/her

mental health. At the same time, it is a disease that every person who has it needs to run a lot of tests, do surgeries and get treatments and drugs with high cost. All of these procedures cause not only to every patient but his family and friends stress, especially if one is not in a good financial

situation. Additional sadness and anxiety are caused to the patient, since it is not easy to manage certain roles and situations, due to the disease, such as family, work, sexual functionality, etc... All these worries and problems start to exist from the 1st stage till the last one (Fleba H., 2021).

Palliative care aims to reduce pain and address any social, physiological and spiritual problem of the patient and his/her family. The main concern is to ensure the best quality of life (Chatziargyriou K., 2015). Still, there are individuals who do not wish to continue their life being in such situation, hopeless, enduring all of that pain. In other countries there is a way that allows them to end their life. That is euthanasia.

For many centuries, all over the world, there has been a perception that dignified death must come through natural causes, while everything else is considered a crime. There are now countries in which euthanasia is legally accepted under certain conditions. In Greece, however, this is not the case. Through the analysis of the concept of euthanasia, several ethical questions are raised such as:

- What are the criteria so that definitive termination of the patient's life can be chosen?
- Can death really be seen as a way of relieving pain?
- What attitude should health professionals have towards this issue?
- Are the motives of those who will participate in the euthanasia process humanitarian in nature (Karaflitsi A., 2018)?

The purpose of this article is to describe terminally ill cancer patients and after understanding the difficulties they face due to the disease, to define euthanasia and to analyse the content of this concept. Furthermore, the Greek and European ethical and legal framework will be mentioned. Finally, it will be noted the main concern that exists in the medical field, especially in a legal context, since all treatment options have been exhausted. This is the attitude towards the choice of the terminal oncological patient for euthanasia.

Prevalence

Europe accounts for 23% of cancer sufferers. 75% of cancer cases in Europe occur in people over 60 years of age. According to the latest valid data, in 2020, the cancers with the highest mortality in the EU are lung cancer with a mortality rate of 20.3%, colorectal cancer with 12.3%, breast cancer with 7.2%, pancreatic cancer with 7%, prostate cancer with 5.5%, liver cancer with 4.2% and stomach cancer with 4.1%. The overall death rate of other types of cancer is 39.3%. The total number of deaths in the EU that year was 1,269,399 (European Parliament, 2020).

In Greece, according to the World Health Organization, with a population of about 10.5 million people, the number of deaths from cancer has reached the 30.000 people, mainly affecting >75 year-old men. Lung cancer is the type of cancer that occurs in most cases and also the one that has the highest death rate in Greece. The second most common type of cancer in Greece is breast cancer, but despite its frequency of occurrence, the mortality rate for these patients is only 6.6%. Another type of cancer that ranks 3rd in incidence but 2nd in mortality rate is colorectal cancer from which 10.3% of sufferers have died (WHO, 2020). Depending on the type of cancer and the location in which the tumor is located, various symptoms can occur.

Types of pain

A common symptom experienced by an oncology patient is pain. Of course, the type, frequency and intensity of the pain can vary depending on the person experiencing it, the type of cancer and the stage cancer is in. *Pain can be defined as "a physical and emotional experience derived from actual or potential tissue damage or the same experience as if a tissue damage existed"* (Kyrgianni A., 2016). Based on this definition, the oncological patient, especially those in the terminal stage, is not only affected by pain physically but also psychologically. Thus, it is very important to know the details of the type of pain or even in which exact place it is located, because it will contribute to a large extent to the relief

of pain. The scale of pain is determined by a set of several factors such as socio-cultural problems, religious beliefs, symptoms caused to the body and unstable psychology. Therefore, the treatment of pain should not only be pharmaceutical, but there should also be given psychological support towards the patient (Aliferis E., et.al., 2021).

The pain that a cancer patient may feel is divided into the following types:

- **Pathophysiological pain:** this type of pain is so called of its characteristics. Depending on the pathophysiology and the site at which it is located, it can have several subtypes. Atypical example may be pain located to the bones. It has occurred due to the metastasis of the tumor to the bones, as the tumor infiltrates the bone tissue causing its destruction. It inhibits and restricts the movement of the person, not only creating an issue in their daily life but also causing concern. Another example of a subtype of pathophysiological pain that is important to be mentioned is neuropathic pain. This pain is caused by damage or injury to the central or peripheral nervous system (Hasioti A., 2008).
- **Etiological pain:** causative pain is caused by a specific cause or pathological process. These causes are related to symptoms arising from cancer such as metastases, tumor infiltration of tissue, compression of nerve structures by the tumor and muscle contraction (Hasioti A., 2008).
- **Acute and chronic pain:** these two types are characterized by the duration of the pain caused to the person. The duration of pain is one of the primary characteristics that are assessed, identifying different medical picture, different symptoms and way of treatment from patient to patient. Acute pain is of short to instantaneous duration and can be caused due to an injury, contusion, muscle or visceral dysfunction and due to specific procedures during radiotherapy (Hasioti A., 2008).
- **Universal pain:** this type of pain is felt by a very large number of cancer sufferers, since the factors that cause it are economic, psychological, spiritual and social (Hasioti A., 2008).

Psychological impact on the oncology patient

Cancer being a very serious disease does not only affect a person's physical appearance. It also has a significant impact on their mental health and social life. So, the psychological impacts on the oncology patient are many and significant (Dover L., 2017).

On a financial level, they are mainly negatively affected, since although the state gives the patient various allowances to help them financially, the money still is not enough. The treatment needed to treat cancer and also the care that has to be given to the patient, especially those in terminal stage, are really expensive. At the same time, the patient, because of his/her condition, cannot work. So, he/she is not able to earn extra income. Another further negative impact is the supply and productivity aspect. It is not possible for the patient to contribute to society by working, nor financially to his family and himself/herself, nor to participate in vigorous activities due to physical and mental fatigue. Therefore, the patient considers himself/herself socially neglected (Marinaki V., 2018, Dover L., 2017).

On psychological level, a cancer patient is only negatively affected. From financial pressure, to the social role he/she cannot carry out and his personal appearance. Another factor that has a significant impact on his poor psychological state is his physical image. Due to treatments that the patient receives, he/she faces changes in his/her appearance such as alopecia, weight loss, dermatological symptoms, ulcers, bedsores, vomiting, etc... Particularly women that suffer from breast cancer may need surgery. That is one of all the reasons that she feels insecure and has low self-esteem, thinking that her image as a woman is negatively differentiated. As a result of the above, the patient starts suffering from mental disorders. The main and most frequently occurring mental disorder in an oncology patient is depression. Any mental disorder in such a patient is accompanied by feelings of anxiety, fear, sadness and in some cases suicidal tendencies. Furthermore, he/she feels weak and dependent on doctors and relatives, wanting to receive constant

support and reassurance, since receiving love and trust from his/her loved ones is an important part of cancer treatment (Grapsa E., 2015).

Forms of euthanasia

Euthanasia is a term is found since Ancient Greece and from which its etymology comes from, namely *''εὖ''* (-well) and *''θνήσκειν''* (-dying) which means happy, glorious or even painless death (Mpompota E., 2017). However, most people usually compare this term with assisted suicide. These two terms are actually different but controversial issues. Based on this information, generally speaking, euthanasia is divided into two categories which are active and passive euthanasia, while based on the modern definition, its forms are voluntary/involuntary euthanasia, medically assisted suicide and termination of treatment (NHS, 2023).

Each form of euthanasia is analysed as follows:

- **Active euthanasia:** Taking a human life by the use of lethal means
- **Passive euthanasia:** Taking of a patient's life at will, either by the use of a drug that induces death, the so-called medical assisted suicide, or the discontinuation of the treatment (drug or mechanical support). The termination of treatment may be expressed at the time or there may have been a legal written expression of that wish.
- **Voluntary euthanasia:** When the patient consents to die by painless means
- **Involuntary euthanasia:** The patient's consent cannot be obtained to take his/ her life because he/she has serious physical or psychological damage, such as psychiatric patients or those in a coma (Kozamani A., 2019).

Legislation

Euthanasia is a dilemma that arises especially in recent years where there has been an increase in the average life expectancy of people, combined with insufficient medical knowledge and thus the inability of doctors to provide treatment for

incurable diseases or irreversible conditions, but also due to of financial distress. As a result of this fact, the multitude of people do not have the mental strength to cope with them. This is why euthanasia is a highly controversial issue in most of countries especially in a legal context. It is difficult to regulate it legally since every country differs in morals, values, ideology and also in culture, politics and society. Moreover, the boundaries of this issue are difficult to distinguish because there is a fine line between morality and law (Galanis P., 2020).

In Greece, euthanasia is not referred to in this exact term in the legislation, but is considered almost identical to the phrase homicide with consent, hence the reference to it. This issue has not been discussed enough in Greece for it to be covered by law under the current legislation. Consequently, it does not seem to have been such concern to the state that it has come to a precise legislative conclusion. An act carried out by a third person, even a doctor, I prosecuted as a crime if the question of the right to life is raised. More specifically, the article in Criminal Law which directly addresses the issue of euthanasia is listed. This is *Article 300C.L. ''Whoever decided and executed homicide after an important and persistent request of the victim and out of pity for him who suffered from a terminal illness shall be punished by imprisonment. ''*. Two more articles that could be indirectly related to the form of euthanasia-medically assisted suicide are *299C.L./ manslaughter with consent, 301C.L./ participation in suicide* (Legal Information Bank of the DSA, 2019) and in the Code of Medical Ethics 29 C.M.E. (Athens Medical Association, 2018; Tsavdaridou N.E., 2018).

In analyzing Article 300 from Criminal Law, a number of observations are made:

- Whoever patient requesting physician-assisted suicide must be suffering from a non-curable disease. Such qualifying illnesses are considered to be physical or mental illnesses that cannot be cured based on modern, medical standards. Blindness, paralysis, amputation and some specific mental illnesses are included in this type of illnesses.

- The "victim" must have made clear his or her wish to be euthanized, while having a long persisted with the symptoms and pain of the disease. He/she must express this wish after much thought consent up to the last moment when the act is to be performed. Furthermore, in order for this to be taken seriously, he/she must not be suffering from a mental illness or be a minor, so that he/she has the capacity to express a valid will.

- Compassion is a feeling that a person may feel for the patient/sufferer because of the situation they are in. In the event that this person takes that person's life, it is seen as a factor to lessen the guilt of the crime that they have committed. He/she shows that in this way he/she feels sorry for him/her and takes pity on him/her and thus finds himself/herself in a state of intense mental pressure. So, he/she considers that this act is the only solution now for the sufferer.

- Manslaughter by consent is considered a crime and is punishable by imprisonment. However, the years of imprisonment are reduced if there are mitigating circumstances, according to Articles 36C.L. and 84C.L.. Nevertheless, mercy is not mentioned as a mitigating circumstance, because the legislator has already evaluated this circumstance during the formulation of the framework (Simeonidou-Kastanidou E., 2020).

Nurses' views on euthanasia

Nurses, as health professionals who are constantly by the patient's side, unlike other health professions, are confronted daily with the image of how patients experience serious illnesses and/or conditions. They can be considered as "messengers" as they convey every concern, feeling, symptom and wish of patient to doctors. Therefore, the attitudes of nurses towards this very sensitive subject are of great importance (Afriyie D., 2020).

In Greece, modern researches for euthanasia have taken place in various areas of the country. The results obtained are different in each of them. A research conducted in several hospitals in Greece between Attica, Peloponnese, Macedonia, Epirus and Crete, in 2015, consisted a sample of 291 nurses. It

is worth noting the answers to the question on whether they would ever discuss the option of euthanasia with a patient with terminal cancer were 65.6% negative, while as to whether they would like the euthanasia procedure to be legalized in Greece, provided the patient in terminal disease, 45.2% answered positively in this regard. However, if euthanasia was legalized and the terminal ill patient requested this option, 55% of nurses would consider performing the act (Parpa E.H., 2015).

Another research was carried out in three hospitals in Thessaloniki in which 120 nurses participated. Specifically, it was investigated their attitude not only towards euthanasia, but also towards death. It is important to make the correlation between these two different but so interrelated aspects, as the attitude towards death can bring a corresponding view on euthanasia. A fairly large percentage believe in heaven and that they will have a good afterlife, reunited with their dead loved ones, without believing that death offers an escape from a world of many problems. Another serious majority of 52.5% believe that the afterlife is the reason that helps them cope with death. Then, using the Euthanasia Attitude Scale, the results emerged. 70% were in favor of euthanasia with the main points of the results of the questionnaire responses being:

- 87% disagreed with abolishing palliative care

- 81% disagreed with the sentence to keep the patient alive with help of medical care, even though they are brain dead

- 80% disagreed with the sentence that anyone who has committed a consensual homicide on a terminally ill patient/sufferer is considered a criminal

- 74%-77% agreed with the sentence to allow the terminally ill and suffering patient to have the option of taking their life in a quick and easy way (Paparantza D., 2019).

One of the largest, international and most contemporary studies conducted in 2021 was a systematic narrative review study. Articles were selected that addressed the topic of

interest, namely nurses' attitudes towards euthanasia. The sample of nurses was 3571 nurses. In most researches nurses seemed to lack knowledge, not only in the theoretical but also in the practical part of euthanasia. Nevertheless, the largest percentage of them would be interested in practicing euthanasia on the patient, especially nurses providing palliative care (67.3%). On the other hand, some nurses would prefer to help only in preparing the medicine that will contribute to the euthanasia process. Of course, in countries where euthanasia has been legalized, such as Belgium and the Netherlands, the vast majority, i.e. 80% of nurses would like euthanasia practice to be considered as one of their main tasks. On the side, they feel it is very important to discuss a patient's request for euthanasia and the way it is to be carried out. Finally, in this study it appeared that factors such religion and years of service did not have as much influence in sharpening their views as only culture, social pressure and moral values. However, in one of the studies conducted, the result that obtained was that those who were unmarried, with high level of knowledge and few years of experience in the profession were the ones who wanted to practice euthanasia (Crusat-Abelló E., et.al., 2021).

Discussion

Cancer is one of the most common, serious and deadly diseases worldwide. This is fully understood and undeniable, since according to statistical studies it ranks second in terms of morality (Bray F., et.al., 2021). However, apart from the morality aspect, it is also important that it is a chronic, serious disease that causes physical and mental suffering for an oncologic patient and those around him/her. It brings with it symptoms that affect one's personal image, such as alopecia, cancerous ulcers, bedwetting, vomiting, dermatological disorders and various kinds of pain (Grapsa E., 2015). As a chronic disease, a combination of different treatments must be applied. That is why mental fortitude must be deposited by the sufferer, but also whatever physical strength is left. However, the effects on the patient are mainly negative, with difficulties in his

lifestyle, making him emotionally unstable, with low self-esteem and dependent on his inner circle (Dover L., 2017). In particular, a terminal cancer patient experiences all the above feelings and symptoms even more intensely, the most intense of which is the feeling of pain. Believing that as the intensity and frequency of pain increases, the quality and life expectancy decreases, they wish to end their lives through the act of euthanasia (Hasioti A., 2008).

Euthanasia a serious and controversial issue that is not so much discussed in some countries, which consider it criminal act (Galanis P., 2020). Greece is one of them (Athens Medical Association, 2018). Opinions are divided and the cause of this disagreement is mainly due to different religious beliefs of people and the morality and ethics of each individual. The legal framework, according to which human life must be protected, also plays a major role, and a patient, even if he/she is terminally ill, should receive respect and appropriate care until the natural end of life (Athens Medical Association, 2018, Tsavdaridou N.E., 2018). Nevertheless, in countries where euthanasia or a form of it, so-called medically assisted euthanasia, is permitted, there is an increasing demand for it from patients, especially those suffering from terminal cancer (Crusat-Abelló E., et.al., 2021).

It is also an issue that raises ethical issues of life as well as these in society. The views that someone may express on this issue may be mainly due to religious beliefs but also to the morals that the individual may have towards life. It is therefore quite important to always examine certain principles such as the Hippocratic oath, justice, human autonomy and the right to life, but also justice (Fontalis A., et.al., 2018).

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