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What are the contributions of the Euthanasia Debate to Management: a discussion of the ethical dilemma

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Abstract: The aim of this work was to characterize euthanasia from an ethical perspective and to build meanings for management, through the comparison of research and its relations with the Nuremberg Code and the Declaration of Helsinki. Nine articles were selected with the construct "euthanasia" to identify the current discussions on the theme that demonstrates its multidisciplinary character. To achieve the proposed objective, the content analysis was performed that separated the theme into five clusters, relating the frequency and significance. The results indicate that euthanasia is related to autonomy, freedom, dignity, the right to life and social problems that can induce death without due reflection, the same is the case with organizations. These rights would be protected by medical ethics that has no global conformity, mainly by the moderating effect that deals with social issues, in the management individual decisions tend to contain misunderstandings so collegiate decisions maintain more coherence with the institutional purpose, respecting different cultures.

Keywords: Euthanasia; Nuremberg Code; Declaration of Helsinki.

1 INTRODUÇÃO

The right to life has been a matter of debate and dispute, as to the dignity, autonomy and freedom that influence the legal field by the pressure of society.

There is no common sense about dignity since death in the case of terminal illness would be a relief for the patient. The understanding is realized in the idea of giving a previous care to the patient so that he can alleviate the suffering or even the doctor to protect himself from other effects provided by legal and moral responsibility.

One of the ideas that guide this issue is related to social problems, caused by unemployment, income, retirement, psychic problems of various orders and even religious and cultural. In this regard, the management of organizations as providers of social responsibility should contribute to the reduction of these social disorders, relying only on public organizations is to make monocratic decisions that do not contribute to the construction of social equity.

In this sense the provocation of the question revolves around who is responsible for the decision, some judged allowed assisted suicide, eliminating the decision by third parties. In this perspective, the patient would have greater autonomy, which would eliminate the responsibility of the act by the doctor, who only performs the patient's will.





It is problematic from an ethical point of view, it has to be evaluated considering the Nuremberg code and the Declaration of Helsinki, which deal with medical ethics. Although created in different years, they are instruments to be observed by the medical community. The main difference lies in the attribution of responsibility for the procedure. While in the Nuremberg code the doctor had a full decision, in the Declaration of Helsinki there is an evaluation committee and the guarantee that no research will take place without this approval. Management may be focused on one of these codes, certainly if management is in the Nuremberg code tends to be more centralizing, giving little room to creativity and diversity of opinions, on the other hand if the company is more focused on the declaration of Helsinki, decisions will be shared and tend to have greater diversity of opinions and more systemic decisions.

Thus, the comparison between recent publications on the subject and the abovementioned codes of ethics show that a global consent of the theme is still necessary since there are different understandings between countries. Thus, the objective of this work was to compare the recent productions of the research with the codes, in order to evaluate the differences and make a parallel with organizational management. The results indicate that euthanasia is related to autonomy, freedom, dignity, the right to life and social problems that can induce death without due reflection.

2. BIBLIOGRAPHIC REVIEW

Euthanasia is a theme with several debates that should consider the internal conditions of the country, imported measures could lead to errors. The death wish can be promoted by lack of opportunity, precarious living conditions, access to health and others (MENDOZA-VILLA; HERRERA-MORALES, 2016).

The word euthanasia and assisted suicide represent a semantic challenge. The debate is about the perception that death is an alternative to suffering but is often prevented by third parties. In the case of assisted suicide, the doctor would be authorised and would not have the risk of falling on him the responsibility for the act. Thus, the patient would have more autonomy (DE LA TORRE DÍAZ, 2019).

The appeal of society for the theme has highlighted the debate in the legal aspects (PEREIRA; PINHEIRO, 2008). The challenge is to understand whether autonomy is full or if life would be something inalienable, in this sense organizations are full or their life would be





something inalienable where everyone would have the right since they act by a common law, only one person would have the direction of these organizations or be more collegiate.

In Spain euthanasia is prohibited, aligning itself with the recommendation of the European Community, while in other countries such as Belgium and the Netherlands it is not considered a crime. This ethical debate is related to the value of autonomy in the management of life. In this sense, there are reasons for and against euthanasia (ÁLVAREZ MONTERO, 2009). Translating for organizations, the legal rules are different between the countries in which they are, for example tax evasion can culminate in crime or moral deviation and elsewhere this punishment could be lower or not exist, in multinational companies it is complex to integrate a compliance system that observes all these issues.

The favorable reasons would be mainly related to dignity, justice, autonomy, control and recognition of the ability to make decisions. The opposite reasons recognize that life is inalienable and that social problems could lead to incorrect decision-making. In this sense, the law could improve patient care, dedicating more time and specialized staff, and finally legal regulation in order to evaluate the consequences (ÁLVAREZ MONTERO, 2009).

This lack of opportunities and the decay of the State, society and academia must be resolved to restore the right to life and provide adequate treatment for terminally ill patients (MENDOZA-VILLA; HERRERA-MORALES, 2016).

In Colombia palliative treatment is a right before euthanasia, both treatment and euthanasia are not exclusionary, form a synergy that guarantees the right to autonomy, a factor that permeates society. Thus, euthanasia is a process of death that recognizes morality and autonomy. (MENDOZA-VILLA; HERRERA-MORALES, 2016).

The responsibility for Euthanasia rests on the doctor and the patient in the face of the disease, causing death to avoid suffering (GÓMEZ, 2008).

Thus, we can classify euthanasia from the point of view of action, in active and passive, being active when death is provoked and passive when death comes from the omission of treatment. In relation to consent, it can be voluntary when it meets the patient's will and involuntary, when requested by third parties

This discussion gained notoriety in 1947 with the Nuremberg Code and in 1964 with the declaration helsinki. Although these codes do not directly from euthanasia, represent ethical principles that govern research in human beings. In this way we can establish an analogy between euthanasia and ethical norms, from two different perspectives.



The principles of the Nuremberg Code and the Declaration of Helsinki relate as to the duty and responsibility of the capacity that are of the researcher, the experiment must have favorable results to society, must be carried out in animals and in the knowledge of the evolution of the disease, the experiment must avoid physical suffering, the experiment should be aborted or not started, when it endangers human life , the relationship between risk and return should be observed, the experiment should be conducted by qualified people, the patient's autonomy must be respected, the researcher must have autonomy and preparation to suspend treatment, when the experiment results damage to human life.

The main difference lies in the responsibility of the doctor, while in the Nuremberg code this decision is up to the doctor, giving a certain sense of hierarchy in decisions, in the declaration of Helsinki respects the contradictory, attributing responsibility to the doctor for error in the procedure. Of course, this considers a conservatism, because being held accountable in the legal sphere creates a bond of greater observation on the medical side.

In the Declaration of Helsinki, innovation is related to the independent ethics committee and the establishment of a distinction between patients and healthy subjects, prohibiting an experiment without prior authorization (JOHANNESEN et al., 2007).

Whose fault is to blame for the mortality of organizations, in the face of a crisis situation who decides when to end their activities. Employees would be entitled to decide or only the manager. Everything will depend on the ethical development of organizations, the governance debate is important to define this positioning, everyone knows how the decision system of organizations works or are informal, in individual decisions often has destructive potential of personal motivations.

3. Method

This study is a qualitative study, whose purpose is to improve understanding of the theme studied (GIL, 2008).

As for the procedures used, a bibliographical research was first carried out on the *Science Direct*, with the construct "euthanasia". In this study, 9 articles were considered for textual analysis, considering only nouns, adjectives, and verbs, according to chart 1.

Table 1: Articles on euthanasia

Article 1	(GÓMEZ, 2008)
Article 2	(NOMBELA et al., 2008)



(ECHEVERRÍA C.	ARLOS et al., 2011)
(PEREIRA; PINHE	IRO, 2008)
(ALTISENT TROT	a et al., 2002)
(DEL CANO, 2019)
(SIMÓN LO	RDA; BARRIO
CANTALEJO, 201	2)
(ÁLVAREZ MON	'ERO, 2009)
(MENDOZA-VILI	A; HERRERA-
MORALES, 2016)	
MORALES, 2016)	

Source: the authors

Thus, for data processing, the content analysis technique was used, which aims to fragment texts to find regularities, weighting the frequency, allowing for comparations (BIRTH; MENANDRO, 2006). The collected data were classified into categories consisting of the dismemberment of the text into clusters.

To determine this category, the Reinert method was used that deals with automated content analysis, having categorical Cluster data, calculating the x^2 and the significance determine by p. For data cutting was considered the $x^2>3.84$ and p<0.05.

The data were classified into 5 categories, being category 1, called right; Category 2, illness; Category 3, autonomy; Category 4, Ethics; and Category 5, suicide.

4. Results

The general corpus consisted of nine texts, separated into 59 text segments (TS), using 36 (61.02%). 1,934 occurrences emerged (words, shapes or words), 857 distinct words and 1,077 with a single occurrence. The analyzed content was categorized into 5 categories: Class 1, with 7 ST (19.44% of the total); Class 2, with 7 (19.44% of the total); Class 3 with 7 (19.44% of the total); Class 4, with 8 (22.22% of the total); and Class 5, with 7 (19.44% of the total). For the purposes of this study, classes with $x^2>3.84$ and significance index P<0.05.

Class 1 comprises 7 ST representing 19.44% of the total. Consisting of words and radicals in the interval between with x^2 =4.66 (institute) and 8.87 (criminal). The words give and do were eliminated from the analysis because they did not express even a meaning in Spanish that added value to the analysis. Table 1 presents data related to human law



num 👍	eff. s.t.	eff. total	pourcent	chi2	forme	р
0	7	9	77.78	26.07	dar	< 0,0001
1	4	4	100.0	18.64	do	< 0,0001
2	3	4	75.0	8.87	penal	0.00290
3	2	3	66.67	4.66	instituto	0.03088
4	7	11	63.64	19.75	*Artigo_3	< 0,0001

Table 1: Right

Source: The Authors

The appeal of society for the theme has highlighted the debate on the legal aspect (PEREIRA; PINHEIRO, 2008). The challenge and understand whether autonomy is full or whether life would be something inalienable.

In class 2 there are 7 ST which represents 19.44% of the total. Consisting of words and radicals in the interval between with $x^2=2.68$ (del) and 18.64 (sick. The words del and vida were eliminated from the analysis because they presented $x^2 < 3.84$ and significance p>0.05. This Class is composed of words such as "Situación" ($x^2>4.29$); "Practice" ($x^2>4.66$); "Doctor" ($x^2>10.25$); "avoid" ($x^2>13.56$); "Act" ($x^2>18.64$); "suffrage" ($x^2>18.64$); and "sick" ($x^2>18.64$ %).

p	forme	chi2	pourcentage	eff. total	eff. s.t.	n
< 0,0001	enfermo	18.64	100.0	4	4	0
< 0,0001	sufrimi	18.64	100.0	4	4	1
< 0,0001	acto	18.64	100.0	4	4	2
0.00023	evitar	13.56	100.0	3	3	3
0.00136	médico	10.25	66.67	6	4	4
0.03088	práctica	4.66	66.67	3	2	5
0.03830	situación	4.29	50.0	6	3	6
NS (0.07515)	vida	3.17	33.33	15	5	7
NS (0.10147)	del	2.68	50.0	4	2	8
0.03088	*Artigo_4	4.66	66.67	3	2	9

Table 2: Illness

Source: The authors

The responsibility for Euthanasia rests on the doctor and the patient in the face of the disease, causing death to avoid suffering (GÓMEZ, 2008). The effect is felt by all, in organizations the disease compromises all organizational structures.

Analyzing the relationship of words in the class, it is noted that euthanasia would be related to the act of avoiding suffering. The responsibility for this decision would be with the medical team, with the consent of the patient, who would be the main actor of the act.

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In class 3 there are 7 ST which represents 19.44% of the total. Consisting of words and radicals in the interval between with $x^2=2.56$ (if) and 13.59 (human). The words were eliminated from the analysis and debated, because they presented $x^2 < 3.84$ and significance p>0.05. This Class is composed of words like "Final" ($x^2>4.66$); "life" ($x^2>6.94$); "human" ($x^2>13.59$). Table 3 shows data related to autonomy.

р	forme	chi2	pourcentage	eff, total	eff. s.t.	n
0.00022	humano	13.59	80.0	5	4	0
0.00844	vida	6.94	40.0	15	6	1
0.03088	final	4.66	66.67	3	2	2
NS (0.10147)	debatir	2.68	50.0	4	2	3
NS (0.10942)	se	2.56	31.25	16	5	4
NS (0.10147)	*Artigo_7	2.68	50.0	4	2	5

Table 3: Autonomy

Source: The authors

In Table 3, the favorable reasons would be mainly related to dignity, justice, autonomy, control, and recognition of the ability to make decisions. On the other hand, the opposite reasons recognize that life is inalienable, social problems could lead to wrong decision-making. In this sense, the law could improve patient care, dedicating more time and specialized staff and finally legal regulation to evaluate the consequences (ÁLVAREZ MONTERO, 2009).

In class 4 there are 8 ST which represents 22.22% of the total. Consisting of words and radicals in the interval between with $x^2=3.21$ (legal) and 20.32 (ethical). The words legal, historical and achievement were eliminated from the analysis, for presenting $x^2<3.84$ and significance p>0.05. This Class is composed of words like "derecho" ($x^2>8.23$); "tiempo" ($x^2>11.45$); "ethical" ($x^2>20.32$). Table 4 shows data related to autonomy.

p	forme	Туре	chi2	pourcentage	eff. total	eff. s.t.	👍
< 0,0001	ético	adj	20.32	100.0	5	5	0
0.00071	tiempo	nom	11.45	100.0	3	3	1
0.00412	derecho	nom	8.23	66.67	6	4	2
NS (0.05311)	consecuencia	nom	3.74	66.67	3	2	3
NS (0.05311)	histórico	adj	3.74	66.67	3	2	4
NS (0.07299)	jurídico	adj	3.21	50.0	6	3	5
NS (0.05777)	*Artigo_5		3.6	100.0	1	1	6
NS (0.05777)	*Artigo_6		3.6	100.0	1	1	7

Source: The authors



It should be noted that euthanasia is an theme with several debates that should take into account the internal conditions of the country, imported measures could lead to errors. The death wish can be promoted by lack of opportunity, precarious living conditions, access to health and others (MENDOZA-VILLA; HERRERA-MORALES, 2016).

In Spain euthanasia is prohibited, aligning itself with the recommendation of the European Community. In other countries such as Belgium and the Netherlands it is not considered a crime. This ethical debate is related to the value of autonomy in the management of life. In this sense, there are reasons for and against euthanasia (ÁLVAREZ MONTERO, 2009).

This lack of opportunities and the decay of the State, society and academia must be resolved in a way that establishes the right to life and greater opportunities for terminally ill patients (MENDOZA-VILLA; HERRERA-MORALES, 2016).

In class 5 there are 7 ST which represents 19.44% of the total. Consisting of words and radicals in the interval between with x^2 =4.29 (legal) and 18.64 (ethical). This class is composed of words such as "situacion" (x^2 >4.29); "personal" (x^2 >4.66); "suicide" (x^2 >18.64). Table 5 shows data related to the psychological situation of the individual

р	forme	Туре	chi2	pourcentage	eff. total	eff. s.t.	n
< 0,0001	suicidio	nom	18.64	100.0	4	4	0
0.03088	personal	nom	4.66	66.67	3	2	1
0.03830	sit <mark>u</mark> ación	nom	4,29	50.0	6	3	2
0.01354	*Artigo_8		6.1	60.0	5	3	3
NS (0.101	*Artigo_7		2.68	50.0	4	2	4

Table 5: Suicide

Source: The Authors

At this point has the semantic challenge of the word euthanasia and assisted suicide, several authors treat in the same way. Here the discussion lies around the perception that death ends up being positive in the face of suffering, but is often prevented by third parties, in the case of assisted suicide the doctor would be authorized and would not have the risk of falling on himself the responsibility for the act. Thus, the patient would have more autonomy (DE LA TORRE DÍAZ, 2019).

The established analogy is only the essence of the debate, in this sense of who would be entitled by organizations, when one observes companies made up of people who work for a common goal, to imagine that these objectives would be based only on profit is to disregard the importance that these companies exercise in society, whether contributing taxes, employing





families. In this sense the right to these organizations in a broad way is only of their partners or is of the whole society and people who contribute there with the fruit of their effort, if the decisions were made thinking about this complex whole, certainly should be collegiate, including involving strata of society.

In a crisis situation, how to avoid the suffering of those who observe and often have their motivations and dreams deposited in organizations, the best way for this, would be transparency, creating committees based on collective interests is fundamental for the construction of these alteratives, it is about transforming the word crisis into create.

By imagining the company within a social context, who would have this autonomy to terminate its activities, it is observed in periods of structural crises an effort of governments to save these organizations, often assuming the role of shareholders. Thus, it shows that organizations meet this important social purpose for society and that misconduct leads to punishment by the law.

This effort by organizations to review their compliance and corporate governance policies leads to greater efficiency of their operations and processes, increasing both internal and external transparency.

When everything seems to have no more solution, whose decision is to stop, only the shareholder or everyone who was there to build the business.

In summary organizations should know their illnesses, the causes that generated the problem, make collegiate decisions, constitute committees or teams to solve the causes that generate problems, discuss the autonomy of those who decide whether it is full or not, too much autonomy can generate confusing situations and break with the social contract and the decision on when to stop is to end the activities , a production line, a product, the best remedy that was observed in this analogy is transparency, focus on delivery, respect for people, the company seen as social and joint participation with public agencies to develop policies of growth, development and in adverse scenarios of protection.

5. Conclusion

The objective of this work was to characterize euthanasia from an ethical perspective and to build meanings for management, through the comparison of research and its relations with the Nuremberg Code and the Declaration of Helsinki. Data on the subject were demonstrated and compared with the above-mentioned codes. Ethical problems were





pointed out about freedom, dignity, morals, and autonomy. The debate is related to respect for the norms of law constructed from the social will, whether these norms should respect this autonomy or make the right to life inalienable. The results presented a moderating factor related to the social problems that influence the psyche of some patients, the tendency observed is that there is alternative treatment to mitigate suffering or even enable a recovery of physical and mental state.

In organizations the way is transparency, collegiate decisions, having a sense of responsibility with society and its collaborators, discussing the decision-making process, focusing on delivering results, collectively constructed ethical principles and good articulation with the public authorities and society.

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