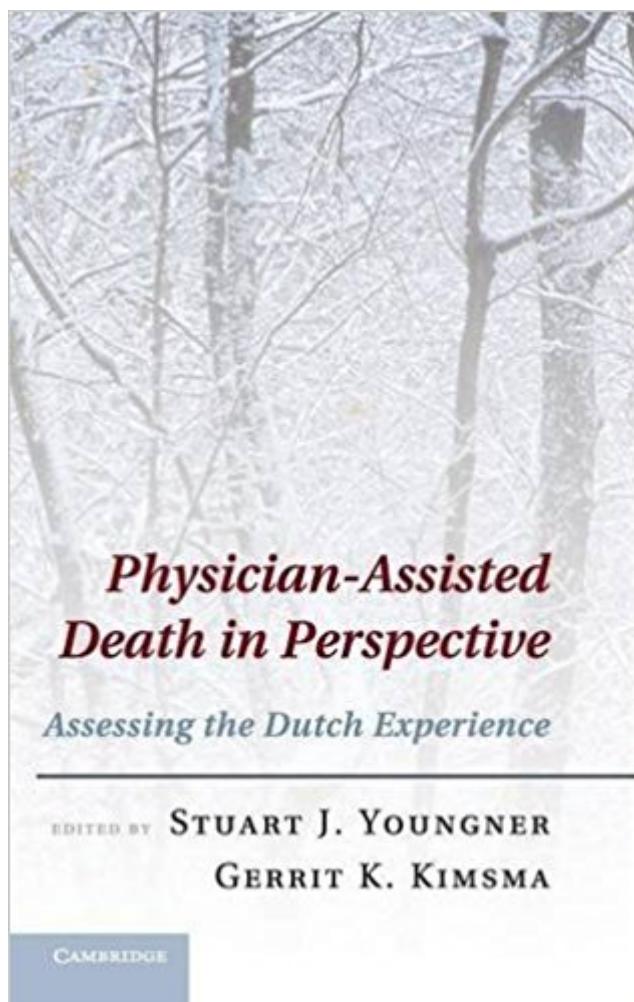


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# Physician-Assisted Death In Perspective: Assessing The Dutch Experience



## Synopsis

This book is the first comprehensive report and analysis of the Dutch euthanasia experience over the last three decades. In contrast to most books about euthanasia, which are written by authors from countries where the practice is illegal and therefore practiced only secretly, this book analyzes empirical data and real-life clinical behavior. Its essays were written by the leading Dutch scholars and clinicians who shaped euthanasia policy and who have studied, evaluated, and helped regulate it. Some of them have themselves practiced euthanasia. The book will contribute to the world literature on physician-assisted death by providing a comprehensive examination of how euthanasia has been practiced and how it has evolved in one specific national and cultural context. It will greatly advance the understanding of euthanasia among both advocates and opponents of the practice.

## Book Information

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## Customer Reviews

Stuart J. Youngner & Gerrit K. Kimsma, editorsPhysician-Assisted Death in Perspective:Assessing the Dutch Experience(New York: Cambridge University Press, 2012) 403 pages(ISBN: 978-1-107-00756-7; hardcover)(Library of Congress call number: R726.P484 2011)(Medical call number: WB65P578 2012) 23 academics and physicians with first-hand experiencewith 'euthanasia' and 'physician-assisted suicide' in the Netherlandsoffer their perspectives and analyses of how these life-ending decisionsare achieved and reported in Holland. Several chapters at the beginning trace the unusual pathwaysby which Holland has finally arrived at its present practices.Usually court decisions have led to regulations that make exceptionsto the laws against helping patients to die. The decision to bring life to an end must be chosen by the patientand only physicians are permitted

to help their patients die in these prescribed ways defined in Dutch law. Usually the life-ending decision is carried forward by the family doctor, after careful consultation with a euthanasia consultant, who is trained in the process for making the decision to end life and in the proper methods for reporting such deaths. Because "unbearable suffering" is required by Dutch law of 2002, there has been considerable discussion about exactly what qualifies as conscious suffering that cannot be relieved by any medical methods. Some advocates of the right-to-die argue that the normal losses of old age are sufficient losses of dignity to qualify as "unbearable suffering". And because patients must be suffering, they no longer qualify if they become comatose.

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