

**HEALTH PROFESSIONALS' ATTITUDE TOWARD
EUTHANASIA: A CROSS-SECTIONAL STUDY
FROM TURKEY**

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ABSTRACT

There is an ongoing debate on the definition of euthanasia and attempts to change laws about euthanasia and its practice in many countries. It is the medical doctors and the other health professionals who will elucidate the issue. Therefore, we performed this study to reveal attitude of Turkish health professionals toward euthanasia. This is an observational and cross-sectional study and data were collected with a questionnaire. The questionnaire was distributed to 545 health professionals in Samsun, a city in the Black Sea Region in Turkey. Data were analyzed with SPSS package programs. Of all health professionals included in the study, 43.5% were medical doctors and 45.5% auxiliary health professionals. Of all participants, 33.6% did not object to euthanasia and 7.9% were asked to perform euthanasia. Eighty point seven percent of the participants noted that euthanasia could be abused even if a euthanasia law were passed. It can be concluded that the health professionals should have a chance to discuss euthanasia and that their attitude toward and their expectations and worries about euthanasia should be taken into account when a euthanasia law is drafted.

INTRODUCTION

At present, there is much debate on euthanasia and physician assisted suicide, especially their legal and ethical aspects. Euthanasia has been prohibited in many countries. For example, active euthanasia is prohibited in the United States, but passive euthanasia can be performed in some states. In addition, active euthanasia is legal in Holland and Belgium. There are attempts to draft euthanasia laws in many other countries. Euthanasia may become legal even for newborns in Holland (Özkara, 2001; İnceoğlu, 1999; Smith, 2005; Özkara, Civaner, Oğlak, & Mayda, 2004; Özkara et al., 2004).

As for Turkey, according to the new criminal law passed in 2005, there is no specific definition of euthanasia, but it is expected that euthanasia will be considered either a murder or assisted suicide depending on how it is performed (Mayda, Özkara, Corapcioglu, 2005; Tezcan, Erdem, Önok, 2005). Before euthanasia law is drafted, studies in many countries on attitude of the public, physicians and jurists toward euthanasia and on its adaptation to the health system are performed (Özkara et al., 2004; Mayda et al., 2005; Dickinson, Lancaster, Clark, Anemedzai, & Noble, 2002; Dickinson, Lancaster, Sumner, & Cohen, 1997-1998; Özkara, Yemişçigil, Dalgıç, 2001; Özkara, Özdemir, Hancı, Dalgıç, Civaner, & Yağmur, 2002; Özkara, Şen, Tok, Dalgıç, & Yorulmaz, 2003). To determine the most appropriate approach to euthanasia, studies are needed to reveal the existing conditions in Turkey as well. The results of this study will contribute to the available knowledge about euthanasia in Turkey. We collected data on attitude of health professionals toward euthanasia in Samsun, which is an important city of the Black Sea Region in Turkey.

METHODS

This is an observational and cross-sectional study and data were collected with a questionnaire. The questionnaire was sent to 680 health professionals working at health clinics, Mehmet Aydin State Hospital, Samsun Maternity and Child Clinic, Ondokuz Mayıs University Hospital, all of which are the institutions of Ministry of Health. Out of 680 health professionals, 545 completed the questionnaire and the data obtained were analyzed with SPSS package program for Windows (version 10.0). Dependent variables tested were what the participants know about euthanasia (definition, legal status, and ways of euthanasia), whether they were asked to perform euthanasia, attitude toward euthanasia, and expectations about euthanasia. Independent variables were age, gender, occupation, and workplace and work experience.

RESULTS

Out of 545 health professionals, 66.8% were female and 33.2% male. The participants were aged between 17 and 55 years with a mean age of 34.92 ± 6.53 years. The distribution of the participants by their occupations is shown in Table 1.

As for the participant institutions, an overwhelming majority of the participants worked at health centers (62%) (see Table 2).

Before the seventh question of the questionnaire, euthanasia was defined as in the following: "Euthanasia is the killing through either an active or passive way of someone who suffers from an illness which arouses pity and who will never get better when asked by either the person himself/ herself or his/her relatives."

The seventh question was "Do you think euthanasia should be performed or not?" Out of all participants, 66.4% ($n = 362$) said "no" and 33.6% ($n = 183$) said "yes" for this question (see Figure 1).

The participants who said "yes" for this question were asked for what conditions euthanasia should be performed and 17.4% ($n = 95$) gave the answer "for conditions which cause physical suffering" and 11.9% ($n = 65$) said "for conditions which cause mental suffering." Of all who said "no" for question seven, 38.4% ($n = 362$) were worried about abuse of euthanasia, 30% noted religious reasons, 29.6% found it unethical, and 14.8% noted that it was illegal (the participants could choose more than one answer).

As for the question "who should decide euthanasia, 63% of the participants gave the answer "both the physician and the family" (see Figure 2).

Table 3 shows the answers to question 11 about the legal status of euthanasia.

Table 1. Distribution of Participants by Their Occupations ($n = 545$)

Occupation	<i>n</i>	%
Lecturer/Specialist	104	19.1
General Practitioner/Research Assistant	133	24.4
Nurse/Midwife	237	43.5
Others (Technician, Assistant Health Staff)	71	13.0
Total	545	100.0

Table 2. Distribution of Participants by Workplaces

Workplace	<i>n</i>	%
Health Centers	338	62.0
Ondokuz Mayıs University Hospital	119	21.8
State Hospital	88	16.1
Total	545	100.0

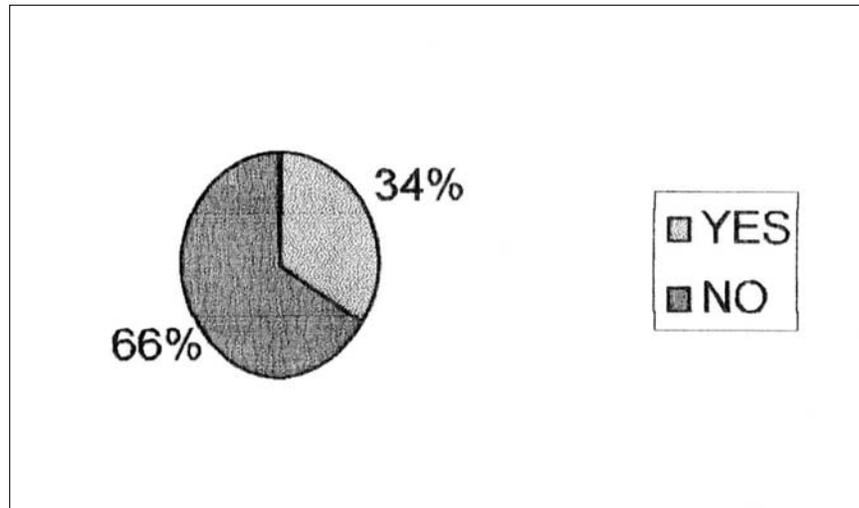


Figure 1. Distribution of answers to the question whether euthanasia should be performed ($n = 545$).

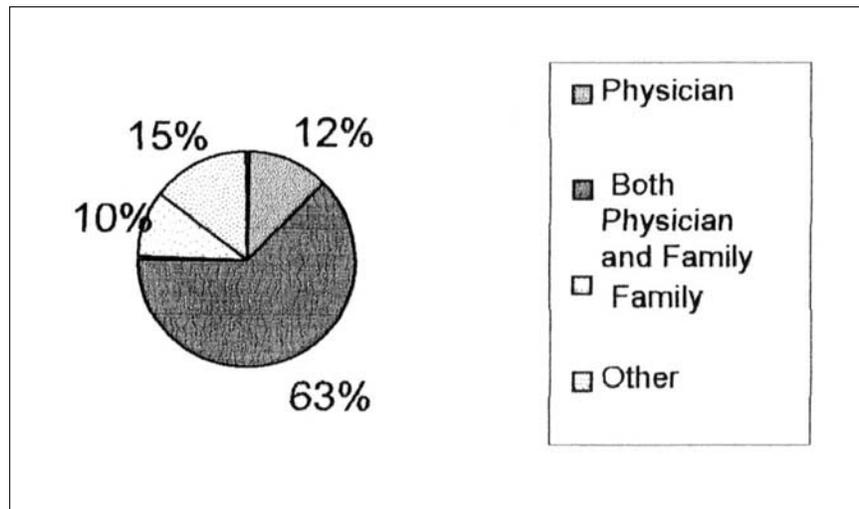


Figure 2. Distribution of answers to the question who should decide euthanasia ($n = 545$).

Table 3. Distribution of Answers to Question How Euthanasia is Considered According to Laws in Force ($n = 545$)

	<i>n</i>	%
Negligence	34	6.2
Abuse	184	33.8
Deliberate murder	275	50.5
No punishment	25	4.6
Others	27	5.0

Question 12 was “Is there a difference between active and passive euthanasia according to the laws?” Sixty-nine percent of the participants ($n = 376$) noted no difference between the two types of euthanasia.

Question 13 was “Have you ever been asked to perform euthanasia by patients or their relatives?” Ninety-two point one percent of the participants ($n = 502$) did not have such an experience, but 7.9% ($n = 43$) had.

Question 14 was “Have you ever said to the relatives of a patient who would never get better that the patient should be discharged and live the last days of his/her life at home?” or “Have you ever had a similar approach? Eighty-two percent of the participants ($n = 447$) said “no” and 18% ($n = 98$) said “yes” for this question.

Question 15 was “Do you think you have the right to help people who will never get better to commit suicide?” Of all participants, 79.3% ($n = 432$) gave a negative response, but 20.7% ($n = 113$) gave a positive response to this question.

Question 16 was about an imaginary situation: “Suppose you are unconscious because you have had an accident or you have been suffering from a disease and you won't get better. Would you like your relatives to decide euthanasia on behalf of you?” Of all participants, 64% ($n = 349$) rejected the suggestion, but 36% ($n = 196$) accepted it.

Question 17 was whether they would perform euthanasia or not if it were legal in Turkey. Seventy-three point six percent of the participants ($n = 401$) said they would not perform it (see Figure 3).

Of all 545 participants, 80.7% ($n = 440$) expressed concern that euthanasia can be misused if it is legal, but 19.35% ($n = 105$) disagreed with it. Despite the worries about misuse of euthanasia, 56.7% of the participants ($n = 390$) found it useful to have discussions about euthanasia.

As for the relation between the dependent and independent variables, attitude toward euthanasia, having been asked to perform euthanasia, agreement to

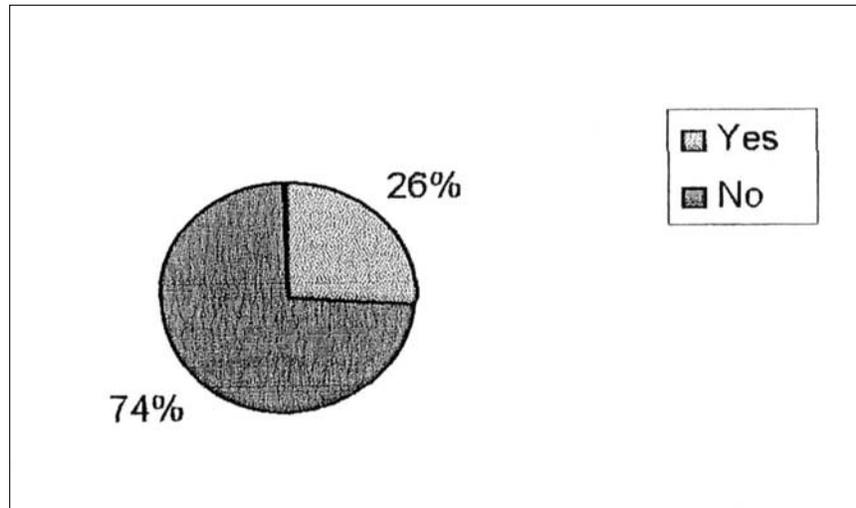


Figure 3. Distribution of answers to the question 17 was whether they would perform euthanasia or not if it were legal in Turkey ($n = 545$).

perform euthanasia and passive euthanasia varied with gender. In fact, there was a significant difference between genders in the answers to the question whether euthanasia should be performed (question 7). Of male participants, 43.1% gave a positive response, but of female participants, only 28.8% gave a positive response (Pearson $\chi^2 = 11.003$; $p < 0.001$). There was also a significant difference between genders in their experience with the demand for euthanasia (question 13). Of all participants, 12.2% and 5.8% of the males and females were asked to perform euthanasia respectively ($\chi^2 = 6.405$; $p = .011$). As for question 15 about physician assisted suicide, 30.4% of the males and 15.9% of the females agreed that they have the right to help patients who will never get better to commit suicide, with a significant difference ($\chi^2 = 15,364$; $p < 0.001$). The female and male participants had also different views about the imaginary situation in question 16. Of all participants, 46.4% and 30.8% of the males and females respectively noted that they would like their relatives to decide euthanasia if they were unable to do it for themselves, with a significant difference ($\chi^2 = 12,839$; $p < 0.001$). In addition, there was a significant difference between genders in their opinions whether they would perform euthanasia if it were legal (question 17). Of all participants, 38.7% and 20.3% of the males and females respectively said they would do it ($\chi^2 = 20,925$; $p = 0.001$).

The difference in attitude toward euthanasia (answers to questions 7, 13, 17, and 18) between occupations was significant (see Tables 4 thru 7).

Table 4. Distribution of Answers to Question 7 According to Occupation.
Question 7: "Do you think euthanasia should be performed or not?"

Occupation	Yes (%)	No (%)	Total (%)	<i>n</i>
Lecturer, Specialist	44.2%	55.8%	100.0%	104
General Practitioner, Research Assistant	41.4%	58.6%	100.0%	133
Nurse, Midwife	25.7%	74.3%	100.0%	237
Technician, Assistant Health Staff	29.6%	70.4%	100.0%	71

($\chi^2 = 15,937$; $p < 0.001$)

Table 5. Distribution of Answers to Question 13 According to Occupation.
Question 13: "Have you ever been asked to perform euthanasia by patients or their relatives?"

Occupation	Yes (%)	No (%)	Total (%)	<i>n</i>
Lecturer, Specialist	15.4%	84.6%	100.0%	104
General Practitioner, Research Assistant	8.3%	91.7%	100.0%	133
Nurse, Midwife	5.9%	94.1%	100.0%	237
Technician, Assistant Health Staff	2.8%	97.2%	100.0%	71

($\chi^2 = 11,861$; $p < 0.011$)

Table 6. Distribution of Answers to Question 17 According to Occupation.
Question 17: "Would you perform euthanasia if it were legal in Turkey?"

Occupation	Yes (%)	No (%)	Total (%)	<i>n</i>
Lecturer, Specialist	43.3%	56.7%	100.0%	104
General Practitioner, Research Assistant	32.3%	67.7%	100.0%	133
Nurse, Midwife	16.9%	83.1%	100.0%	237
Technician, Assistant Health Staff	22.5%	77.5%	100.0%	71

($\chi^2 = 29,229$; $p < 0.001$)

Table 7. Distribution of Answers to Question 18 According to Occupation.
 Question 18: "Do you think that euthanasia would be misused if it were legal in Turkey?"

Occupation	Yes (%)	No (%)	Total (%)	<i>n</i>
Lecturer, Specialist	62.5%	37.5%	100.0%	104
General Practitioner, Research Assistant	82.0%	18.0%	100.0%	133
Nurse, Midwife	89.0%	11.0%	100.0%	237
Technician, Assistant Health Staff	77.5%	22.5%	100.0%	71

($\chi^2 = 33,331; p < 0.001$)

DISCUSSION AND CONCLUSION

While some strongly support euthanasia, others adamantly oppose it. At present, active euthanasia is legal only in Holland and Belgium. We found that more than half of the participants (66.4%) objected to euthanasia, while only a small proportion of the participants (33.6%) supported it. Other studies from Turkey have revealed that the rate of people who are not against euthanasia vary from 38.6% to 46.6% (Özkara, Civaner, et al., 2004; Özkara, Hanci, et al., 2004; Mayda et al., 2005; Özkara et al., 2001). The reasons for being against euthanasia are worries about its misuse, ethical considerations, legal obligations and religious beliefs (Özkara, 2001; İnceoğlu, 1999; Özkara, Civaner, et al., 2004; Özkara, Hanci, et al., 2004; Özkara et al., 2003; Sulmasy, 1998; Battin, 1992). Dickinson et al. (2002) from England reported that 80% of geriatricians did not find active euthanasia and physician assisted suicide ethical. In a study from the United States, 84% and 80% of the physicians were worried about misuse of euthanasia and 67% and 56% were against it because of their religious beliefs in Washington and South Carolina respectively (Dickinson, Lancaster, Sumner, & Cohen, 1997-1998). In a study from Turkey, the most frequently noted reason for being against euthanasia was worries about its misuse (41.6%), followed by ethical considerations (24.9%), religious beliefs (18.7%), and being illegal (11.2%) (Özkara, Hanci, et al., 2004). Consistent with the literature, we also found that the most frequent reason for being against euthanasia was worries about its misuse (38.4%), followed by religious beliefs (30%), ethical considerations (29.6%) and being illegal (14.8%).

There is a continuing debate over the definition, extent and methods of euthanasia particularly in Holland, Austria, and the United States. The High Court in Holland ruled that Dr. Chabot who used physician assisted euthanasia in his patient with major depression was innocent. This means that euthanasia can be used for conditions other than lethal, progressive, and painful ones.

However, the rule was disapproved and criticized in other countries (Özkara, 2001; İnceoğlu, 1999; Sulmasy, 1998; Battin, 1992). In this study, only 11.9% of the participants agreed that euthanasia can be used for conditions causing mental suffering.

Legal status of euthanasia varies from country to country. In recent years, there have been changes in laws about euthanasia in Holland and Belgium. There have been attempts to adopt regulations for euthanasia even in newborns in both countries (Özkara, 2001; Smith, 2005). In contrast, euthanasia is still illegal in many countries. It was defined as "murder on request" in criminal laws of some countries such as Germany and Austria and it was not clearly defined but prohibited in some other countries such as Japan and Turkey (Akabayashi, 2002; Bernheim, 2001; İnceoğlu, 1999; Özkara, 2001; Weber, 2001). In Japan, people who perform euthanasia are sentenced to six months to seven years imprisonment (Akabayashi, 2002). In Turkey, active euthanasia is not clearly defined in the criminal law, but it is considered "murder." There is not an agreement about passive euthanasia, but it is not thought to deserve strict punishment. Assisted suicide is considered a kind of help to commit suicide (Özkara, 2001; İnceoğlu, 1999; Smith, 2005; Özkara, Hanci, et al., 2004; Mayda et al., 2005; Tezcan et al., 2005; Dickinson et al., 2002). In this study, most of the participants noted no difference between legal status of active and passive euthanasia, which indicates that legal status of euthanasia is not well known. It may be because there is not an article in the criminal law directly related to euthanasia and that the new criminal law was enacted last year.

There is no data about the frequency of euthanasia and the rate of people who asked for euthanasia in Turkey. In a large scale study from Turkey, 19% of the physicians noted that they were asked to perform euthanasia (Özkara, Hanci, et al., 2004). In the present study, only 7.9% of the health professionals were requested to perform euthanasia. This can be explained by that fact that the study included not only physicians but also other health professionals.

Gender and social status influence opinions on euthanasia. Jorgenson and Neubecker (1980), in their study on 1,525 adults, found that white people and males have a more favorable attitude toward euthanasia than black people and females. A study of oncologists from Turkey revealed that male physicians were more frequently requested to perform euthanasia than female physicians (Mayda et al., 2005). Consistent with the literature, we found that males and physicians had a more positive attitude toward euthanasia and were more frequently asked to perform it than females and other health professionals.

We found that the rate of the participants worried about misuse of euthanasia even if it becomes legal was high (80.7%). It can be suggested that worries about misuse of euthanasia, attitude of both health professionals and the public and adaptation of euthanasia into the existing health system should be taken into consideration when a law about euthanasia is drafted.

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