



“Death as a release from suffering”—The history and ethics of assisted dying in Germany since the end of the 19th century



Gerrit Hohendorf

Institut für Geschichte und Ethik der Medizin, Ismaninger Straße 22, 81675 München, Germany

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1. Death as a release from suffering

On 26 August 2013, the writer Wolfgang Herrndorf ended his life by suicide. He shot himself by Berlin’s Landwehr Canal after battling in vain for three years against a brain tumour. In his blog “Arbeit und Struktur” (Work and structure) he wrote in 2010: “What I need is an exit strategy . . . Because I didn’t at any point want to die and still don’t want to now. But the certainty of being in control was a necessary part of my mental health from the outset.”¹ Death as a

release from suffering: choosing one’s death appears to give back control over something that ultimately we cannot control: our death, our mortality. With his death that many described as understandable and courageous, Herrndorf gave new impetus to the debate on assisted dying in Germany. Udo Reiter, for 20 years the director of the broadcaster Mitteldeutscher Rundfunk, took the suicide of Wolfgang Herrndorf as a basis to plead for self-determined death in the *Süddeutsche Zeitung* of 21.12.2013: “I do not want to end up being dependent on care, being washed, combed and cleaned by others .

E-mail address: gerrit.hohendorf@tum.de (G. Hohendorf).

¹ Wolfgang Herrndorf, *Arbeit und Struktur* (Work and structure), Berlin 2013, p. 50.

... I do not want to lose my faculties and become a half-asleep, friendly or bad-tempered idiot. And I would like to decide for myself when I have had enough and no longer want to live ...”² And Reiter calls for those who choose to die not to have to jump in front of a train but to be entitled to medical help, whether in the form of assisted suicide or active help to die, a pain-free death proficiently administered by a doctor. But “death as a release from suffering” was seen historically not only as self-determined death, but also as the “release” that doctors were prepared to provide in circumstances of seemingly unbearable suffering, even if the patient had not explicitly expressed such a wish.

2. Two patient histories from 1939 and 1940

It may be confusing that in 1940, when the registration, selection and extermination of patients in institutions under the National Socialists’ “euthanasia” programme “T4” was in full swing, the term medical “release” was used for patients, who suffered from severe physical illnesses and the medical termination of whose lives we would today characterise as indirect or direct active assisted dying, situations therefore which are also under discussion in the present debate on assisted dying. The businessman Joseph I. suffered from progressive paralysis, was considered to have dementia and was admitted to the Eglfing-Haar mental hospital near Munich. Due to disease of the heart muscle, he also suffered from massive oedemas, the state of his body worsened increasingly and the last entry in the clinical record on 2.11.1940 read: “long-desired death under morphine sedation by airway obstruction.”³

A second story of illness from 1939, also from the Eglfing-Haar mental hospital, marks the transition from apparently medically indicated treatment to the extermination of “life unworthy of life”: 25-year-old Siegfried H., who came from the Tirol and was brought up by his grandfather in Munich, was behind in his mental development and at age 13 was admitted to the Eglfing-Haar children’s centre for examination, where he was assessed as uneducable due to his agitation. He lived for the next ten years in the Catholic Association Institution at Schönbrunn near Dachau, until he could no longer be looked after in “simple care”. The registration record completed on him for the “Aktion T4” programme in 1939 contains the following assessment of him: “Idiot, destructive urge, absolutely in need of care, completely antisocial, bedridden.”⁴ But before probably being sent to an “Aktion T4” killing centre, he was given increasing doses of sedatives because of his agitation. The last entry in the clinical record on 11.12.1939 read: “At the end used high doses of M (orphine) + Hyoscine, Trional in order to keep him calm to some extent. Some ten days ago rapid physical decline began without raised temperatures. Died today at 20.00. Cause of death: pneumonia.”⁵

The concept of “exterminating life unworthy of life” is, however, not an invention of the National Socialists. Starting with the self-determination of the incurably ill person over his life and his death, the debate on euthanasia, the medical release from suffering, had evolved in Germany since the end of the 19th century.⁶

3. The historical debate on euthanasia

In 1895 the young philosophy student Adolf Jost published a book with the programmatic title “The right to die”: Man is recognised as sovereign over his life and could equally control his death. From the point of view of society, the moral motive of sympathy corresponds to the “right to die”: this extends further to anyone who is no longer able to determine for themselves to avail themselves of their “right to die”:

“When we see someone with an incurable illness writhing in his bed in unspeakable pain, with the bleak prospect of languishing for perhaps months more, with no hope of recovery, when we walk through the rooms of an asylum and see the madman or the paralytic with all the sympathy of which man is capable, then despite all absorbed preconceptions the thought must enter our heads, ‘do these people not have a right to die, does human society not have a duty to give them as painless a death as possible?’”⁷

In Jost, a utilitarian assessment of human life is already concealed behind the concept of sympathy. The “right to die” should relieve society of those lives that have no use either for the individuals or for society. In 1913 the Monistenbund, which under the chairmanship of the well-known biologist Ernst Haeckel advocated a world view based on natural law, published the legislative proposal of Roland Gerkan, a sufferer from lung disease, for permitted euthanasia: “Anyone who has an incurable illness has the right to assistance to die (euthanasia).” Gerkan based his initiative not only on the intensity of his suffering, but also on the feeling of uselessness that he experienced in relation both to himself and his family: “Allied to all this is the painful awareness that I am a heavy burden on my family. Although the sacrifices of time, capacity for work and money were gladly given to me with loving devotion—I nevertheless remain a harmful parasite.”⁸

⁵ Archive of Upper Bavaria, Munich, Eglfing-Haar records, medical record of Siegfried H., entry in the clinical record dated 11.12.1939.

⁶ On practices in active medical termination of life before 1850 see: Michael Stolberg, *Active Euthanasia in Pre-Modern Society, 1500–1800: Learned Debates and Popular Practices*, *Social History of Medicine* 20, 2007, pp. 205–221 and Michael Stolberg, *Pioneers of Euthanasia: Two German Physicians Made the Break around 1800*, *Hastings Center Report* 38, 2008, pp. 19–22. *On the history of the term euthanasia from antiquity to the present day see: Dietrich v. Engelhardt, Euthanasie in Geschichte und Gegenwart—im Spektrum zwischen Lebensbeendigung und Sterbebeistand (Euthanasia in history and in the present – in the spectrum between ending life and supporting death)*, *Acta Historica Leopoldina* 55, 2010, pp. 187–212. *On the modern debate on euthanasia in Germany since the end of the 19th century see: Schmuhl, Hans-Walter, Rassenhygiene, Nationalsozialismus, Euthanasie. Von der Verhütung zur Vernichtung ‘lebensunwerten Lebens’ (Racial hygiene, national socialism, euthanasia. From prevention to the extermination of ‘life unworthy of life’), 1890–1945 (= Kritische Studien zur Geschichtswissenschaft (Critical studies of historical research, vol. 75), 2nd edition. Göttingen 1992, pp. 105–125, Michael Schwartz, “Euthanasie”-Debatten in Deutschland (“Euthanasia”—debates in Germany) (1895–1945), *Vierteljahrshefte für Zeitgeschichte (Quarterly journal of contemporary history)* 46, 1998, pp. 617–665, Udo Benzenhöfer, *Der gute Tod?—Euthanasie und Sterbehilfe in Geschichte und Gegenwart (The good death?—euthanasia and assisted dying in history and the present day)*, Munich 1999, pp. 77–108 and Gerrit Hohendorf, *Der Tod als Erlösung vom Leiden. Geschichte und Ethik der Sterbehilfe seit dem Ende des 19. Jahrhunderts in Deutschland (Death as a release from suffering. The history and ethics of assisted dying in Germany since the end of the 19th century)*, Göttingen 2013, pp. 27–71. Very instructive from a legal perspective: Vera Große-Vehne, *Tötung auf Verlangen (§ 216 StGB), Euthanasie und Sterbehilfe. Reformdiskussion und Gesetzgebung seit 1870 (Killing on request (Art. 216 of the German Penal Code) Euthanasia and assisted dying. Discussion of reform and legislation since 1870) (= Juristische Zeitgeschichte (Contemporary legal history) Abt. 3 Beiträge zur modernen Strafgesetzgebung (Contributions on modern penal legislation), vol. 19), Berlin 2005, pp. 86–108.**

⁷ Adolf Jost, *Das Recht auf den Tod. Sociale Studie (The right to die. Social Study)*, Göttingen 1895, p. 6.

² Udo Reiter, *Mein Tod gehört mir (My death belongs to me)*, external opinion piece, *Süddeutsche Zeitung*, 21.12.2013, p. 2.

³ Archive of Upper Bavaria, Munich, Eglfing-Haar records, medical record of Joseph I., entry in the clinical record dated 2.11.1940.

⁴ Archive of Upper Bavaria, Munich, Eglfing-Haar records, medical record of Siegfried H., 1939 registration form.

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