



## Chronic pain and voluntary euthanasia

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### Abstract

Emotional status and its brain bases change in a chronic pain patient and this change affects his/her decision making ability. Moreover, it is accepted that a mentally disturbed individual is not competent to make critical decisions. According to these bases, this article demonstrates that such patients are not entitled to request voluntary euthanasia.

**Keywords:** Chronic pain, Emotion, Decision making, Voluntary euthanasia.

### Introduction

Voluntary euthanasia (VE) is the act of requesting deadly medical practices in order to terminate one's life (1). The process of decision making (like that for VE) is composed of two interwoven brain based components (2). One is the conscious power of analyzing the condition and utilizing algorithmic like strategies, which is known as cognition (2, 3). The other part is the emotional background of the individual (2). This part is important since it affects the person's ability of seeking in the condition (4), estimating the parameters of a situation (5) and finally deciding (2). Chronic pain patients (CPPs) develop

disappointing emotional backgrounds, which affect their mental power of decision-making (6).

This article argues about the mental incompetence relating decision-making that accompanies chronic pain in such patients.

### Theoretical concepts

*Chronic pain and emotion based decision making (exemplifying approach):* A CPP is under the torture of his/her illness. This can be considered as equal to the historically known conditions of torturing a person and wanting him/her to accept or confess something in return for relieving pain (7). In case of VE, the agent is the internal mental burden of a disease and the thing wanted in return for relieving the pain is "dying acceptance". Therefore, in this condition the stimulator of

accepting death is the emotion of escaping from pain in return for anything. This is the exaggerated form of the normal emotion of fearing and escaping from painful situations (8). In fact, a CPP fears from experiencing excess pain. According to this outlook and having in the mind that emotions -in the way it is described in the literature (9) - are the most important determinants of the alternative to be chosen (10), here it is proposed that CPPs are emotionally and hence mentally incompetent for making critical decisions.

*Chronic pain and emotion based decision making (experimental approach):* Studies using MRI technology have shown brain deficits in CPPs (11-14). More specifically in the state of chronic pain it is stated that the orbitofrontal part of the brain cortex is preferentially involved. This part functions as a link between multiple brain regions with distinct roles in the emotional assessment. These regions include lateral prefrontal areas which handle memory, effector components of the brainstem which are responsible for producing emotional responses and those parts that are considered as the brain substrates of feelings like insula and amygdale (6). According to these findings a CPP does not have a biologically healthy brain for providing the accuracy of the act of choice-making especially when he/she wants to do so for emotion - laden alternatives like that of whether to escape or cope with the pain.

### **Discussion**

The central concept of this article is that a person who is under the mental pressures is not

capable of making critical decisions. The same concept is already accepted for the other categories of people who cannot think well such as drunken individuals (15). The fact that mentally under pressure patients cannot think well is also indirectly accepted by all societies that refuse to obey a mentally ill patient's will in the light of labeling the patient unqualified for making a will according to the judgment of court. With the same bases, this article's concept can be accepted by the court and become a law in such societies.

### **Conclusion**

A CPP is mentally incompetent to make critical decisions. Therefore, the patient's will of terminating his/her life must not be accepted like that of a drunken person. Deciding to undergo euthanasia is the most critical decision of a person (not only a patient) since this decision leads to the end of making other decisions. In this respect, deciding to die is different from deciding to buy a car because the latter is reversible or can be compensated in the future and does not violate the right of making other decisions, something that the former intrudes in. Therefore the ability of making the decision of undergoing euthanasia must be considered as something different from just a right. In this regards the inclusion of this ability among other rights must be investigated more.

Mental incompetence is the common quality in both conditions of chronic pain and will rejection in the court. Therefore the accepted rules for both of these two conditions must be the same. This means that any nation that rejects the will of a mentally incompetent individual must do the same about the request of a CPP for VE.

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