A Study on Exploring the Legality of Euthanasia in India: An Ethical Dilemma of the Medicine Industry

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Abstract: Euthanasia is the deliberate termination of life to alleviate suffering which sparks intricate ethical and legal discussions globally. In India, where cultural, religious, and socio-economic factors intertwine, the discourse on Euthanasia is particularly intricate. This paper delves into the legality of Euthanasia in India, examining both ethical considerations and the existing legal framework. However, challenges persist in implementing and regulating Euthanasia practices. Issues such as ensuring informed consent, preventing misuse, and reconciling diverse cultural and religious beliefs remain contentious. Additionally, disparities in access to quality palliative care pose ethical dilemmas. This paper delves into the dilemma of legalising Euthanasia and questions whether Euthanasia could demotivate the search for new modes of treatment for the terminally ill and could permitting Euthanasia weaken the commitment of doctors and medical institutions to save lives. It also questions the safety of hospitals given that Euthanasia can be used illegally. This paper thus highlights individual autonomy against potential abuses and ensure compassionate end-of-life care for all patients.

Keywords: Euthanasia, Passive Euthanasia, Ethical considerations, Legal framework, Informed consent, Palliative care.

INTRODUCTION

Overview -

The act of intentionally ending a terminally ill patient's life to alleviate their suffering can be termed as Euthanasia. Speaking of its legality, passive Euthanasia is legal in many countries including India. There are three major classifications of Euthanasia, they are voluntary, non-voluntary, and involuntary. When a person wishes to terminate their life, it is known as voluntary Euthanasia and is permitted in an many nations recently. Non-voluntary Euthanasia includes both active and passive forms and is

permitted in some nations under specific criteria and takes place when a patient's permission is not accessible. All nations prohibit involuntary Euthanasia, which is typically seen as a murder when it is carried out against the patient's will or without their agreement.

The passing of the "The Medical Treatment of Terminally III Patients (Protection of Patients and Medical Practitioners) Bill" in 2021 further shaped the legal landscape, legalising passive Euthanasia under specific circumstances.

OBJECTIVES OF THE STUDY

Studying the legality of Euthanasia in India is important because it involves complex ethical, moral, and legal considerations. Understanding the legal framework helps in addressing issues related to end-of-life care, patient autonomy, medical ethics, and the rights of terminally ill patients.

Additionally, it provides insights into the challenges and implications of legalising Euthanasia in a diverse and populous country like India. The following points give us the pathway to conducting our research -

- Medical Ethics: Exploring the ethical considerations surrounding Euthanasia, including the principles autonomy and justice, and how they apply in the context of end-of-life decisionmaking.
- Public Opinion: Examining public opinion and their perspective through surveys and questionnaires about their understanding of Euthanasia.
- 3. Practical Implications: Considering the practical implications of legalising Euthanasia in India, including its impact on healthcare delivery, the

- role of medical professionals, the rights of patients, and the potential for abuse or misuse.
- Challenges and Controversies: Identifying the challenges, controversies, and unresolved issues associated with legalising Euthanasia in India, such as defining criteria for eligibility.

By studying these aspects in detail, we will try to gain a comprehensive understanding of the legality of Euthanasia in India and make informed decisions regarding policy, practice, and advocacy in this area.

Problem statement -

The ethical issue of legalising Euthanasia raises concerns about whether it will discourage medical professionals from trying to save lives by demotivating them from looking for innovative treatments; moreover, Euthanasia can be used unlawfully, which raises questions about the safety of hospitals.

REVIEW OF LITERATURE:

In March 2018, India's Supreme Court legalized Euthanasia in the Common Cause Case, creating a significant legal and moral milestone. Yet, this ruling has ignited debate due to conflicting perspectives on the right to life versus the right to die, as well as concerns about its alignment with India's legal system. The absence of a clear legislative framework poses challenges in implementing this decision, particularly in a nation grappling with perceived shortcomings in its adherence to the rule of law. This article explores Euthanasia's global legal landscape, examining complexities encountered in various jurisdictions, and delves into the specific context of India. This text aims to analyse the legal and ethical complexities of Euthanasia in India's distinct legal framework. It considers different viewpoints and arguments both supporting and opposing this practice, drawing upon the insights of experts in the field.

Euthanasia remains a challenging topic globally, with perspectives rooted in concepts of mercy and human dignity. In India, where the Constitution safeguards the right to life, there is a recognition that human existence extends beyond mere survival. Recent court rulings have sanctioned passive Euthanasia, emphasizing the importance of dying with respect. However, active Euthanasia faces a legal vacuum, aligning with a worldwide pattern where many nations

tolerate passive forms but hesitate to legalize active Euthanasia. Despite varying legal stances, most religious beliefs generally disallow active Euthanasia while permitting certain passive practices. In India, the legal framework for Euthanasia has been largely shaped by the judiciary. Courts have established guidelines until comprehensive legislation is implemented. This study aims to examine the legal aspects of Euthanasia in various countries and analyse the role of the judiciary in the development of India's Euthanasia laws.

This study analyses the legality of passive Euthanasia in India. It reviews the laws regulating end-of-life choices, particularly those involving the suspension or refusal of medical treatment leading to a patient's death. Sebastian analyses key legal cases and legislative developments, focusing on how Indian courts have interpreted passive Euthanasia within the context of medical ethics and fundamental rights. The research also explores the evolution of legal perspectives and public sentiments regarding end-oflife care, emphasizing the ethical complexities and challenges it presents. Sebastian's research delves into the intricate legal aspects and debates about passive Euthanasia in India. It contributes to ongoing discussions on healthcare ethics and the rights of individuals receiving medical treatment.

In their research paper, authors G Bhagyamma and Dr. Ramesh analyse the legal and ethical dimensions of Euthanasia in India and Canada. They compare legal frameworks, court rulings, and cultural norms governing end-of-life choices. The researchers evaluate the evolution of Euthanasia laws and discuss ethical dilemmas surrounding self-determination, dignity, and the right to die peacefully. They highlight the intricate balance between individual autonomy, societal concerns, and medical ethics. The study also considers the role of healthcare professionals, legal safeguards, and public perspectives in shaping the Euthanasia debate. By comparing different legal and cultural contexts, the authors highlight challenges and possibilities for creating laws and ethics around Euthanasia.

Kriti Misra's research analyses the legal aspects of Euthanasia, delving into the complex ethical and legal debates surrounding it. The study examines how different countries have approached Euthanasia and how the legal landscape is evolving. It explores key legal concepts such as autonomy, beneficence, and the

sanctity of life, and analyses their significance in Euthanasia legislation. Misra examines significant court cases and law changes, highlighting the complexities and tensions across various legal systems. The study provides an in-depth analysis of the challenges and implications of legalizing Euthanasia, considering factors such as patient rights, medical ethics, and societal values. This publication offers exceptional understanding into the evolving legal discussions surrounding Euthanasia. It establishes a foundation for further academic investigations and legislative considerations in this intricate arena.

Sheetal Singh and colleagues' research study, titled "Attitudes of Doctors Toward Euthanasia in Delhi, India," examines the perspectives of doctors in Delhi on the issue of Euthanasia. Through a survey using questionnaires, the study explores the doctors' opinions, understanding, and experiences related to Euthanasia. A substantial proportion of doctor support Euthanasia in cases of terminal illness or severe suffering. However, concerns about its potential misuse and legal implications are also highlighted by the study. This study offers valuable perspectives on healthcare professionals' complex views on Euthanasia in India. This information is significant for ethical discussions and the creation of policies for endof-life care.

This study titled "Euthanasia: An Indian Perspective" by Sinha, Basu, and Sarkhel explores the ethical, legal, and social-cultural aspects of Euthanasia in India. It examines different viewpoints for and against Euthanasia, considering its complexities within the Indian context. The study analyses the legal framework for Euthanasia in India, including court cases and legislation. Additionally, it examines the cultural and religious influences that shape opinions on end-of-life decisions. The authors also consider the potential impact of legalizing Euthanasia on healthcare professionals, patients, and society as a whole. The research comprehensively explores the challenges and debates concerning Euthanasia in India, offering valuable perspectives on its ethical dilemmas and practical implications.

The study by Raghvendra Singh Shekhawat and colleagues explores Euthanasia practices globally, with an emphasis on India. The authors examine

ethical, legal, and social considerations surrounding Euthanasia. They explore the historical evolution and legal frameworks for Euthanasia worldwide. The study focuses on the ethical debates about the right to die. In India, the authors review legal developments and significant cases related to Euthanasia, providing an analysis of the current legal context. This paper provides important information about Euthanasia by combining various research studies. It examines the complex factors surrounding Euthanasia around the world and its current situation in India. The information presented is valuable for policymakers, healthcare professionals, and researchers interested in ethical issues in medicine and end-of-life care.

Rateesh Sareen's study, "India Decides on Euthanasia: Is the Debate?" explores the intricate debate surrounding Euthanasia in India. It delves into the ethical, legal, and social aspects, examining diverse perspectives and rationales. Sareen analyses India's both historically legal framework, and contemporaneously. The study scrutinizes the implications of legalizing Euthanasia on individual freedom, medical principles, and societal norms. It comprehensively examines the challenges and prospects of Euthanasia legislation in India, highlighting the ethical dilemmas and policy considerations that confront policymakers and society at large. Sareen's research contributes to the ongoing debate on Euthanasia by deepening our understanding of its implications within the Indian society.

In this study, the author (C Seale, 2009) examines the perspectives on legalizing physician-assisted suicide and Euthanasia among UK doctors compared to the general public. Over 3,700 UK physicians were surveyed by mail. Most UK doctors oppose legalization, contrasting with the views of the general population. Palliative care specialists are particularly opposed. Those who strongly hold religious beliefs are more likely to oppose assisted suicide. However, the doctor's involvement in caring for individuals who died does not influence their views. While many doctors who oppose legalization acknowledge that medical decisions can shorten life, those who favour it also have reservations and emphasize the need for safeguards.

In this paper, the author (Rohini Shukla,2016) studies India's legal discussions on Euthanasia and focuses primarily on the doctor's involvement, neglecting the ethical weight of the patient's suffering in determining acceptable forms of it. This essay emphasizes the need for Euthanasia based on the ethical principle that doctors should prioritize the patient's suffering over their life. It argues that India's current permission for passive Euthanasia violates this principle because it only addresses the patient's interests. Euthanasia's ethical purpose is to ensure a comfortable death, which can only be achieved through active interventions by physicians. To end a patient's life ethically, doctors should be seen as trusted individuals with the morality and expertise to decide when and how it should be done, based on the patient's medical condition. They are not obligated to preserve life unconditionally or administer treatments without limits.

Several countries are considering legalizing the practices of Euthanasia and assisted suicide, or both. In assisted suicide, individuals take their own lives with professionally prescribed medication, while in Euthanasia, medical professionals administer the fatal medication. In 2012, over 5,000 individuals ended their lives in jurisdictions where assisted suicide and Euthanasia are legal. Assisted suicide has been legalized in Switzerland since 1918, Oregon since 1997, Montana and Washington since 2009, and Vermont since 2013. Euthanasia and assisted suicide have been permitted in the Netherlands and Belgium since 2002. In countries that allow both assisted suicide and Euthanasia, assisted suicide represents a relatively small proportion of hastened deaths: * Netherlands: 7-8% * Belgium: 2% Despite an increase in Euthanasia cases, assisted suicide remains less common in Belgium and the Netherlands. Oregon has also seen a gradual rise in assisted suicide cases. In Switzerland, assisted suicide is more frequent, but its growth rate is similar to that of Euthanasia in Belgium and the Netherlands. However, in Switzerland, assisted suicide is legal but not explicitly regulated by national law.

Euthanasia remains a contentious issue globally and in India, with passionate arguments both for and against it. In India, the views on passive voluntary Euthanasia have evolved from criminalizing it to legalizing it. The once unconstitutional "right to die" is now recognized under Article 21. This shift is evident in various rulings and reports by Indian Law Commissions, paving the way for policy and procedural changes. The finalization of this decision rests with a legislative team assigned to formulate the necessary laws. The

consequences of this choice will significantly impact the lives of those facing terminal and incurable illnesses. The Court and legislature have focused their debates on legal and constitutional issues, overlooking other important perspectives. Many who oppose Euthanasia have strongly advocated for moral, ethical, and economic factors, which have not been adequately considered in the discussion.

The controversial topic of Euthanasia has sparked extensive debate over the years. Its implications for morals and legality have made it a significant issue in human rights discussions. This essay will delve into the legal and ethical arguments surrounding both forms of Euthanasia, focusing on the perspectives of its advocates and detractors. In support of Euthanasia, arguments are raised based on: Patient Autonomy: The right of individuals to make decisions about their own end-of-life choices. Regulation and Legalization: Ensuring safe and ethical practices by establishing regulations and legalizing Euthanasia to protect both patients and healthcare professionals. Compassionate Care: Relieving unnecessary suffering in cases where other treatments have been deemed inadequate or futile, acknowledging that suffering is not always curable. Religious, political, ethical, legal, and personal opinions are all engaged in this contentious discussion. The ones who suffer among all of them are those who fervently desire to terminate their life because they are unable to continue in any way. Every person or organization has a unique perspective on Euthanasia. The discussion over Euthanasia is seen as pragmatic, sentimental, and religious.

Euthanasia is a practice where a person's life is ended, typically to prevent further suffering or a poor quality of life. It can involve stopping life support or medications in the case of terminal illnesses or irreversible medical conditions. In some cases, individuals may choose Euthanasia to avoid prolonging their pain or suffering. From a philosophical perspective, Euthanasia raises questions about the "Right to life" and the "Right to die." Some argue that ending a life in such circumstances upholds the latter right, allowing individuals to make choices about their own existence. However, others believe that it violates the sanctity of life and the importance of preserving it. Determining the worthiness of life poses a significant challenge. Several countries, including the Netherlands, Colombia, Belgium, Luxembourg, Albania, and Canada, have legalized Euthanasia. In contrast, India permits passive Euthanasia but prohibits active Euthanasia. The legality, ethics, and sacredness of Euthanasia remain a subject of ongoing debate, especially in countries where there is a diversity of views on its morality, ethics, and legal status.

In this paper, the author (Adam Greif, 2019) argues that physician-assisted Euthanasia is ethically justified and should be legalized for consenting adults. They use an example to illustrate their position that it is a type of compassionate killing that is morally superior to other forms of killing. The author acknowledges criticisms against the legitimacy of Euthanasia and the distinctions between it and other types of killing. They also address concerns raised in ethical debates, including the slippery slope, the limits of autonomy, and the availability of alternative options to Euthanasia.

Presently, no state permits doctors to prescribe lethal drugs to patients seeking to end their own lives, except for one. The exception stems from lawsuits filed in Washington and New York, where terminally ill patients challenged the prohibition. Two federal appeals courts—the Ninth Circuit for Washington and the Second Circuit for New York—ruled that the Constitution prevents the government from outright banning doctors from assisting with such severe and avoidable suffering, paving the way for these patients to legally obtain life-ending drugs. The legal documents detailed the excruciating suffering experienced by the terminally ill plaintiffs.

In modern healthcare settings, many deaths occur after medical interventions that directly contribute to the patient's demise. In critical care units, the removal of life-sustaining treatments is commonly the primary cause of death. Palliative care often involves administering medications that, while intended to relieve pain, may ultimately hasten the patient's passing. Additionally, "Do Not Resuscitate" (DNR) orders are commonly documented in medical records, indicating that no efforts will be made to revive a patient in the event of a cardiac or respiratory arrest. When a competent adult patient requests removal from a mechanical ventilator, doctors must honour their wishes, regardless of how illogical they may appear. This paper aims to explore why we permit doctors to play a substantial role in ending patients' lives but forbid the medical community from performing this procedure in the most humane and painless mannerby administering a single lethal injection. The author believes that Euthanasia, or assisted dying, should not be evaluated in isolation from other medical practices that can shorten life. Instead, we need to examine the underlying rationale for the distinction between what is legal and what's illegal in these situations.

In February 2016, France enacted the Claeys-Leonetti Law. This law banned assisted suicide, re-enforced the ban on Euthanasia, and allowed for deep and continuous sedation. A study examined cancer patients' perspectives on medical assistance in dying and continuous sedation. Researchers surveyed 331 patients with terminal cancer in 14 palliative care centres, exploring their views and identifying factors that influenced their perceptions. Survey Results on Physician-Assisted Suicide and Euthanasia: Nearly half (48.6%) of respondents expressed positive views towards physician-assisted suicide. 27.2% held negative opinions on its legalization. A majority (52%) supported legalizing Euthanasia. Patient Perspectives: Among healthy French individuals, a majority favours the legalization of Euthanasia. However, only about half (50%) of patients receiving palliative care share this view. Most medical palliative care professionals expressed opposition to Euthanasia. The primary reason behind this view, identified through research, was a cultural factor. This same cultural influence was observed in subsequent studies involving international groups.

RESEARCH GAP:

The legality of Euthanasia in India is a complex issue with significant moral, ethical, legal, and social implications. There are several research gaps from the existing papers in this area that were highlighted -

- 1. Public Perception and Awareness: There is limited research on public attitudes towards Euthanasia in India. Studies can explore various cultural, religious, and socio-economic factors influencing perceptions of Euthanasia.
- 2. Patient Autonomy and Consent: There is a need for research exploring the extent to which patients' autonomy and rights are respected in end-of-life care decisions in India.
- 3. Impact of Legalisation: Limited research exists on the potential impact of legalising Euthanasia in India, including its effects on healthcare practices, patient care outcomes, healthcare costs, and the broader social and cultural landscape.

4. Safety of Patients: With legalisation of Euthanasia, an important question arises, that is, the safety of patients in the hands of doctors and nurses. There might be illegal usage of Euthanasia in hospitals that puts life at risk.

RESEARCH METHODOLOGY:

Research Objectives –

- 1. To gain the understanding of what people perceive about Euthanasia
- 2. To understand the factors and criteria that influences the usage of Euthanasia
- 3. To analyse how people feel about the legal status of Euthanasia
- 4. To assess the downside of legalising Euthanasia and weight against its advantages

Research Approach -

For study about the legality of Euthanasia and its ethical dilemmas, we have collected primary data from a sample population to gain a general public opinion about the understanding of Euthanasia, its legal status, and its downsides. Apart from primary data, we have also used secondary data by studying various research papers and articles where authors have discussed about

Euthanasia. Using this mixed approach, our paper aims at finding comprehensive answers to our questions with using our sample populations' knowledge and an in-depth analysis of the research papers.

Sampling Method -

For our research we have used purposive sampling method where we have chosen our participants intentionally based on their geographical locations, age, profession, and knowledge. A sample size of 62 individuals with age ranging from 14-73 years were chosen for conducting of the research.

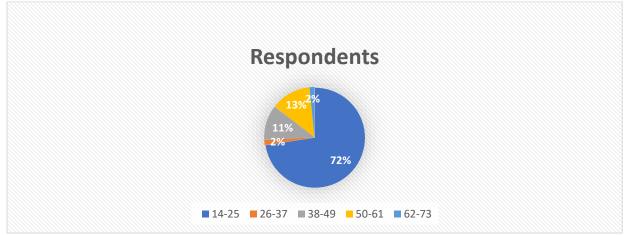
Geographical Distribution -

Our sample population mainly belong to tier 1 and tier 2 cities that majorly captures the urban population who belong to varied professional and cultural backgrounds.

Sampling Technique -

We have used the survey sampling and we have collected data using a questionnaire with a set of 12 questions mainly about Euthanasia, its criteria, and some downsides of its legality.

Data Analysis and Interpretation:

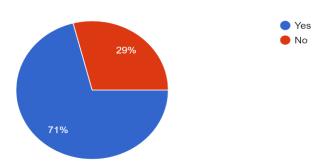


The primary data is collected, analysed, and interpreted by combing the responses of all the individuals. It can be said that a major percent of our population belongs to the age group of 14-25 years (72%). This group mainly includes students and young

professionals. The age group of 50-61 years consists of 13% that includes experienced individuals, followed by 38-49 years (11%) and then followed by the other groups.

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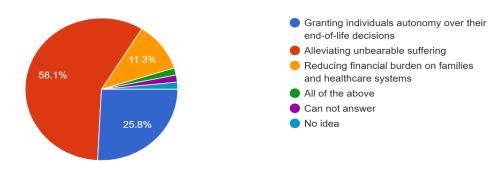
Have you heard about euthanasia before? 62 responses



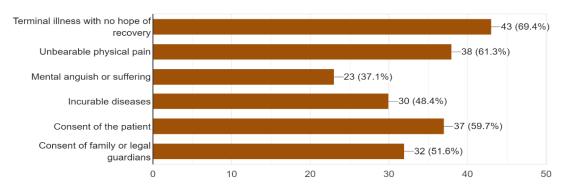
We can infer that 71% of the sample population are aware of the concept of Euthanasia that will help us in further understanding about their stance on the matter. A short description was asked about the concept where we have received varied responses. Some termed it as

"painless death" whereas some respected the autonomy and termed it as "respected death choice." There are various responses focusing on similar terms.

What do you believe is the primary reason for legalising euthanasia? 62 responses

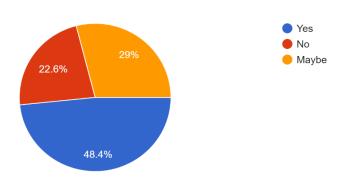


What criteria do you think should be considered for allowing euthanasia? (Select all that apply) 62 responses



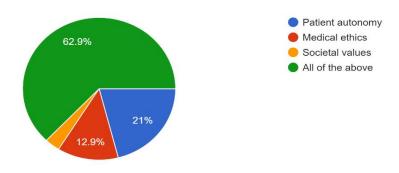
Should euthanasia be legalized in India?

62 responses

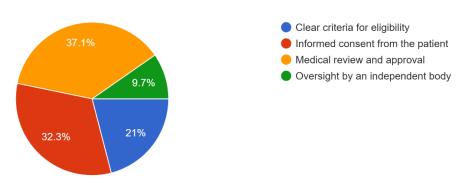


From the above graphs, we can get a basic idea of how people feel about Euthanasia, its criteria, and primary reasons to implement them, and its legal status in India. 48.4% believed that Euthanasia should be legalised, whereas 22.6% felt it otherwise. 29% did not take a stance and thus chose neither.

Which factors should be considered when determining the legality of euthanasia in India? 62 responses



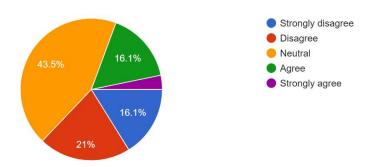
Which safeguards or guidelines should be implemented if euthanasia were to be legalized in India? 62 responses



The above two graphs delves deeper into the concept of Euthanasia and gives us an understanding of some general guidelines to ensure it safe use and also ensuring that they are not used illegally. These guidelines becomes really intrumantal in instilling belif among people about the ethical use of Euthanasia.

Below are some important questions that was asked which challenges the leagality of Euthanasia. We asked wheter they feel the process of Euthanasia could demotivate doctors and nurses to save lives and whether Euthanasia could dispirit the search for new modes of treatment, given that Euthanasia is an easier process for medical practitioners.

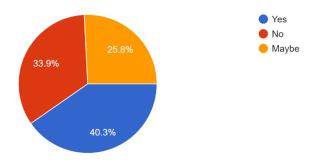
Permitting euthanasia could undermine the commitment of doctors and nurses to save lives. 62 responses



Most of the people stayed neutral (43.5%). Disagree and stronly disagree included a total of 37.1%. 19.3% belived that Euthanaisa can demotivate the doctors and nurses. What is important to notice it that the batch that disagreed (37.1%) mainly included people of ages between 35-70 years. It can be inferred that this group

has had various medical emergencies in various forms compared to the rest of the group which mainly includes students and young adults who might have not faced such challenegs. Thus the 35-70 year group believe that Euthanasia will not undermine the doctors' and nurses' commitment towards their patients.

Allowing euthanasia could discourage the search for new modes of treatment for the terminally ill. 62 responses



This asks about the research of newer treatments for the terminally ill. It is inferred that it follows a similar pattern as the previous one. Although 40.3% believe Euthanasia could demotivate new searches, 33.9% believe otherwise. The 33.9% batch again belong to the age group of 35-70 years who still believes the medicine industry and its effortless researches for enhancement of treatments. However, 25.8% didn't vote for either one of them.

The last question that was asked was, can Euthanaisa transform hospitals to unsafe places. We have received responses that can be divided under three broad categories. One is where people believe in hospitals and trust no illegal use of Euthanasia, the others believed that it may become unsafe and hospitals may illegally use Euthanasia for easier process, and there is the third category who also believes it might be unsafe but still have their hopes instilled. They believe that with proper and accountable management and

transparent procedures, hospitals can be transformed into a safer place even when Euthanasia is practiced.

Summary of Findings:

From the data what was collected using the questionnaire, the following are some findings that were highlighted –

- Euthanasia is a topic that is widely discussed and people are aware about the same. People have shown their support for Euthanasia given the procedures are conducted safely and with utmost care.
- Although Euthanasia is a known topic, people are not aware of its legal policies, paperwork, etc.
 Thus, more awareness needs be spread about the same so that they are not harassed and misguided.
- It is the responsibilty of the doctors, nurses, medical staff, and the management of hospitals to ensure there is no illegal usage of Euthanasia that leads harm and threat to patients.
- Indiviuals believe in doctors and hospitals, thus it becomes their duty to respect the autonomy of their patients and must respect their choice.
- People are also to be made aware of the accessibility to palliative care so that informed decisions can be taken into consideration.

Suggestions and Recommendations:

- Legal Reform: Adoption of comprehensive and well-defined laws that address Euthanasia in India. These laws must clearly define the guidelines for supervision, protection against misuse, and make it clear when Euthanasia is acceptable.
- Palliative Care Access: Provide terminally ill
 patients the access to high-quality end-of-life care
 and pain management, and focus on the
 development and improvement of palliative care
 services throughout India.
- Public Education: Run initiatives to educate the public about Euthanasia and end-of-life care in order to increase awareness and promote thoughtful decision-making.
- International Cooperation: Work together with foreign organisations to gain insights about the best practices and experiences from nations where Euthanasia is allowed permitted.

Limitations of the study:

This study has conducted a thorough research into the topic of Euthanasia, but, given its complex nature there are several limitations that were highlighted throughout the study. Firstly, our primary data analysis is based on peoples' perception and believe as none of them have actually gone through the entire process of all legal formalities and paperwork. Secondly, our study misses out on a one-on-one interview with a family member of an individual on whom Euthanasia was practiced as it is a very sensitive topic to discuss, this at some point does not give us a real time information about the process and all the criteria that comes into the picture. Moreover, our study does not include aspects of Euthanasia and its awareness in the rural areas as the study only focuses on urban cities. The findings that we have noted in the urban areas, may vary in the rural areas given family structure, financial capacity, knowledge about the process, etc.

CONCLUSION

Passive Euthanasia has gained its legal term, but active Euthanasia is still considered to be illegal. Euthanasia is a very sensitive topic as it discusses about the end of life for the terminally ill patients. Through this study we have tried to address the downside of its legality and how can it pose as a threat to lives. But, through our review of articles and papers and data analysis, we can conclude that Euthanasia will not pose a threat as we still believe that the medicine industry consists of people who are responsible and know how to respect the sanctity of life. Through transparent management and better aware public, Euthanasia will not be a threat but will prove to be a way of alleviating the suffering with utmost dignity and respect.

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