

Euthanasia: Pro and Con ★ Right to Die with Dignity

By LES GRIFFIN

Eternity is a multifarious entity. It is descriptive of the cosmos, life after death and/or prolonged suffering.

For thousands of Americans the latter is their fate. Their misery, though not preordained by our society, has been prolonged by it. They are the terminal cases awaiting the relief of death. To

Frosh Combats Cancer, Loses To Pneumonia

He could fight cancer but it took pneumonia to overcome Thomas B. Hirshfield.

Hirshfield died during the Easter holidays after a two-year fight with cancer. The doctors had given him six months to live when the disease was discovered. The pre-med student refused to give in to death.

"He came to school this semester over the doctor's protests," Mike Barnett, director of Trinity Dorm, said. "All the boys at Trinity really respected him."

The 18-year-old freshman was maintaining a B or better average in his classes.

Ruth Hirshfield, his mother, is asking for donations of blood to help repay the Wadley Research Center in Dallas and the Carter Blood Center in Fort Worth.

Donations can be made in the name of Thomas Hirshfield for either St. Paul's Hospital or Granville C. Morton, account number 10,131.

For more information call Barnett at 273-3341.

them the road to death is a combination of hell and eternity.

Through legislation, moral standards and negated responsibilities, the dying have no selectivity in their choice of time or means of demise. If their bodies have been ravaged by the effects of cancer of mangled by the devastation of war, they must rely on the physician's skill — even though their cause is hopeless.

Some say legalized euthanasia is the only solution. Known also as mercy killing, a growing number of people feel the practice must some day overcome the taboos of our modern(?) society. They especially feel this way if they are among those who have had to helplessly watch a loved one die a lingering but certain death.

Men of medicine have contact with dying more than any other segment of our society, and many have spent countless agonizing hours debating whether to condone or condemn the practice of mercy killing.

Faced with an admittedly hopeless case there can be no deliberation as to what course of action must be taken. They are middlemen who must accept their responsibility to the patient, professional ethics and the law.

But some disagree with the current prohibitions against euthanasia. In a recent article by Bill Case of the Dallas Times Herald, a number of local physicians admitted they might consider offering "sudden painless death" to incurably ill or injured patients.

"In many cases we recognize that euthanasia might be the only alternative of relief for the patient who is fully aware he is dying and begs for relief from unbearable suffering that drugs can no longer control," one doctor explained.

to 1 per cent lead. March 9 the FDA ordered this be reduced to 0.5 per cent by the end of 1972 and 0.06 per cent by the end of 1973.

The new regulations, designed to "minimize the health hazard to future generations," were implemented over the strenuous objections of the paint industry. The industry claims the action will force a rise in costs, shut down some businesses and curtail production of some paint colors.

"This is a hastily conceived regulation done for political reasons alone to satisfy Congress," said Robert Roland, executive vice president of the National Paint and Coatings Association.

The regulations do not affect paint currently on dwelling walls. Thus lead poisoning, particularly among ghetto children, will not be affected noticeably for several years.

"But very frankly — aside from the prohibitions against it — no one wants to 'play God' and be the man to throw the switch."

"The patient, his family, his physician and the hospital staff caring for him all are under terrific stress in these cases where there is no hope," another pointed out. "The final illness often emotionally drains and financially ruins a family. And the doctor is faced with utter frustration."

At the other end of the ledger, columnist Dr. Fred C. Rehfeldt opposes the practice.

"The real question is who shall make the decision of life or death? If there is any means of keeping the human machine running, it is a matter of supreme judgement not to do so," he said.

But the right to die with dignity is as fundamental as the right to live with dignity. Yet American society, which honors this right in word, often abridges it in deed — not out of malice, but as an ironic by-product of medical technology that critics say turns mercy into unintended cruelty.

Where nature has failed, machines are succeeding. There are devices to breathe for those who cannot, to nourish those who cannot swallow and to cleanse blood for those whose kidneys have failed.

An example of technology's backlash appeared over the Associated Press' wire services a month ago in the form of an obituary.

It read, "Seven years after she was injured in an auto accident in Reno; Nev., Ruby Mickelson, 37, died in Roy, Utah, without regaining consciousness. She was the mother of five children."

Legally there was little to do for Ms. Nickelson.

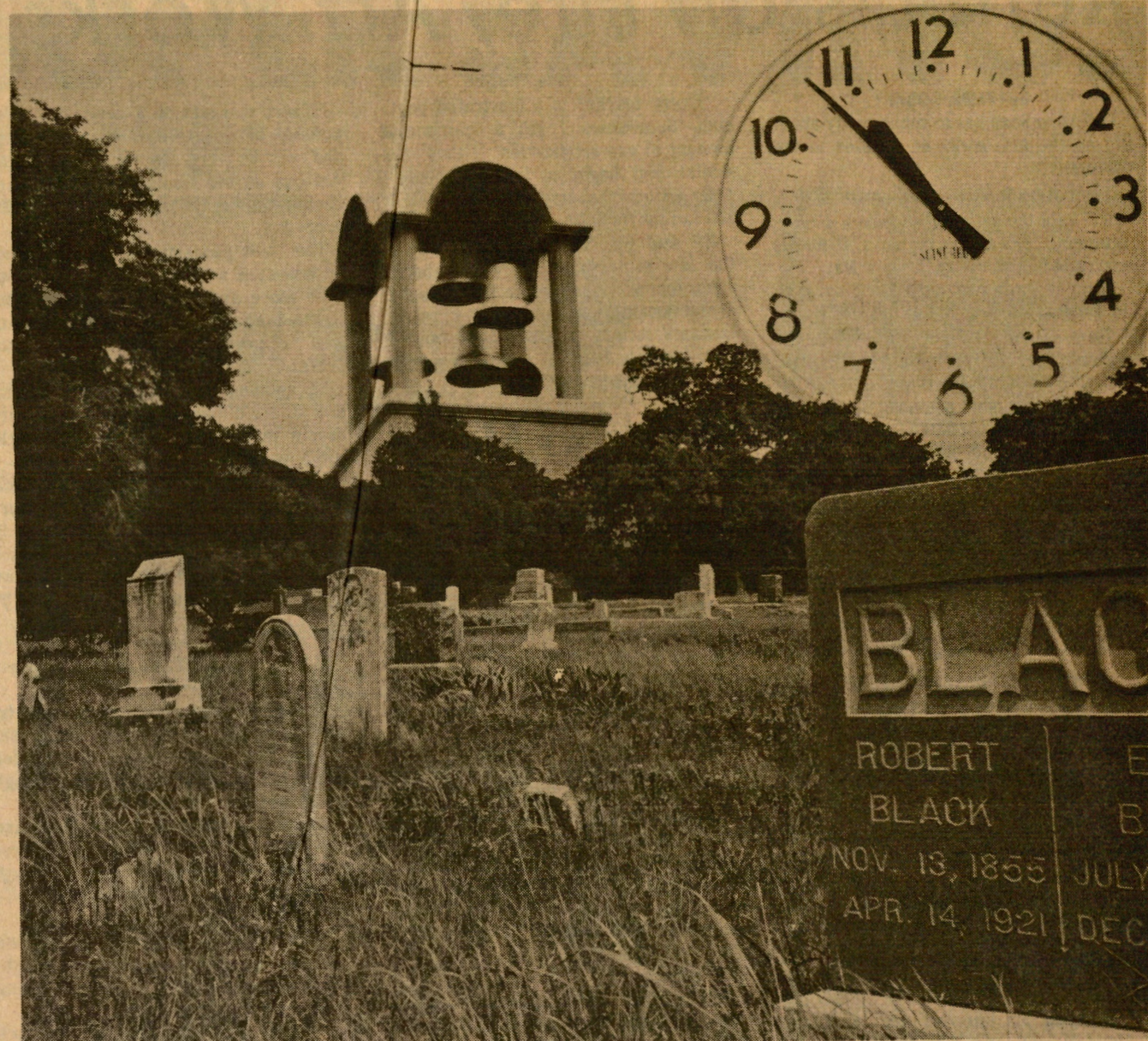
Conflicting court decisions have produced a labyrinth of dilemmas. Last January New York City's Cornell Medical Center won court permission to install new batteries in a 79-year-old man's pacemaker over his wife's objections.

"He's turning into a vegetable; isn't death better?" the wife asked. But State Supreme Court Justice Gerald P. Culkin, in declaring the patient incompetent, named the hospital his guardian "to protect or sustain his life."

Milwaukee County Judge Michael Sullivan, however, denied a Wisconsin hospital's attempt to rule a 77-year-old woman incompetent so surgeons could continue amputating her limbs. The woman suffered from hardening of the arteries and resultant gangrene; she refused to sign another surgical consent form.

"There is absolutely no evidence of incompetence," Judge Sullivan ruled, "except that she is too weak to talk . . . We will leave her to depart in God's own peace."

But God's own peace has been legislated, theologically abused, continuously denied and negated. Dying with dignity must come in the form of constitutional amendment, just as living with dignity has in the past.



JUST WAITING — For thousands of terminal patients it's only a matter of time waiting to die. There is no hope of recovery for them, and the immediacy of death is un-

bearable. Is euthanasia the answer?

Shorthorn: Jim Aldridge

Peeling Paint Deadly

Fifteen-thousand children in the Dallas-Fort Worth area might be affected by lead poisoning, Dr. Robert Fisher stated at a press conference this week.

Most children are affected from eating peeling paint in older houses, said Fisher, who is with the Environmental Protection Agency of the Health, Education and Welfare Bureau of Community Development.

"It's horrendous," Dr. Fisher said. "The problem is so great it needs nothing short of a national commitment to solve."

He said about 200 children die every year from lead. He noted paint manufacturers began in 1955 to reduce lead in their interior paints but exterior paints still contain high quantities.

Meanwhile, the Food and Drug Administration has taken action which would essentially ban the use of lead in interior paints after 1973.

Under present law, paint is restricted