

Annotated Bibliography

Student's Name

Instructor's Name

Institution

Date of Submission

## Annotated Bibliography

Appel, J. (2004). A Duty to Kill? A Duty to Die? Rethinking the Euthanasia Controversy of 1906. *Bulletin of the History of Medicine*, 78 (3), 610-634.

Jacob M. Appel is a world-known expert in biomedicine and medical history. He used to teach at Brown University. He has done a great contribution to such scientific and academic publications as the *Bulletin of the History of Medicine*, the *Journal of Medical Ethics*, the *Hastings Center Report*, the *Journal of Clinical Ethics*, and a lot of other ones. Jacob M. Appel successfully graduated from Harvard Law School. He is a current member of the bar in Rhode Island and New York State. The publication describes the discussions that were surrounding euthanasia in the USA in 1906. It provides an overview of the local government's plans to make such practice legal in two states: Iowa and Ohio. According to the article the doctors have to be a part of the standard routine, and 57% of their patients tend to get help from the doctor in committing suicide. This essay can support the thesis of the paper that voluntary euthanasia should be tolerated.

Breitbart, W. (2000). Depression, Hopelessness, and Desire for Hastened Death in Terminally Ill Patients with Cancer. *Journal of the American Medical Association*, 284(22), 2907-2911.

A leading American psychiatrist, Dr. Breitbart, is one of the leaders in the areas of Psychosomatic Medicine, Palliative Care and Psycho-oncology. Being a famous clinician, scientist and mentor, he also happens to be the Head of the Psychiatry Service at Memorial Sloan-Kettering Cancer Center, situated in New York. He holds a position of Vice Chairman of the Department of Psychiatry & Behavioral Sciences. The article is based on the data, collected between June 1998 and January 1999 from the cancer patients, whose illness was on the final

stage. This publication will keep up the student's point that patients have to be allowed free choice of what to do with their life and their death. The procedure will have to be legal, since the physician patronizes it and makes it totally pain free. The final choice must be done by the patient. Immediate death is the ultimate goal of some patients.

Buiting, H. (2009). Reporting of Euthanasia and Physician-Assisted Suicide in the Netherlands: Descriptive Study. *BMC Medical Ethics*, 102. Psychosomatic Medicine.

Buiting, Hilde is a Head of Erasmus MC, a part of University Medical Center Rotterdam, Department of Public Health, Rotterdam, the Netherlands University Medical Center. He worked for Julius Center for Health Sciences in Utrecht, the Netherlands. Buiting developed his career at VU University Medical Center, Department of Public and Occupational Health, EMGO+ Institute for Health and Care Research, Amsterdam, the Netherlands. University Medical Center Groningen, Department of Health Sciences, Section Metamedica, Groningen, the Netherlands became a place where Buiting invested the most as a professional. He is also a member of Academic Medical Center, Department of Social Medicine, Health Law Section, Amsterdam, the Netherlands. 158 cases were researched in the current article. They were all the Netherlands-based ones, and every case had to be approved by one of five committees. The ethical side of the problem was raised, as the society does not see the inner sufferings of the patients, as well as their pain when they are deprived of medical suicide assistance. The patients will not benefit from the prolonging of pain in case the assisted suicide does not get legalized.

Burg, W. (1997). The Slippery-Slope Argument. *Journal of Clinical Ethics*, 256-268.

Wibren van der Burg majored in moral philosophy and law. He works as a professor of Legal Philosophy and Jurisprudence at Erasmus University, Rotterdam. In the period between September 2006 and June 2007, he worked as a guest scholar at the Center for Human Values in Princeton, NJ. Later he occupied a position of professor of Law at the University of Tilburg. The pros and cons of legalizing the Physician-Assisted Suicide are overviewed and discussed in the article. Such kind of death will be approved by the Supreme Court rulings, in case it is voluntary. Special policies, stating that only grownups without special disabilities would be eligible for the death, assisted by a physician, are to be created. The article supports the student's thesis, proving that it is a voluntary choice of people to take such decision. Society is proved to have no right to extend the pain of certain individuals.

Pearlman, R.A., & Hsu, C. (2005). Motivations for Physician-Assisted Suicide. *J Gen Intern Med*, 20 (3), 234-239.

Pearlman is a Research Assistant with Group Health Research Institute at the Center for Community Health and Evaluation. He undertook the research based on the evaluation approach, as well as Participatory Research and Evaluation. He took part in Midwifery Care, End-of-Life Care, Medical Anthropology, and Community-based Public Health programs. Pearlman is currently holding the position of President and CEO of the Diabetes Research Institute Foundation (DRIF). He entered the company in 1993 as the Executive Vice President. American Friends of the Hebrew University was the previous place of his job where he worked as Executive Vice President and CPO. The article explains everything in chronological order: all the cases that were considered in court and what kind of motivation was behind them. The student's thesis statement is proved by demonstration of reason, to pass such decisions, which

have to be made by the patients. The economic component is in cost inefficiency of keeping the patient alive and leaving him with the pain at the same time.

Seale, C. (2009). Legalisation of Euthanasia or Physician-Assisted Suicide: Survey of Doctors' Attitudes. *Palliat Med*, 25 (3), 205-212.

Clive Seale is a prominent English sociologist. He holds a position of a Professor of Medical Sociology in the Institute of Health Sciences Education at Queen Mary University of London, England. He went to Bryanston School in Dorset, England. Later he obtained the BEd, MSc, and PhD degrees at the university level. He used to work as a professor at Goldsmiths College, London. His research field spreads out on the social research methods, the communication in health care settings, mass media and health, and end-of-life care. He works for the journal *Sociology of Health and Illness*, where he holds a position of Managing Editor. There is a big difference between the way doctors and society looks at the issue of the euthanasia legalization. The survey that proves this fact was held in the United Kingdom. This article on physician-assisted suicide provides the student's paper with a different view on the argument.