consider the will of God who gives us the precious gift of life (Deuteronomy 32:39). The basis of any decision, therefore, is whether a given treatment will benefit or burden the life of a patient, *not* whether the life of a patient is useless or burdensome.

In addressing these situations, rather than relying merely on a piece of paper or directive, a Christian should consult with his family doctor and family. Each of us should do the following:

- Consider God's view about the sanctity of life as revealed in His Word and pray for understanding and wisdom from Scripture.
- Express his convictions to his family, personal physician, and pastor.
- Determine if his family/doctor/pastor's views are in line with what is revealed in Scripture.
- Ask his doctor if he upholds the entire Hippocratic Oath in which a doctor swears not to assist in euthanasia.

All our decisions, including those for the end of our days, should be guided by God's will. Once believers have committed their lives to God's control, they need to communicate their beliefs to those who may be responsible for their health care choices. This is the best way to ensure that, when believers cannot make those choices themselves, their Christian convictions can still be respected.

The Role of the Church

The role of the clergy is crucial in dealing with life and death issues. There are three areas where their work is particularly important:

1. Pastors must minister to those who are sick or suffering. Such times do not diminish the value of life and may provide the greatest opportunities for spiritual growth and reliance on God for all concerned. We are called to bear one another's burdens, both for the sake of those who suffer and for those whose blessing it is to care for them. ***"Whatever you did for one of the least of these brothers of mine, you did for Me"*** (Matthew 25:40).

2. Pastors must encourage and pray for those in the medical profession and uphold them in faithfulness to the first principle of medicine—"above all, do no harm"—and in using their God-given abilities to benefit life, not to cause harm or death.

3. Pastors must take a firm stand against the devaluation of life and teach their flocks to take the same firm stand. They must proclaim that God views all human life at all stages and states as precious and resist any attempt to substitute the shifting ways that seem right to men for the eternal truths set forth by God. They must equip people with the Biblical truths and ethical principles they will need to make God-pleasing decisions and teach them the meaning of the Fifth Commandment—"You shall not murder"—which was clearly understood by Luther. In his catechism he wrote: *"We should fear and love God so that we do not hurt or harm our neighbor in his body, but help and support him in every physical need."*

We also remember the promise of our Lord Jesus Christ. He is our true source of comfort in illness and suffering. His strength is confirmed in our weakness, and His promise is never to leave or forsake us. As we entrust ourselves to His care, we can let go of our fear of loss of control.

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Euthanasia and the Christian

by Matthew Kaufman

The most alarming trend in American society is the devaluation of human life. This first became apparent with the shift in attitudes toward abortion, justified by making "choice" a right.

The mentality that justifies ending the lives of infants in the womb has not stopped there. Today, those who are elderly, sick, or disabled are being viewed as burdens and at risk of becoming candidates for euthanasia.

The "right-to-die" movement employs phrases such as "self-determination" and "death-withdignity" and presents itself as a *humanitarian* crusade to reduce human suffering. It is, however, a philosophy radically at odds with Scriptural truth. The Bible clearly teaches that life is a precious gift from God and that the number of our days *are* in His hands (Psalm 139:16; Job 14:5). As with other humanist movements, when the standards of God are rejected in favor of the opinions of men, the results are not more humane but more barbaric.

In response to an aging population and a strained health-care system, important people in both government and the private sector contend that—in the interests of "cost containment"—we cannot afford to devote resources to people "who will die soon anyway" or whose lives are deemed to lack sufficient "quality." Therefore, the "right-to-die" becomes an *obligation* to die.

Christians view these developments with the greatest concern. We fear their impact on the elderly and the infirm who face emotional, financial, and legal pressures to "choose" to die rather than "burden" their families. Many will feel, as University of Michigan law professor Yale Kamisar says, "that to reject euthanasia, once it is acceptable and others are 'doing it,' would be selfish and cowardly." We are similarly concerned about the impact on the medical profession whose members' identity as healers is compromised by their potential role as executioners.

Most of all, we are alarmed about the impact on all of us. As a society, we are exchanging our beliefs in the God-given innate worth of every life (Acts 17:25) for a notion that the perceived quality of life determines its value.

What Euthanasia Is What It Is Not

Allowing a person to die when a disease process is irreversible and death is obviously imminent in hours or days is *not* euthanasia. Patients—or, when they are not able to speak for themselves, their families—have the freedom to refuse medical treatments which will not cure, improve, or control their disease process, which will impose a burden beyond any benefits.

Christians must reject euthanasia which is a deliberate action taken for the *purpose* of causing or hastening death. This may include direct action (e.g., administering a lethal injection) or withholding of basic medical care or standard medical treatment (e.g., denying lifesaving medical care to a disabled child that would be provided a normal child).

The goal must be always to care, never to kill.

It is important to differentiate between *care* and *treatment.*

Care meets the basic needs—nutrition, hydration, warmth, shelter, emotional and spiritual support—of all people, sick or well. Today, many seek to define food and water as medical treatments that can be withheld to hasten or cause death. This is unacceptable. This does not apply to the time when someone is so close to death that his body cannot metabolize food; then feeding may be useless and excessively burdensome. In all other cases, care must never be withheld.

Medical Treatment is aimed at curing or controlling acute or chronic health problems. Physicians can use standard treatment in many situations while more advanced or serious situations require aggressive treatment. Standard treatment consists of medical therapy, such as medications, and surgical procedures commonly used to relieve health conditions and other problems due to injuries or illness. When treatment becomes medically futile or the burden of that treatment outweighs its benefits, it must be evaluated considering the best interests of the patient.

What is ordinary for an 18-year-old may be excessively burdensome for an 84-year-old with heart disease and diabetes. But determinations of what is excessively burdensome as a treatment must not be confused with subjective judgments of a person's "quality of life." The goal must be always to care, never to kill.

Who Decides, and How?

When a person cannot speak for himself, it falls to the family to make decisions for him. The key question at this time must be "what is best for the patient?," not "is this person's life worth living?" or "what is best for me?" As Christians, we are obliged to