BECOMING DEAD: THE EMERGING SOLITUDES OF ‘CHOICE’ AND ACKNOWLEDGING THE HUMAN CONDITION

RAH Lunchtime Ethics Series
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February 25, 2015
Declarations

• No conflicts of interest or commitment
• The opinions expressed and claims made are my own and not representative of any organizations I am associated with.
Acknowledgements

- Emma Buzath for her research assistance for this talk.
- Gary Goldsand and Denise Hugman for their work in organizing and promoting this long-standing ethics series.
- Thousands of patients and colleagues who have shaped my experience and thinking.
Some useful reading

• The following reference list might be useful.

• It includes some instructive writing about the dying and living experience, as well as some further philosophical exploration of the notion of autonomy for those who may be interested.

• It is by no means inclusive of all angles that must be considered.
References (1)

• Carter v. Canada (Attorney General), 2015 SCC 5


References (2)


Route

• The following slides describe the general route I will take in this talk.
Route (1)

• What is it about ‘choice’?
  • Who could argue against it?
  • But is it a construct of our particular societal view?
Route (2)

• Relate the concept of ‘choice’ to the principle of respect for autonomy.

• Challenge some of our potential misunderstandings about the notion of respect for autonomy

• Admonition about ‘autonomy and the mountain-top’
Route (3)

- The human condition, experience and the arc of life
- The mystical nature of being v. the achievements of science
- Are some disciplines missing from the conversation?
Route (4)

- The battle ground denotes two solitudes
  - How might that help or hinder our understanding?
  - Language matters
Route (5)

• Application to the recent SCC decision in Carter v. Canada

  • Claim: regardless of how one feels about the decision, we should care about the method of reasoning behind it
    • Legal
    • Logic
    • The practice of medicine
    • Possible impacts
Route (6)

- A consequence of individual choice and respect for autonomy
- Does a right to name a self-determined choice necessarily obligate another to act on it
  - Society
  - Any individual
  - A particular type of individual
  - Everyone one of those types of individual
Route (7)

- Individual benefit, individual harm
- Common good and common harm
Route (8)

- The practice of medicine and ways of becoming dead
- Society’s legitimate and perhaps illegitimate calls on the practice and practitioners of medicine
Route (9)

- Universality
- Accessibility
- Relationship, commitments and trust
- Slippery slopes and community regulation
Route (10)

- Coherent justifications
- But potential irreconcilability due to the chasm between the starting places
- By what mechanisms might Society proceed?
Discussion

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