

## End of Life Interventions and Catholic Teaching [5-22-23 Version]

Drafted by: Mary L. Hill, BSN, MA, JD, Avera Chief Mission Officer, Phone: (605) 322-4848; Email: [mary.hill2@avera.org](mailto:mary.hill2@avera.org)

A. Object	B. Intention	C. Circumstances	D. Consistent with Catholic Teaching? References to ERD (see pages 2-4)
1. Euthanasia	Intention to end a person’s life to end suffering.	Physician performs action/omission that ends a person’s life.	No, because the intention of ending a person’s life is objectively evil. ERD#60
2. Physician-Assisted Suicide	Intention to end one’s own life to end suffering.	Physician provides means whereby a person ends his/her own life.	No, because the intention of ending one’s own life is objectively evil. ERD#60
3. VSED: Voluntary Stopping Eating and Drinking	Intention to end one’s own life by forgoing oral food and fluid.	Person voluntarily stops eating and drinking to end his/her life.	No, because the intention of ending one’s own life is objectively evil. ERD#60
4. Stopping eating and drinking due to complications of ingestion (such as aspiration, fluid overload, etc.) at the end of life.	Intention to avoid harm and complications of ingestion at the end of life.	Person stops eating and drinking due to harm and complications of ingestion at the end of life.	Yes, because the intention is to avoid harm and complications of ingestion and <b>not</b> to hasten death. ERD#58
5. Withholding or withdrawing life support (ventilator, dialysis, etc.) or other intervention and person dies from underlying pathology.	Intention to forgo or remove interventions that are excessively burdensome and do not provide sufficient and meaningful benefits.	When a ventilator, dialysis or other intervention is necessary to sustain life, withholding or withdrawing it will likely result in a person’s death from underlying pathology.	Yes, because the intention is to avoid or alleviate excessive burdens of certain interventions and <b>not</b> to hasten death. It is morally acceptable to foresee death without intending it. ERD#57
6. Palliative measures (e.g. palliative sedation) that unintentionally hasten a debilitated person’s death by suppressing respiration.	Intention to alleviate pain and suffering of a dying person when other palliative measures are not or no longer effective.	In situations of severe debilitation and intractable pain, analgesics may inadvertently suppress respirations and hasten death.	Yes, because the intention is to alleviate suffering and <b>not</b> to hasten death. ERD#61
7. Allocation decision that a person is not a candidate (or is lower on the waiting list) for an organ or other intervention when demand exceeds supply, and the person dies from underlying pathology.	Intention to save the most lives by justly and equitably allocating organs or other scarce resources to persons with the best chance of recovery or persons who are higher on the waiting list.	Situations in which demand for a resource exceeds supply, such as solid organs for transplant. Allocation decisions are based on a national paradigm and the person’s health and likelihood of a favorable outcome.	Yes, because the intention is to save the most lives and <b>not</b> to hasten the death of a person who doesn’t qualify for the resource or who are lower on the waiting list based on the allocation paradigm.
<p><b>Fonts of Morality</b> (Peter J. Cataldo, “The Moral Fonts of Action and Decision Making,” in <i>Catholic Health Care Ethics</i>, 2nd ed. 2009, 10).                      Every truly good human act possesses a moral integration of object, intention, and circumstances.                      I. The Object: a. The specific kind of action chosen “what is being done?” b. Something that fulfills and completes human nature or is contrary to its integral unity.                      II. The Intention: a. Subjective act of moving toward an ultimate end for the sake of another: “why is this act being done?” b. Dependent on the will of the one acting.                      III. The Circumstances: a. The manner in which the act is carried out: “Where, when, how, who?”                      All three components (fonts) must be good for the act to be good.</p>			