In the euthanasia debate, that is, the debate on the right of a person to choose death and of a healthcare worker to help the realisation of such a choice, respectively, there is no „crucial argument.“ The debate has been particularly vivid for the last few decades and it certainly will remain so for many more decades, as long as no answer has been spotted to the question of defining death and its limits. Although many countries either keep avoiding public discussion or oppose the legalisation of euthanasia, the global trend is obvious: almost every year, one or more countries join the „club“ allowing the possibility of, mostly, assisted suicide. Precisely due to such trend and the inevitably permanent „walking around the hot seat,“ one’s attention has to be attracted by a „brave,“ but seemingly quite démodé approach stressed in the subtitle of John Keown’s book, „An Argument Against Legalisation.“

John Keown is Doctor of Civil Law (Oxford), Doctor of Philosophy (Cambridge), and a Senior Research Scholar and Professor of Christian Ethics in the Georgetown Kennedy Institute of Ethics. Beside authoring „the first paper to demonstrate comprehensively that the American War for Independence failed to satisfy all (if any) of the criteria for a ‘just war’,”1 Keown has certainly been most known for his study of euthanasia from 2002, recently re-published in the essentially revised second edition

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1 https://kennedyinstitute.georgetown.edu/people/john-keown/
by the Cambridge University Press. That a professor of Christian ethics and a scholar of the Catholic (Jesuit) Kennedy Institute opposes the legalisation of euthanasia is not surprising, but let us check the originality of his arguments.


In the case of the Dutch experience, Keown argues the guidelines are “too vague” and “widely breached,” while the definition of euthanasia lacks clarity: in this way, Keown directly opposes those he himself calls major euthanasia scholars, like John Griffith or Gerrit Kimsma. Equally unconvincing is the claim that “Belgium has fallen well short of ensuring effective control of voluntary active euthanasia,” as it was once with the similar act in the Australian Northern Territory. For Keown, neither the Oregon Death with Dignity Act (the later model for many other states) is precise, nor strict enough when it comes to controlling physician-assisted suicide, and the Canadian Supreme Court ruling allowing euthanasia results “flawed.”

Going back to the question Keown poses at the very beginning of his book – if voluntary active euthanasia and physician-assisted suicide were legalised, could they be effectively controlled by the law? – the answer is not so complex: no law can prevent all the abuses of even the best legal solutions, but avoiding to enact a law enabling the termination of unbearable human sufferings only because we are afraid of its potential abuse, seems a far more cruel „crime“ and proves prejudices are still in the lead. One has to conclude that, surfacing no new contribution to the existing standstill, Keown’s book re-examines the oldest objections to euthanasia in the Christian-Ethics-Professor way. It may sound almost incredible how persistent one can be in entering other persons’ lives and limiting their options and rights, especially if no one knows what death really brings. The only danger revealed by the legalised euthanasia is when someone else decides you should die: the same danger is present when someone else decides you should not have the possibility to die. That is the real „slippery slope“ that makes all the difference.

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