World Medical Association issues Madrid Declaration against euthanasia

Dr. André Wynen of France, the Secretary General of the World Medical Association, Inc., granted this interview to Club of Life representative Jutta Dinkermann, and has graciously consented to its publication in EIR.

Q: You are the secretary general of the World Medical Association. Could you tell us a bit about this organization?

Wynen: The World Medical Association is a nongovernmental organization of voluntary medical associations representing more than 2.5 million free physicians practicing in 42 countries around the world. Every year the representatives of these associations discuss and define medical ethics guidelines in their World Medical Assembly. The most important and well-known WMA declarations are the Declaration of Geneva, which is the modern version of the Hippocratic Oath, the Declaration of Helsinki adopted in 1964 on human experimentation, the Declaration of Tokyo (1975) on torture, the Declaration of Lisbon on the rights of patients, and finally the Declaration of Madrid on euthanasia, unanimously adopted by the World Medical Assembly last month.

Q: What is your personal moral view of euthanasia?

Wynen: The natural duty of the physician is first to protect life and not to kill the patient. The main task of the doctor is to help his patient in defending his interest not only against the disease but also against any dangerous competition between the interests of the community of healthy people or society, even the family sometimes, and those of the patient. Euthanasia was clearly proscribed in medical ethics 2,500 years ago by Hippocrates. If we reconfirm that fundamental principle, where the Dutch government, in cooperation with the medical association, is drafting a new law to organize legally active euthanasia, and also because of what is happening in other countries like yours [Germany] with the action of Dr. Hackethal. We want to stop the path leading step-by-step to a human disaster such as during World War II and to prevent another Auschwitz.

Q: The WMA just had a meeting in Madrid. We learned that you adopted a resolution against euthanasia. Could you please give us the full text and tell us a bit about the discussion?

Wynen: The following declaration was adopted almost without discussion and unanimously by the Assembly:

"Euthanasia, that is, the act of deliberately ending the life of a patient, even at the patient's own request or at the request of close relatives, is unethical. This does not prevent the physician from respecting the desire of a patient to allow the natural process of death to follow its course in the terminal phase of sickness."

Q: What do you think are the true reasons of the people who want to implement euthanasia?

Wynen: People who want to implement euthanasia are using the same arguments as those used by the Nazis in 1939, when Hitler decided to initiate the first legal program in the world and in human history of active euthanasia on patients suffering from psychiatric diseases. It was explained at that time, especially in the medical publications, that, because of the successes of the medical sciences, natural selection was prevented and that, of course, it was the responsibility of the medical profession to play the role of nature to protect the population and the society (also the race) against any deterioration coming from the handicapped, the incurables, and/or genetic illnesses. One of the most famous authors of such theses was Professor Konrad Lorenz of Vienna University and now a Nobel Prize winner. We can find arguments of that kind in the documents circulated by the Dutch Medical Association and in France by the philosopher Jacques Attali, who explained that without setting up an active euthanasia program, before the end of the century, we shall not be able to face the world's demographic explosion. The Dutch Medical Association thinks that with the progress in medicine, we are now able to artificially prolong life and to prevent the action of natural selection, so the medical profession has to face a new kind of responsibility!

Q: What does this resolution mean in practical terms for the members of the WMA? What are the next steps for them to make sure that the resolution be fulfilled and that euthanasia be stopped wherever it is known to go on?

Wynen: The WMA declaration is only ethical deontological guidelines. They represent a moral duty for the practitioner and they are included in the national codes of ethics even in countries where the medical profession is not represented in the WMA. The Dutch Medical Association alone, totally isolated in the medical world, is opposed to that basic principle of our professional ethics. So we hope that our Dutch colleagues will reconsider their attitude!
Q: What do you think about the situation in the Netherlands, where euthanasia is so widespread that even sick children can “decide” whether they want to get the “mercy-killing” treatment, and more and more old and sick people refuse to go to an old age home because they fear being murdered against their will.

Wynen: What is happening now in the Netherlands was foreseeable for several years. If we accept “opening the door” to active euthanasia, we cannot prevent its general implementation, leading to situations like the one you mention, just like during the time of the Nazis. The first step is the request of the patient, the second one is the request of the family, and the last one is the request of the society—that means the State!

Q: We know that the Netherlands is not a member of the WMA. Despite this fact, what do you think can and must be done to intervene in the Netherlands?

Wynen: We have no other means to influence our Dutch colleagues than a strong moral commitment by the whole world medical community. We hope that a permanent and heavy criticism of their attitude will force them to reconsider it.

Q: What do you think about the situation in West Germany, where the euthanasia lobby is using doctors like Hackethal to implement euthanasia?

Wynen: In Germany we have to meet the same situation and to face the same danger. But there is a big difference between the situation in the Netherlands [and that in Germany] because neither the German government, nor the German medical profession as such is in favor of euthanasia, as in the Netherlands. In Germany, euthanasia is supported by a minority of politicians, a minority of the population, and fortunately, a very small minority of [medical] colleagues. In spite of his “support” by the media, Hackethal does not have the support of society and, of course, even less of the medical association.

Q: Assistance to suicide is not forbidden by West German law—a fact which is used in an impudent way by Hackethal. What do you think? Should assistance to suicide be forbidden

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French protest plans to kill handicapped children

The proposal by a French pro-euthanasia group to give the parents of handicapped children the right to kill them at birth has drawn outraged accusations in France, with numerous organizations and individuals drawing parallels with the practices of the Nazis. The culprit group is the Association pour la prevention de l’enfance handicappee (APEH), (“Association for the Prevention of Handicapped Childhood”). Its honorary president, “independent left” ex-Senator Henri Caillavet, is also president of the French Association for the Right to Die with Dignity, whose activities have recently drawn protests from French citizens and medical professionals.

Paris Archbishop Jean-Marie Lustiger has attacked the APEH proposal as a “case of legal barbarism . . . unworthy of our country and our civilization.” French psychiatrist Jean-François Corbin, author of the book Soft Extermination, says the proposal raises the specter of Nazism, and is “reminiscent of Hitler or the manuals for eugenics distributed in France during the period of Vichy . . . . Formerly, in Germany, the mentally ill were sterilized.” Numerous associations directly concerned with the handicapped in France—including the National Union of Parents of Handicapped Children, the Association of Paralytics in France, and the Association SOS-Future Mothers—have declared that the APEH text evokes “the plea for the destruction of useless lives” made by the Nazis. French Secretary of State for Human Rights Claude Malhuret expressed his “indignation” Nov. 5 over the Caillavet-APEH proposal, saying he was very concerned about “the recent multiplication of proposals with the aim of legalizing euthanasia and eugenics, and which assert a claim to the right to die.”

The APEH text was distributed recently to several French parliamentarians. It says, in part, that there should be legislation that would “permit parents, in certain circumstances, to not sustain life in (de ne pas entretenir en vie) young children who are abnormal.” It goes on to say that the legislation would uphold that “a doctor will not be committing either a crime or a misdemeanor in abstaining from administering to a child of less than three years of age, the care necessary to his life, when this child shows an incurable infirmity, such that it can be foreseen that the child will never have a life worthy of being lived.”

APEH head Henri Caillavet told French TV, “If I had had a handicapped child, I would not have let it live . . . . I gave life, I have the right to take it away . . . . You have the right to be shocked, and so am I when I hear some of the Pope’s comments . . . . We have got to take away the guilt so that such parents do not feel like criminals for demanding euthanasia for their abnormal children.” APEH’s self-described aim is stop the number of mentally defective children from increasing, one of the declared aims of the “eugenics” movement that supported Hitler.
by law?

Wynen: Suicide is pathological. It results from the disappearance of the self-preservation instinct. Suicide is relevant to psychiatry and the duty of the physician in that case is to protect the patient against himself. In many countries, the liability of the physician is engaged when he is informed about the patient's intention to commit suicide and when he neglects to take appropriate steps to prevent it. In conclusion, even in the absence of a law against suicide, medical ethics forces the physician to protect the patient against himself.

Q: What do you think about legal rulings in the U.S. where patients are "allowed"—and often forced by relatives, etc.—to refuse further treatment, food, or water?

Wynen: One of the fundamental basic rights of the patient is to refuse the treatment proposed by the physicians. It is not the right of the relatives, the family, or of the society to take the decision on behalf of the patient if the latter is capable of deciding for himself. When the patient is a small child or mentally handicapped, the duty of the physician is to protect the interests of the patient mainly and especially if they are in competition with those of the family or of the community.

Q: In an article in the Jerusalem Post, Mr. Ram Ishai from the Israel Medical Association was quoted saying: "In present-day conditions, euthanasia could be performed to avoid economic burdens on society." What do you think about this aspect?

Wynen: Mr. Ram Ishai, an excellent friend of mine and now a Council Member of the WMA, emphasized what I have been defending for more than 15 years: Cost containment policies lead all around the world toward rationing of medical care and rationing is leaning in many cases to euthanasia. The best example is the legal limitation of hemodialysis equipment with the consequence for the physician of having to select the patients who will benefit from the treatment and those who will be denied the treatment and condemned to die!

At the present time, a large majority of specialists and health economists agree that 80% of medical expenditures take place during the last six months of an individual's life. The temptation is great to cut the portion of medical expenses corresponding to that last half year of life!

Q: Over recent days, the first cases of euthanasia for people sick with AIDS have been made known in the Netherlands. Do you think that there is a danger that euthanasia could become the "answer" to AIDS?

Wynen: I do not think that the danger of solving the AIDS problem with euthanasia is high. Those among the population, even in the medical profession, who are in favor of euthanasia, represent a small minority. If the medical profession, like the last Madrid World Medical Assembly, remains the best support of its code of medical ethics, the patient will be as well defended in the future as he was in the past.

Q: We learned that the WMA also discussed the question of AIDS at its meeting in Spain. Could you please tell us something about the topics and the final resolution on this matter?

Wynen: At the Madrid Assembly, guidelines were defined for physicians who treat AIDS patients. The main item discussed was the report of cases of AIDS to a designated authority for epidemiological purposes, and to prevent the infection of other people. It has to be done anonymously or by an identifier in special circumstances; the physician may take appropriate measures including reporting the name of the patient if, in conscience, he considers him a potential danger to his relatives or the community because the patient is not able, for mental reasons, for instance, to follow the necessary rules of prevention, or if he deliberately refuses to respect them. In that case, the responsibility of the physician can be compared to the responsibility he has to fulfill in psychiatry.

If the patient represents a danger to other people, it is the physician's duty to request the cooperation of the public authority to prevent his patient from being harmful. I consider that there is no difference between AIDS patients who refuse [to take] measures to prevent the spread of the disease, and a paranoid patient walking freely in the streets with a revolver in his pocket!