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PERSPECTIVE

A Study of Ethical Dilemmas: A Philosophical Perspective on Euthanasia in the Treatment of Terminal Illness

Zainal Munir^{1,3*}, Moses Glorino Rumambo Pandin² and Sri Astutik Andayani³

¹Doctoral Program of Nursing, Faculty of Nursing, Universitas Airlangga, Jl. Dr. Ir. H. Soekarno, Mulyorejo, Kec. Mulyorejo, Surabaya, East Java 60115, Indonesia

²Doctoral Program of Human Resource Development Postgraduate School, Universitas Airlangga, Jl. Dr. Ir. H. Soekarno, Mulyorejo, Kec. Mulyorejo, Surabaya, East Java 60115, Indonesia

³Faculty of Health, Universitas Nurul Jadid, Jl. KH. Zaini Mun'in, Karanganyar, Kec. Paiton, Probolinggo, East Java 67291, Indonesia

Abstract

Euthanasia, as a medical procedure for terminal illnesses, is a controversial topic in ethics, especially philosophy. This procedure involves the decision to end a patient's life to reduce suffering, but it raises moral dilemmas about the right to life, individual autonomy, and medical obligations. The main philosophical perspectives discussed are deontology and utilitarianism. This systematic review was conducted in accordance with PRISMA guidelines. The search was conducted in the Scopus, PubMed, Web of Science (WoS), ProQuest, Sage Journal, and Science Direct databases from 2020 to 2025. The articles included were English-language, full-text articles, and not review articles. Of the total 1,202 records screened, six studies were included in this systematic review. The results show that the philosophical perspective on euthanasia in the treatment of terminal illness presents an ethical dilemma for healthcare professionals. Conclusion: The study of the ethical dilemma of euthanasia, from a philosophical perspective, is very important in understanding medical decisions related to the suffering of clients with terminal illness. This study also found a gap between the acceptance of euthanasia in Western countries and countries with more conservative cultures, by exploring moral influences such as deontology and utilitarianism. The purpose of this study is to provide a holistic understanding and recommendations for medical service policymakers who are more sensitive to the values and culture of society. In the study of euthanasia ethics, a philosophical perspective is important for understanding medical decisions related to the suffering of terminal patients. This study fills the gap between the acceptance of euthanasia in Western countries and countries with conservative cultures by exploring the influence of moralities such as deontology and utilitarianism. The goal is to provide a holistic understanding and recommendations for medical policies that are sensitive to the cultural and moral values of society.

Introduction

Euthanasia remains a controversial topic in the world of healthcare, particularly in the fields of medicine and nursing. The act of ending a person's life is seen as the final solution for terminal illnesses [1,2]. Healthcare professionals also face ethical dilemmas when performing medical procedures [3]. This action requires the involvement of all

*Corresponding author(s)

Munir Z, Doctoral Program of Nursing, Faculty of Nursing, Universitas Airlangga, Jl. Dr. Ir. H. Soekarno, Mulyorejo, Kec. Mulyorejo, Surabaya, East Java 60115, Indonesia

Email: zainalmunirnj@gmail.com

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disciplines and the consent of the family in ending the life of a client with a terminal illness [4]. This action is considered beneficial to families who want to end the suffering caused by illness and also benefits families in terms of treatment costs [5]. However, ethical issues arise in relation to euthanasia, which often affects health workers in ending life because it takes away a person's right to life and individual autonomy, and the moral obligations of health workers' professionalism will always be challenged [6]. In philosophy, there are always two main perspectives that we often discuss, including the concept of deontology, which always emphasizes the moral obligations of health workers, and the concept of utilitarianism, where health workers focus more on the results and welfare of individuals or clients under their care [7].

Practical in the field with the application of euthanasia in the context of culture and religion with different perspectives on euthanasia [8]. It depends on the perspective of euthanasia in the world of health. Several previous studies have highlighted the acceptance of euthanasia in Western countries, viewing terminal illness as causing broader problems for the family [9]. However, the perspective on euthanasia is different in countries with more conservative cultures and religions, such as Asia, where there is still very little discussion of euthanasia [10]. Previous studies have also found many inconsistencies between social norms and medical decisions made in various countries. However, there are still many studies that integrate various moral perspectives into a single comprehensive study [11].

This study will find that the results of the research lie in combining the perspective of moral philosophy in euthanasia with a deeper understanding of euthanasia, with an emphasis on social and cultural differences in different countries [12]. This research is based on the exploration and analysis of ethical dilemmas faced by health (medical) practitioners in making decisions regarding euthanasia [2]. It also examines how the moral values of each individual and society influence decisions on euthanasia [13,14]. Because euthanasia is covered in this study, a philosophical approach can provide a deeper insight into the dilemmas that arise in medical practice with euthanasia, and suggest more humane and morally-based changes to medical policy, taking into account the individual and social rights that need to be considered in every medical action to be taken [15,16].

Methods

Study design

The process of literature screening, including, and reporting was based on the guidelines of PRISMA. The search was conducted in Scopus, PubMed, Web of Science (WoS), ProQuest, Sage Journal and Science Direct from 2020 to 2025.

Inclusion and exclusion criteria

A Study of Ethical Dilemmas: A Philosophical Perspective on Euthanasia in the Treatment of Terminal Illness was systematically observed. The inclusion criteria were as follows: Research studies, studies conducted on groups of health workers in both medicine and nursing, and full texts of studies published in English. The exclusion criteria were as follows: studies conducted by health workers, both in terms of the perspective of health workers in performing euthanasia.

Search strategy

Literature searches were conducted using the Scopus, PubMed, Web of Science (WoS), ProQuest, Sage Journal, and Science databases from 2020 to 2025 in English. The keywords used in the search were (Ethical Dilemmas) AND Philosophical Perspective) AND (Philosophical Perspective) AND (Terminal Illness).

The procedures for identifying, screening, and including studies available in the Scopus, PubMed, Web of Science (WoS), Science Direct, and EBSCO databases are presented in figure 1. The entire process was carried out by two independent researchers, initially based on the title and abstract, followed by a procedure based on the full text of the study. In the event of disagreement between the researchers, a third researcher was consulted to resolve the issue. The full text of the studies was obtained from electronic databases or university libraries.

Data extraction procedure

Data extraction was performed by two independent researchers. If there was disagreement between the researchers, a third researcher was consulted to resolve the issue. All necessary information was obtained from the full text of the studies.

Result

The results of the research articles on the A Philosophical Perspective on Euthanasia in the Treatment of Terminal Illness are presented in table 1.

Discussion

The ethical dilemma associated with euthanasia from a philosophical perspective provides a more holistic understanding of medical decisions in the treatment of terminal illnesses [18,21]. This provides an overview of the ethical dilemma in euthanasia, which is greatly influenced by moral perspectives such as deontology and utilitarianism, in line with the

research objective of revealing the moral challenges in medical practices related to euthanasia [19,26].

The findings of this study are in line with existing theories, including previous research on moral and cultural development and religion regarding moral competence [17,25]. Several references from journals and books discussing the acceptance of euthanasia in Western countries also support the finding that

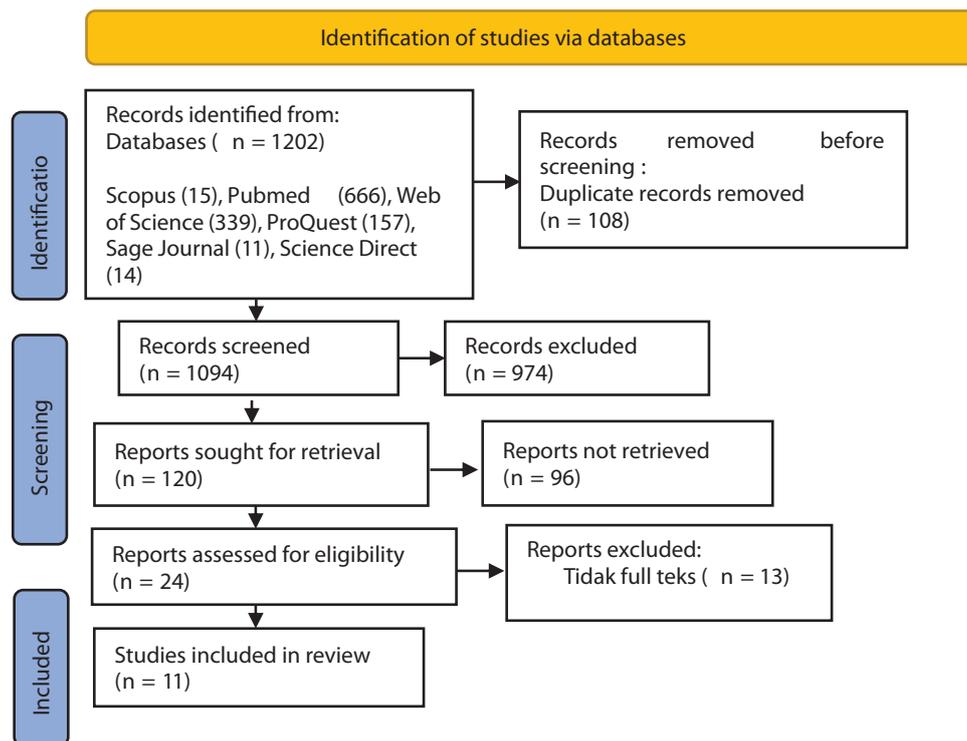


Figure 1 The identification, screening, and inclusion procedures of the studies were available in Scopus, PubMed, Web of Science (WoS), Science Direct, and EBSCO databases.

Table 1: The research articles on a philosophical perspective on euthanasia in the treatment of terminal illness.

No	Title, Author, Years	Method	Result
1	Attitude towards Euthanasia among Medical Students: A Cross-Sectional Study in Hong Kong [17]	This study design used a cross-sectional survey method with an anonymous online questionnaire to measure medical students' attitudes toward euthanasia in Hong Kong. The study sample consisted of 228 students from two universities, with instruments using the Attitude Toward Euthanasia Scale (ATE), which contained 10 questions using a five-point Likert scale. The variables analyzed included knowledge, gender, religion, and clinical experience. Multivariate analysis showed that male gender, religion (atheist), and experience of witnessing withdrawal of nutritional support were positively associated with attitudes toward euthanasia.	The results of this study show that of the 228 students who participated, the average Attitude Toward Euthanasia (ATE) score was 28.9 with a standard deviation of 10.9. A total of 58.8% of respondents showed a negative attitude toward euthanasia, with an ATE score below 30. Meanwhile, 41.2% of respondents showed a positive attitude towards euthanasia (ATE score of 30 or above). Factors associated with a positive attitude included being male, being an atheist, and having witnessed the withdrawal of nutritional support from a patient. Analysis showed that religion and clinical experience influenced students' attitudes towards euthanasia.

Table 1: The research articles on a philosophical perspective on euthanasia in the treatment of terminal illness.

No	Title, Author, Years	Method	Result
2	Attitudes of nursing students towards the legalization of euthanasia, end-of-life planning and the spiritual dimension: A quantitative study [18]	This study used a descriptive quantitative design with a cross-sectional approach to analyze nursing students' attitudes toward the legalization of euthanasia and its relationship with end-of-life planning and spiritual dimensions. The sample consisted of 285 students from the University of Huelva and the University of Almería in Spain, selected using convenience sampling. The instruments used included the Attitude Toward Euthanasia (ATE) Questionnaire, the End-of-Life Planning Questionnaire, and the Death Anxiety Scale. Logistic regression analysis identified that age, spiritual practice, and spiritual support were associated with positive attitudes toward euthanasia.	The results of this study indicate that the majority of nursing students have a positive attitude toward the legalization of euthanasia, with an average score on the Euthanasia Attitude Scale of 84.58 (SD = 11.07). However, only 2.5% of students have made end-of-life plans, even though 70.5% recognize the importance of such planning. Students who understand end-of-life planning tend to have lower death anxiety. Spiritual factors also play an important role, with those who practice their religious beliefs more frequently showing a more negative attitude towards euthanasia, while those who consider spiritual support important tend to have a positive attitude towards euthanasia.
3	Attitudes Toward Euthanasia: A Longitudinal Analysis of the Role of Economic, Cultural, and Health-Related Factors [19]	This study uses a longitudinal design with data from the World Values Survey (WVS) to analyze attitudes toward euthanasia in 62 countries from 1981 to 2018. The sample consists of 389,243 respondents representing the adult population in various countries. The variables analyzed include economic factors (GDP per capita), religiosity, and health indicators (life expectancy, infant mortality). The instrument used was a survey of attitudes toward euthanasia on a scale of 1 to 10, from "never justifiable" to "always justifiable." The analysis showed that attitudes toward euthanasia were more positive in countries with high incomes and low religiosity.	The results of this study show that in countries with higher GDP per capita, attitudes toward euthanasia are more positive, while in countries with high levels of religiosity, attitudes are more negative. Most high-income countries show an increase in acceptance of euthanasia over time, while low-income countries show a decrease in acceptance. Health indicators, such as higher life expectancy and lower infant mortality rates, are also positively associated with acceptance of euthanasia.
4	Conscientious objection to medical assistance in dying in rural/remote nursing [20,	This study design uses a qualitative approach with case studies to analyze ethical conflicts related to conscientious objection among nurses in rural and remote areas when faced with Medical Assistance in Dying (MAiD). The sample consists of nurses working in long-term care facilities in Canada, with a focus on nurses who have conscientious objections to MAiD. The instruments used included in-depth interviews and ethical decision-making framework analysis. Thematic analysis was conducted to identify the challenges and consequences of conscientious objection to MAiD.	The results of this study indicate that nurses working in remote areas often face ethical dilemmas between their professional obligations and their personal beliefs. Although they can refuse to participate in MAiD procedures, limited geographical conditions often make it difficult for them to transfer care or obtain other professional support. This increases the risk of moral distress and can affect the emotional well-being and retention of nurses in these areas.
5	Discussing end-of-life care for persons experiencing severe and persistent mental illness: a qualitative study among stakeholders in Flanders [21]	This study design uses a qualitative approach with semi-structured interviews to explore stakeholders' views on end-of-life care for people with Severe and Persistent Mental Illness (SPMI) in Flanders, Belgium. The sample consisted of 73 participants, including service users, families, caregivers, managers, and experts. The research instrument was an interview guide covering the themes of advance care planning, suicide risk, euthanasia, and palliative care approaches. Data were analyzed using thematic analysis.	The results of this study show that many participants reported difficulties in planning further care, with little discussion of euthanasia and the risk of suicide. Although requests for euthanasia are rare, ethical issues arise, especially in the context of psychiatric suffering. Participants also expressed challenges in providing palliative care in familiar settings with a lack of somatic medical expertise.

Table 1: The research articles on a philosophical perspective on euthanasia in the treatment of terminal illness.

No	Title, Author, Years	Method	Result
6	Essentials of palliative care [22]	This research design uses a multidisciplinary approach to provide palliative care that covers physical, psychological, social, and spiritual aspects in the care of patients with life-threatening illnesses. The research sample consists of medical teams involved in palliative care, including doctors, nurses, social workers, and social workers. The instruments used include comprehensive patient evaluation guidelines and care plans developed based on team assessments. The analysis focuses on collaboration between members of the multidisciplinary team and coordinated care planning.	The results of this study indicate that multidisciplinary teams are highly effective in managing symptoms and improving patients' quality of life. Good collaboration among team members, intensive communication with patients and their families, and an approach based on patients' physical, emotional, and spiritual needs contribute to the success of care.
7	Ethical principles and dilemmas in the discourse of health care practitioners involved with end-of-life care based on the Advanced Directives Document [23]	This research design uses a qualitative approach with hermeneutic analysis methods to explore the ethical principles and moral dilemmas faced by medical personnel in end-of-life care based on the Voluntas Anticipada (VDA) document. The sample consisted of 253 medical practitioners in Colombia, who answered exploratory questions regarding their willingness to respect the VDA of unconscious patients. The instrument used was an open-ended interview categorized based on bioethical principles. Data were analyzed using ATLAS.ti v 9 software for thematic identification.	The results of this study show that the majority of medical practitioners acknowledge that respecting VDA is an ethical obligation, with more than 50% following the principle of liberal individualism and supporting patient autonomy. However, moral dilemmas arise between the principles of beneficence and patient autonomy, especially in reversible clinical situations. The patient's quality of life, requests for euthanasia, and the clarity of instructions in the VDA are moral dilemmas that medical practitioners often face.
8	Ethical dilemmas and legal ambiguity in China: a chain mediation model linking suicide rumination, legitimization, and acceptance among acutely-ill adults [24]	The method used in this study was a survey of 356 Chinese adults, aged 23-64, and conducted through popular social media platforms to reflect diverse perspectives. This study used a mediation model with suicidal rumination as the independent variable, cognitive depression, ethical acceptance of suicide, and legitimacy of suicide as mediators, and acceptance of suicide as the dependent variable. Data analysis showed that suicidal rumination significantly predicted acceptance of suicide, with cognitive depression influencing both ethical acceptance of suicide and legitimacy of suicide. However, ethical acceptance of suicide did not significantly mediate suicidal rumination.	The results of this study indicate that suicidal rumination has a significant direct effect on suicidal acceptance, supported by cognitive depression and legitimization processes. The indirect effect through cognitive depression and ethical acceptance of suicide proved to be significant, highlighting the complex relationship between suicidal ideation and psychological stress in critically ill patients. These findings emphasize the importance of comprehensive mental health support and ethical guidance in end-of-life care.
9	Euthanasia and assisted suicide: An in-depth review of relevant historical aspects [25]	This research design uses an in-depth literature review approach to examine the historical aspects of euthanasia and assisted suicide and their impact on medical practice and public policy. The research sample includes a review of euthanasia regulations and practices in various countries, including the Netherlands, Canada, and Spain. The variables analyzed include legal regulations, medical perceptions, and bioethical practices. The instruments used are literature reviews and historical document analysis. The analysis was conducted by discussing the evolution of ethics and laws related to euthanasia as well as perspectives from various cultures and religions.	The results of this study show that although euthanasia and assisted suicide have been accepted in some countries, there is still significant controversy regarding ethics and the law. Countries such as the Netherlands and Canada have regulations that support euthanasia, while other countries still consider it illegal or unethical. This study highlights that medical views on euthanasia are evolving, but many medical professionals are still bound by traditional ethical principles that oppose the practice.

Table 1: The research articles on a philosophical perspective on euthanasia in the treatment of terminal illness.

No	Title, Author, Years	Method	Result
10	Exploring attitudes toward euthanasia in Iranian healthcare providers: a systematic review of influencing factors [26]	This research design uses a systematic review to analyze the attitudes of medical personnel in Iran towards euthanasia, focusing on the influence of demographic, professional, and psychosocial factors. The sample consisted of 7,790 participants, including medical personnel such as doctors, nurses, medical students, and nursing students working in clinical or academic settings in Iran. The instruments used were the Euthanasia Attitude Scale (EAS) and a questionnaire developed by the researchers. The analysis was conducted using narrative and synthesis of results to identify factors that influence attitudes toward euthanasia.	The results of the study show that attitudes toward euthanasia are more negative among older medical personnel, women, and those with strong religious beliefs. Conversely, more positive attitudes were found among younger medical personnel, men, and those with clinical experience or exposure to terminal patients. Cultural factors and Islamic teachings that respect human life are the main barriers to the acceptance of euthanasia. These findings emphasize the need for better ethics training and palliative care in the Iranian healthcare system.
11	The Teaching of Ethics and the Moral Competence of Medical and Nursing Students [27]	This study design uses a descriptive longitudinal approach to evaluate the effect of ethics teaching on the moral competence of medical and nursing students. The sample consisted of 918 students who took ethics curriculum units at three nursing schools and three medical schools in Portugal. The instrument used was the expanded version of the Moral Competency Test (MCTxt), which tested participants' responses to three ethical dilemmas (worker, doctor, and judge). The analysis was performed using paired t-tests and multivariate linear regression to evaluate the difference in scores between the two application times.	The results of the study show a significant decrease in moral competence scores for nursing students (from 21 to 19.5) after taking the ethics unit, while the decrease in medical students was not significant (from 23.2 to 22). Approximately 39% of students experienced a decrease of more than 5 points, indicating moral regression, while 32% of nursing students and 35% of medical students experienced an increase of more than 5 points. This decline indicates the need to develop more effective ethics teaching methods to improve students' moral reflection.

cultural and religious influences affect attitudes toward euthanasia, thereby enriching the ethical discussion on this topic [24]. This study offers novelty by highlighting the gap between the acceptance of euthanasia in Western countries and countries with conservative cultures, as well as combining moral theory and cultural perspectives in assessing the acceptance of euthanasia [21].

Some results may not be as expected, especially in terms of differences in responses to euthanasia between countries with different cultural contexts [18,20]. This shows that social and cultural factors are often barriers to the acceptance of euthanasia, despite developments in medical ethics education [3,4].

The practical benefit of this research for healthcare professionals is the need for further training for medical personnel in making ethical decisions related to euthanasia, in order to improve the quality of medical services and ensure that decisions are made with consideration of appropriate moral values [5,6]. Theoretically, this research enriches the medical ethics literature and opens the door for further study on the application of moral values in medical decisions [7]. The limitations of this study lie in its

geographical scope and sample, which is limited to several countries [8]. Further research could expand the sample to include countries with greater cultural diversity and delve deeper into the acceptance of euthanasia in various parts of the world, as well as examine the influence of social, religious, and cultural factors in these medical decisions [10-12].

Conclusion

The ethical dilemma surrounding euthanasia in the treatment of terminal illnesses is greatly influenced by philosophical perspectives, such as deontology and utilitarianism. Social, cultural, and religious factors influence the acceptance of euthanasia in different countries, creating differences in opinion. This study contributes to the medical ethics literature and highlights the importance of more in-depth ethics education for medical personnel to make more humane decisions that are sensitive to cultural and moral values in medical practice.

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