

DOCTRINE OF DOUBLE EFFECT

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Surgeons could find themselves involved in the palliative care of patients whose pain is increasingly difficult to control. There may come a point in the management of such pain when effective palliation is possible only at the risk of shortening a patient's life because of the respiratory effects of the palliative drugs. In such circumstances, surgeons can, with legal justification, administer a dose that might be dangerous (although experts in palliative care are sceptical that this is ever necessary with appropriate training). In any case, the argument - both the relief of pain and death might follow from such an action. Intentional killing (active euthanasia) is rejected as criminal malpractice throughout most of the world. A foreseeably lethal analgesic dose is thus regarded as lawful only when it is solely motivated by palliative intent, and this motivation has been documented. Recent authority from criminal law indicates that, if an analgesic injection is 'virtually certain' also to kill the patient, a court might deduce that the person giving the injection had an intention to kill. The key to the defence of double effect is the absolute absence of such an intention. It follows that if you are virtually certain that a palliative act will end the patient's life, consult widely before embarking upon it. - DOCTRINE OF DOUBLE EFFECT

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