Death by the Market?

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Should physicians have leave to help terminally ill patients end their own lives? Legislatures in the U.S. and abroad have supported both alternatives, and a legal and ethical debate continues along with the practice.

Why all the controversy? People kill themselves all the time without permission. It's generally against the law in this country, an idea that becomes more than usually absurd when you think about how to enforce it.

The debate became hot just about time we began to seriously industrialize health care. The unit of health care had been the individual patient. Until recently, the goal was to end suffering by restoring health, or failing that, by alleviating symptoms and pain. There was plenty of money to be made in the process. Then the unit of health care changed to the capitated annual fee payer and the goal shifted. Now those fee payers--those patients--became a source of profit for corporations just like any other commodity.

For the first time it was possible to imagine that a physician—owing loyalty first to a corporation rather than the healing arts—might consider an alternative to keeping a suffering patient alive if it hurt the bottom line. When ending suffering by ending a patient’s life can be profitable, who can guarantee a pure decision that considers only the welfare of the patient? It became plausible to think of the profitability of human death.
It's still hard for you or me to think of an individual patient as a commodity like a car in the showroom or a loaf of bread on the supermarket shelf. Patients are living people just like us--individuals, not statistics. Human life is a unique gift--beyond the calculation of value. Isn't it?

In the corporate world, you and I don't do the calculations. Only the bottom line sets the terms for the reckoning of costs and benefits. That's what makes us suspicious of physician assisted suicide. That's what fuels the debate.

For a long time we have thought ill of killing people for gain. It's one of the things we call murder. We penalize it so heavily that it's bad for business. On the other hand, if it is not directed at a particular person, that's different--even though people die. Corporations can complain that a health or safety measure interferes with profits and to compute the costs of fixing it. Industrial accidents, automobile deaths, death from environmental pollution--these are not murder, though they kill more people than murder. They're business. Nobody goes to jail.

We can't quite decide where physician assisted suicide falls between murder and business. If it's murder--we decided a long time ago that's wrong. But what if it's business?

Do we want to admit that our own lives have become commodities for corporations to use or dispose of for profit like bars of soap and loaves of bread? That's the rub. When we decide, we will know whether we are ready to die by the market as we live by the market.