

Euthanasing treatable patients

THIS series gives readers the opportunity to consider and contribute to discussion of some of the ethical dilemmas that can arise in veterinary practice. Each month, a case scenario is presented, followed by discussion of some of the issues involved.

In addition, a possible way forward is suggested; however, there is rarely a cut-and-dried answer in such cases, and readers may wish to suggest an alternative approach. This month's dilemma, 'Euthanasing treatable patients', was submitted and is discussed by Simon Coghlan. Readers with comments to contribute are invited to send them as soon as possible, so that they can be considered for publication in the next issue.

The series is being coordinated by Steven McCulloch, a practising vet with a PhD in the ethics of veterinary policy. It aims to provide a framework that will help practitioners find solutions when facing similar dilemmas.

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A recently employed veterinarian at a veterinary clinic is preparing for a euthanasia procedure in the treatment room. 'Not something I enjoy doing', he says to his employer working nearby. 'So true', she replies. Afterwards, the employer takes him aside. 'Just so you know, our clinic has a policy of only euthanasing patients who are terminally ill and suffering. Our staff politely decline requests for killing healthy or treatable patients, and we explain sympathetically to the client the clinic's moral position on euthanasia'. Later, the vet wonders whether the policy, though sincerely held, is fair. Doesn't the veterinary clinic's policy infringe his moral choices? Should he challenge it?

Issues to consider

This scenario raises ethical questions about conscientious objection. Conscientious objection, as a moral right, is recognised in other medical professions. Doctors cannot be compelled to perform abortions. Similarly, the veterinary profession is coming to recognise the moral importance of a vet's right to refuse to kill healthy or treatable patients. Regulatory and professional bodies often expect such vets to refer clients to clinics without moral objections. Nevertheless, this particular right of conscientious refusal is increasingly recognised.

But this scenario presents a twist. Here, the conscientious objector is the practice owner, and the clinic's policy affects the vet who would perform euthanasia rather than the vet who refuses to. Presumably, the employer has a general right to set practice

policy. It is her clinic, and she has much invested in it. Yet this alone is not decisive, for as we have observed, an employer ought to recognise an employee's right to conscientious objection in the case of convenience euthanasia.



Treatable, not terminal: what is the possible way forward if vets disagree about euthanasing treatable animals

Some might say the employee who opposes the veterinary clinic's euthanasia policy can elect to move to another practice without that policy. But we should remember that this response is insufficient to override a vet's right of conscientious objection to performing some acts of euthanasia. Still, might that response work in the case of the employee who objects to being told to refrain from killing patients who are healthy/treatable? We should examine these conscientious positions more closely.

Why might a vet (or nurse) object to the practice policy of not killing healthy or treatable patients? Would 'I just don't like being told what to do' be sufficient justification? Could they rely on asserting professional liberty and discretion? The vet in this scenario may advance further reasons that strengthen his position. He may, for instance, voice concerns that the client could, after the refused euthanasia request, allow their animal to suffer, or even attempt to kill the animal themselves.

However, as we noted, the client can be referred to another clinic. Consequently, it appears somewhat more difficult to demonstrate here the existence of a serious conscientious moral objection to the policy. Contrast this with the vet who sometimes refuses

to euthanase. This vet believes that killing healthy or treatable patients is morally very serious, even though those animals might be killed elsewhere (although, of course, that may not happen). One measure of the seriousness of that belief is that, should they be forced to kill, they may be haunted by what they have done, and may experience great difficulty reconciling such behaviour with their veterinary role. And something like this impact, perhaps, would also apply to the employer who wishes her practice to be one that takes a stand against killing healthy/treatable animals. She has a great personal investment in running a clinic that respects that ethical principle.

In contrast, it seems less likely that someone prepared to kill

healthy/treatable animals would be morally haunted or discomposed by working under the euthanasia policy in the vet clinic outlined here. A utilitarian may well support the policy in this case. Utilitarianism, with its focus on consequences, aims to maximise overall happiness and/or preference satisfaction. Such consequences are clearly influenced by the ways in which deeply held conscientious beliefs are treated. Arguably, the practice owner who strongly believes that killing healthy/treatable patients is wrong stands to suffer greater harm (or is more likely to suffer it) than the employee who believes it is not wrong but is directed by practice policy to refrain. Utilitarianism takes both magnitude and probability of consequences into account. So, a strong regard for

these consequences would, on first impression at least, support the euthanasia position stated. Similar reasoning would presumably apply to the cosmetic procedures of tail docking and ear cropping.

Possible way forward

The employee is entitled to discuss his moral concerns with the clinic owner/manager. Discussion may foster mutual understanding, and even improve the policy and the details of its implementation, such as what is communicated to clients. Finally, informing the employee about the policy before he began work at the practice would have shown greater respect for the potential employee's moral autonomy.

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