

DR. JACK KEVORKIAN'S INFLUENCE ON TREATING INCURABLE NEUROLOGICAL DISEASES IS POSITIVE

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Jack Kevorkian (1928-2011), an American pathologist, son of an Armenian genocide survivor, was an ideologue and fervent supporter of euthanasia for terminally ill people. Between 1991 and 1998 he assisted or performed 130 "mercy killings", always at the unambiguous subject will. Almost half of his "patients" had incurable neurological diseases including Alzheimer's, Parkinson's, Huntington's, Multiple Sclerosis and ALS; his first physician-assisted suicide (P-AS) was done by an Alzheimer patient; the most famous one was the videotaped and broadcasted euthanasia of Thomas Youk, a 52 years old patient with advanced ALS, terrorized by the perspective of choking on his own secretions. Attitudes towards Kevorkian were highly polarized concerning both the "what" (the nature of his endeavors) and the "how" (their context or "methods"); they ranged from regarding him as a great humanistic figure to a sadistic, cold blooded, criminal. In many cases he was praised or hated according to the individual's own attitudes about the acceptability of suicide as a basic human right and the recognition that situations "worse than death" do exist.

Kevorkian's crusade for "mercy killings", the role of medical professionals in these activities and especially his conviction for "second-degree murder" in Michigan in 1999, have ignited the public debate; taboos and hypocrisy walls have been broken and many ideas and practices evolved in parallel with his activities. These include: 1- Progress in the treatment of chronic pain that became more effective and use of narcotics and other pain-killers became more liberal. 2- Thinking on the way of dying of incurable patients was encouraged and, in 1995, the "Project on Death in America" was begun, directed by the highly respected oncologist and pain specialist Kathleen Foley. Its goal was changing the culture of death in America to improve end-of life care. 3- The concept of "dual effect" was widely revisited and accepted by medical associations including the American Academy of Neurology. It directs that an intervention intended to provide relief from suffering at the end of life is acceptable even at the risk of causing foreseen but unintended side effects, including death. 4- Hospice and other forms of palliative care gained ground and are seen as a legitimate medical discipline. 5- Legislation on P-AS became more liberal in many parts of the world. In USA three states (Oregon, Montana and Washington) legitimated it recently under different circumstances.