

La fin de vie : perspectives internationales

Introduction to Special End-of-Life Issue: 'Reflecting on the need for an interdisciplinary, collaborative approach to bettering end-of-life care and research'

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Advances in medical technology as well as changing individual and societal perceptions of death and dying mean that death, as an event, and dying, as a process, have fundamentally changed. In addition, we know that the process of dying and death, at least in a healthcare context, is different based on where it happens, to whom it happens, and why it happens. We know that the process remains heavily medicalised, with calls to understand dying and death more relationally, culturally, socially, and philosophically.

There is a great benefit in disciplines working together to promote cross-jurisdictional perspectives and methodologies, and to prioritise interdisciplinary thinking and research on end-of-life issues, for the benefit of society, the individual, healthcare professionals, and healthcare itself.

Our contribution to this special issue on end-of-life for the *Journal de Droit de la Santé et de l'Assurance Maladie* serves a small part in this bigger goal for an interdisciplinary approach to end-of-life discourse and research. It brings together perspectives from 9 jurisdictions, from 17 academics from the disciplines of law, medicine, philosophy, criminology, sociology, to contribute to one very important end-of-life choice: assisted dying and assisted death. A 'good-quality death' depends on our relationships, achievements, values and the meaning we create. A good-quality death is not necessarily one without sadness or loss. Rather, it is a death marked by dignity, minimal suffering, and respect for personal autonomy. Good, quality end-of-life care and death need a deeper theoretical foundation, including consideration on concepts such as life cycles, changing relationships between the living and the dead, new technologies and new ways of dealing with the body and death, and cultural attitudes to death and dying.

The contributions in this issue are based on a workshop that was hosted by the Brocher Foundation in January 2025 in Geneva, Switzerland led by the two of us. Following our Brocher-sponsored workshop, and having discussed the idea as early as the summer of 2022 (when we first met), we decided to establish the *European End-of-Life Research Network* (EuEOLNet), a Network that brings together scholars from across Europe to exchange on end-of-life.

Specifically on the matter of assisted dying and assisted death, an increase in regulation of this end-of-life choice can be noted globally, including in Europe. Regulated access to a form of assisted death in Europe is, at the time of writing, available in Switzerland, the Netherlands, Belgium, Luxembourg, Austria, Portugal, Spain and Slovenia. In practically all jurisdictions, it is a form of medical-assisted dying. Discussion is underway in many jurisdictions, including France, Germany, Italy, England and Wales, Scotland, the Isle of Man and Jersey, the Czech Republic. With this special issue, we aim to share the latest developments on assisted dying regulation in some selected jurisdictions and comment on its key regulatory features and implementation.

Belgium

Kristof Van Assche, Evelien Delbeke, and Steven Lierman in their contribution 'The regulation of Euthanasia in Belgium' write about Belgium's Euthanasia Law, setting out 'the legal conditions governing euthanasia upon request and through an advance directive, the role of the Federal Commission for the Control and Evaluation of Euthanasia, conscientious objection and the duty to refer, and the sanctioning regime'. They also comment on yet unresolved issues, including 'the legal status of physician-assisted suicide, proposals to expand the scope of advance directives, concerns about euthanasia for psychiatric patients, and calls to establish a legal framework for euthanasia for persons who feel their lives are "completed"'. They predict that the Belgian regulatory framework will continue to develop, always with the aim of balancing autonomy and safety in line with human rights.

The Netherlands

Esther Pans in her contribution 'The current Dutch situation on euthanasia and physician-assisted suicide: legal framework, practice and recent developments' offers us an account of the Dutch regulatory framework on euthanasia and physician-assisted suicide, which includes an overview of 'the due-care criteria, the reporting obligation and ex post review by regional committees' and a note of available practice data. The article comments on live issues, including those of 'advance directives and dementia, psychiatric suffering, and minors'. It is an excellent account of those seeking 'an accessible overview' of the Dutch framework.

Spain

Gonzalo Arruego, Ricardo Chueca, Jesús María Fernández, and Carmen Tomás-Valiente in their contribution 'The Spanish regulation of medically assisted death' offer an account of one of the most recent legislative frameworks in Europe: Spain's. It covers 'the social and normative context' of the legislation, the regulation of assisted death, including safeguards, and covers two key Constitutional Court judgments and their importance. It is an insightful analysis of a recently enacted framework that demonstrates how jurisdictions in Europe may choose to introduce such laws now. *Ricardo Chueca* offers a complementary, sole-author article titled 'Performance analysis of Spanish medically assisted death (2021-2024)' on the first years of the Spanish law's implementation, to comment on 'the creation of public management structures, and their integration into the highly decentralised national health system'. The two articles work well together: one explains the foundations and regulatory aspects of the law, while the other notes some difficulties and emphasises that the law has been applied consistently and carefully.

England and Wales

Nataly Papadopoulou, Isra Black, and Liz Wicks in their contribution 'Physician assisted death and the terminally ill adults bill in England and Wales' talk about *The Terminally Ill Adults (End of Life) Bill*, introduced into the UK Parliament in October 2024. The authors offer an overview of the existing criminal laws which prohibit assisted suicide and voluntary euthanasia, and comment on three key aspects of the Bill: 'its terminal illness restriction, its mental capacity provisions, and its procedural regime'. They argue that, if the Bill is introduced, its narrow application would mean the continuation of 'suicide assistance by loved ones and cross-border access to assisted suicide in Switzerland in non-terminal cases', and note that the 'burdensome nature of the Bill's procedural regime may cause even terminally ill individuals to seek alternative means of assistance to die'.

Switzerland

Sandra Hotz writes about Switzerland's system of assisted dying in her contribution 'The Swiss legal system on advance requests for assisted suicide from persons without the capacity of judgment', putting emphasis on one important provision of "assistance to suicide" in the Swiss Criminal Code, which functions particularly well in practice because of the assistance of private organisations, which follow medical standards. However, there is more push to regulate assistance in dying by means of advance directives, which call, as a minimum for a broad interpretation, or even better, for a revision of the law.

France

Ana Zelcevic-Duhamel in her contribution 'End-of-life care in French law – current situation and prospects' presents the situation in France on the matter of end-of-life, including assisted dying and a new Bill that introduces the right to assisted dying under strict conditions. The author notes that the final version of the Bill now depends on Senate.

Germany

Michael Kubiciel and *Florian Breitsameter* write about the interesting example of Germany in their contribution 'Assisted Suicide in Germany – Drawing the Line Between Constitutional Law and Legislative Discretion' in which they explore the constitutional right to a self-determined death in Germany, the legality of organized assisted suicide, and the yet unresolved regulatory questions, especially as regards the assessment of free will, medical standards, and access to lethal narcotics. The authors talk about three main models that may be adopted in legislation, highlighting the spectrum of future regulation and underlining the broad legislative discretion that remains.

Italy

And finally, for Italy, *Christian Crocetta* in his contribution (written in French) titled 'Le silence de la loi est la 'ceinture de protection' des juges. Vulnérabilité, dignité et « biodroit au visage humain » dans les dispositions de la jurisprudence constitutionnelle italienne face au suicide médicalement assisté' analyses key constitutional decisions regarding medically assisted suicide, examining key questions on end-of-life care, and their implications for the Italian legal system. The author is posing the question of whether a framework can be created which will prioritise the 'human'.

Canada (a supplementary contribution to our Special Issue on End-of-Life in Europe)

We also welcome in our special end-of-life issue in the Journal, the contribution of our colleague *Trudo Lemmens* on Canada, titled 'How Canada's Medical Assistance in Dying Law Turned Euthanasia and Assisted Suicide into a Quasi-Universal Therapy for Suffering', previously published in another issue of the Journal but republished here as a supplementary contribution. The article presents the Canadian legislation on Medical Assistance in Dying (or MAiD) discussing the 'over-emphasis both in law and in practice on the right to obtain health care provider ending-of-life through MAiD, rather than the right to protection against premature death'. It is suggested that 'rhetoric has often replaced engagement with evidence-informed clinical, policy, and ethics arguments'. The article highlights lessons for other jurisdictions using the Canadian model as example.

In concluding this brief introduction to this special issue, we note that one of our key objectives as end-of-life scholars working collaboratively is the betterment of end-of-life care, and a contribution to the legal, ethical, political, professional debate on regulation, its implementation, and its perception by patients, loved ones, healthcare professionals, and society. At the heart of all this is the need for an open dialogue, one that must continue between patients and regulators, patients and professionals, but also in everyday settings, community centres, schools and universities, Death Cafes, online forums... Opening up about death and dying brings us closer to understanding, dealing, and improving experiences and care, and exploring further the concept of 'good death', that shapes everything that we do.

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