Another Way

Tom Emmerson*

*Iowa State College

Copyright ©1958 by the authors. Sketch is produced by The Berkeley Electronic Press (bepress). http://lib.dr.iastate.edu/sketch
Another Way

Tom Emmerson

Abstract

Suppose your mother were a victim of cancer with every nerve responding hourly to the pressure of pain that saps her strength and gives her relentless torment...
Another Way

Suppose your mother were a victim of cancer with every nerve responding hourly to the pressure of pain that saps her strength and gives her relentless torment. Cancer is eating her up; she's been in agony for three months. At first narcotic hypos had relieved the pain. But they were only transient, and she became semi-immune to their effects. A dose that first gave four hours relief soon gave three, then two, and now almost none.

If you were the doctor, what would you do? Could you let her go on suffering this pain? She's going to die and she knows it. Yet the doctor refuses, not because he wants to, but because it's against the law.

Suppose the law were changed? Suppose it read that any sane person over twenty-one, suffering from severe physical pain caused by an incurable disease could ask for and receive "merciful release?" Then the doctor would file an affidavit with the Iowa Medical Association. The Association would assign their commission of three doctors and one lawyer to study the situation. If they find the patient hopelessly ill, as described, the patient is approached ten days later and asked if he has changed his mind. If he still requests release, a physician would be allowed to administer an overdose of morphine; an overdose which causes the pain to recede immediately. In a few minutes the patient feels drowsy, and seconds later he drops peacefully into unconsciousness. Torment is ended forever.

How could a law like this — strictly voluntary — be unjustly used? There's no way a greedy relative could hasten the death of the patient. The written application by the sufferer and the medical investigation would put serious obstacles in the way of malpractice. "But what if the patient changes his mind?" you might ask. If he should decide after
ten days time that he does not want merciful release, he simply says so before the commission and the original request is dropped.

Consider another example. Mrs. Chance is fifty-two. The light bump on her breast was diagnosed as a tumor. When the breast was removed the growth was found to be malignant. It was next detected in her uterus. Surgery was impossible, so radium needles were used, but they only prolonged the inevitable. The slight pain grew until she was forced to the hospital. While the cancer gnawed at her stomach and spread to the spleen, the pain grew more intense. She was given hypos one after another, but the pain mounted. She couldn’t keep any food down. As soon as it mixed with the digestive juices, she would throw up for about an hour—heaving blood and undigested food.

One evening, four months after she had detected the bump on her breast, the pain was worse than usual. She screamed, cried and prayed for help. Finally, she couldn’t stand it any longer and slashed her wrists.

Hundreds of others, faced with months of agony and unable to secure any painless, sure way of release, jump from windows or gulp down some corrosive or searing disinfectant. In other cases a devoted husband or wife takes matters into his own hands and puts the sufferer out of his misery, thus risking conviction as a murderer. Would you convict a person who loved enough to relieve him of this insufferable pain? Yet the law, as it stands today, forbids this act of humanity.

Michael Henry Martin was born blind. His father, who worked on a section gang, died when he was eleven, leaving Mike and his mother to live on her fifty-dollar a week salary.

At twenty-two, Mike complained of a tired, rundown feeling. He was also running a temperature. It was leukemia, a cancer of the blood in which all the red cells are destroyed by the white. A few months later his limbs began to swell, filling with fluid. His skin was first sensitive to touch, then touch was torment. Lying on the bed became intolerable. As his blood degenerated, transfusions became more frequent. They came one after another and the medi-