

Beginning and end: On the right to die with dignity

The incontrovertible nature of both life and death makes them fiendishly difficult to legislate or adjudicate. Interfering with the very elemental beginning and end points of life must seem daunting. Nothing else can explain the long dalliance that laws have had with euthanasia to facilitate the intentional ending of a life, globally. In India, last week, the Supreme Court, in a landmark decision, approved the withdrawal of life support, including artificial nutrition and hydration, for Harish Rana, who went into a persistent vegetative state (PVS) following a head injury over 12 years ago. Invoking the constitutional idea of dignity, the Court observed that it would not be compatible with temporarily keeping alive a terminally ill patient who is brain dead or in a PVS, only because it is possible to leverage technological advancements to do so. This forces a life of indignity: patients endure a slow, agonising death. As the end of life approaches, a loss of control over human faculties denudes life of its meaning, it added. **The Court went on to expand the right to live with dignity under Article 21 to encompass the right to die with dignity.** In India, in the absence of legislation on the subject, the courts have consistently had to engage with the euthanasia question over the years. The Smt. Gian Kaur vs The State Of Punjab (1996) case might have set off the trend, but the debate entered the public realm with the Aruna Shanbaug petition in 2011. The Court, in this instance, did not allow for euthanasia as the nurses caring for her demurred, but went on to lay down guidelines for withdrawing or the withholding of medical treatment or medical support to allow for natural death. **In 2018, a Supreme Court Constitution Bench held that the right to die with dignity is a fundamental right.**

Besides benefitting Harish Rana in the instant case, the judgment will undoubtedly make it easy for terminally ill patients and their families ‘to let go’. As technology advances in leaps and bounds, more life-preserving hacks will become available to all who are able to pay for them but could erode the patient’s dignity. **The judgment is intended to introduce**

compassion into end-of-life care for patients with unalterable medical conditions. The concept of a living will, a legal document empowering individuals to state their preferences for medical treatment in situations where they become incapacitated, vegetative or are unable to communicate, again endorsed by the Court, must also be popularised. In the grey zones, it is the law that can give people the courage to take the right call.

Published – March 17, 2026 12:10 am IST