THE EVOLUTION OF EUTHANASIA JURISPRUDENCE IN INDIA: A JUDICIAL JOURNEY FROM SANCTITY OF LIFE TO DIGNITY IN DEATH

Ananya Singh, Guru Gobind Singh Indraprastha University

ABSTRACT

The jurisprudence of euthanasia in India has undergone significant transformation through judicial interpretation of the right to life and personal liberty under Article 21 of the constitution. This article examines the evolution of euthanasia law in India by analyzing the distinction between active and passive euthanasia and tracing the development of legal principles through landmark judicial pronouncements. Beginning with *Gian Kaur v. State of Punjab*, which rejected the notion of a constitutional right to die while recognizing the dignity of the dying process, the study explores the gradual shift in judicial thinking. It further analyzes *Aruna Ramachandra Shanbaug v. Union of India*, wherein the Supreme Court accorded limited legal recognition to passive euthanasia under strict safeguards. The article then discusses *Common Cause v. Union of India,* which firmly established the legality of passive euthanasia and recognized the validity of advance medical directives as an aspect of the right to die with dignity. Finally, the paper examines the significance of the *Harish Rana* decision in refining and strengthening the procedural framework governing end-of-life choices. Through a doctrinal analysis of these cases, the article demonstrates how Indian jurisprudence has progressively balanced the sanctity of life with individual autonomy, dignity, and compassionate end of life care. The study concludes that the evolution of euthanasia law in India reflects a cautious yet meaningful expansion of constitutional protections for terminally ill and incapacitated patients.

Keywords: Euthanasia, Active Euthanasia, Passive Euthanasia, Permanent Vegetative State, Right to Die with Dignity, Article 21, Constitutional Law, Medical Jurisprudence, End-Of-Life Decision, Advance Directives, Right to Life.

Introduction

Euthanasia, often referred to as *"mercy killing"* remains one of the most complex and contentious issues in contemporary legal jurisprudence. It raises profound questions concerning individual autonomy, medical ethics, the sanctity of life, and the extent of State intervention in end-of-life decisions. Broadly, euthanasia refers to the intentional termination of a person's life in order to alleviate unbearable pain and suffering arising from a terminal or irreversible medical condition. While active euthanasia involves a deliberate act of leading to the patient's death, passive euthanasia entails the withdrawal or withholding if life-sustaining treatment, thereby allowing the natural process of death to occur.

In India, the legality of passive euthanasia has been shaped predominantly through judicial pronouncements rather than legislative enactments. The debates surrounding passive euthanasia is intrinsically linked to Article-21 of the Constitution of Indian, which guarantees the right to life and personal liberty. Over time, constitutional courts have been called upon to determine whether right to life encompasses the right to die with dignity, particularly in circumstances where continued medical intervention merely prolongs suffering without any reasonable prospect of recovery.

The jurisprudential development of passive euthanasia in India reflects a gradual transistion from judicial caution to constitutional recognition of an individual's right to make informed end-of life decision. Landmark decisions such as **Aruna Ramchandra Shanbaug vs. Union of India & Others (2011)** and **Common Cause (A Regd. Society) vs. Union of India and Another (2018)** have significantly contributed to shaping the legal framework governing passive euthanasia and advance medical directives. Subsequent judicial developments have further refined the procedure safeguards and legal principles applicable I such cases.

Against this backdrop, the present article seeks to examine the concept of passive euthanasia, distinguish it from active euthanasia, and critically analyse the evolution of Indian jurisprudence through key judicial decisions. In doing so, it aims to evaluate the extent to which Indian legal system has reconciled the competing principles of preservation of life, individual autonomy, and the right to die with dignity.

Understanding the Euthanasia

The term euthanasia is derived from the *Greek* word *eu* meaning *good* and *Thanatos* meaning *death,* collectively signifying a *good death.* In legal and medical discourse, euthanasia refers to deliberate termination of life or the withdrawal of medical intervention with the objective of reliving a person from prolonged suffering and pain, or an irreversible medical condition.

The discourse surrounding euthanasia assumes a greater significance in cases involving terminally ill patients, individuals in a permanent vegetative state, or those suffering from incurable conditions where continued medical treatment offers little prospect of recovery. In such circumstances, questions arise regarding the extent to which an individual may exercise control over end-of-life decisions and whether the law should permit the discontinuation if life-sustaining treatment.

Distinction Between Active and Passive Euthanasia

Euthanasia is generally classified into two principal categories active euthanasia and passive euthanasia. Active euthanasia involves the commission of the positive act intended to bring about the death of patient, such as the administration of lethal substance. The act directly causes death and is prohibited under Indian law.

Passive euthanasia, on the other hand, refers to the withdrawal or withholding of life sustaining medical treatment, allowing the patient to die from the underlying illness or medical condition. Such treatment may include ventilatory support, artificial, nutrition, hydration, or other medical interventions necessary to sustain life. Unlike active euthanasia, passive euthanasia does not involve a direct act causing death; rather, it permits the natural process of dying to takes its course.

The legal distinction between the two forms of euthanasia is founded upon the difference between an act and omission. While active euthanasia involves the decision not to continue medical intervention that artificially prolongs life. Consequently, passive euthanasia is often viewed within the framework of patient autonomy, informed consent, and the right to die with dignity, particularly in cases involving terminal illness or permanent vegetative states.

This distinction has assumed considerable significance in Indian jurisprudence. Although active euthanasia remains impermissible, the judiciary has gradually recognized passive

euthanasia under carefully regulated circumstances, acknowledging that the prolongation of biological existence at all cost may, in certain cases, be inconsistent with dignity of individual. The development of this legal position can be traced through a series of landmark decisions that have shaped the contemporary framework governing end-of-life care in India

Judicial Evolution of Passive Euthanasia and The Right to Die with Dignity in India

- ***Gian Kaur vs. State of Punjab (1996): Primacy of Sanctity of Life***

The first major constitutional pronouncement on the issue came Gian Kaur vs. State of Punjab, where the Supreme Court determine whether the right to life under Article 21 encompassed a right to die. The petitioner challenged the constitutional validity of provisions criminalizing abetment of suicide, arguing that personal liberty necessarily included the freedom to end one's own life.

Rejecting this contention, the court held that Article 21 could not b interpretated to include a right to die, such an interpretation would be inconsistent with the very purpose of a provision intended to protect life. The judgement reflected a traditional rights-based approach in which the preservation of a life as regarded as the paramount constitutional objective.

However, the significance of Gian Kaur lies not merely in what it rejected but also in what it subtly introduced. While denying the existence of a right to die, the court acknowledged that the right to life includes the right to live with dignity and that this dignity extends until the end of one's natural life. This observation, though limited in scope, planted the constitutional seed from which future euthanasia jurisprudence would develop.

- ***Aruna Ramachandra Shanbaug vs. Union of India (2011): From Preservation of Life to Preservation of Dignity***

The judiciary's reasoning underwent a noticeable shift in the Aruna Shanbaug case. Aruna Shanbaug, a nurse at Mumbai's KEM hospital, had remained in a persistent vegetative state for over forty-two years after suffering a brutal sexual assault in 1973. The case confronted the Court with difficult question of whether the law should insist on preserving biological existence irrespective of the patient's condition and quality of life.

Unlike Gian Kaur, where the debate centered on the abstract existence of a right to die, Aruna

Shanbaug compelled the court to address the practical realities of prolonged suffering and irreversible and medical conditions. Consequently, the court recognized passive euthanasia under exceptional circumstances and permitted the withdrawal of life sustaining treatment subject to judicial approval.

The most significant aspect of the judgment was the Court's willingness to distinguish between merely keeping a person alive and ensuring a life consistent with human dignity. Judicial reasoning therefore moved beyond the binary framework of life versus death and began considering the quality of life and the dignity of the individuals as constitutionally relevant factors. Although the Court remained cautious and imposed stringent safeguards, it signalled that sanctity of life was no longer an absolute principle.

- ***Common Cause vs. Union of India (2018): The Rise of Autonomy and Constitutional Morality***

The most transformative development occurred in Common Cause vs. Union of India, where a Constitution Bench was called upon to examine whether terminally ill individual possessed the right to refuse medical treatment and die with dignity.

Building upon the foundations laid in Gian Kaur and Aruna Shanbaug, the Court held that right to die with dignity is an intrinsic part of the right to life under Article 21. In doing so, it expanded the constitutionally discourse beyond dignity alone and placed considerable emphasis on personal autonomy, bodily integrity, informed consent, and self-determination.

The recognition of Advance Medical Directives, or living wills, reflected a profound shift in judicial thinking. The Court acknowledged that constitutionally rights do not cease merely because an individual deserve protection even at the final stage of life.

Unlike earlier judgment, which focused primarily on preserving life while allowing limited exception, Common Cause treated individual choice as a constitutional value in its own rights. The decision thus marked a transition from judicial paternalism towards a framework grounded in constitutional morality and respect for personal agency.

- ***Harish Rana vs. Union of India: Consolidating Rights Through Procedural Reforms***

The subsequent judicial development reflected in the Harish Rana case demonstrate how

euthanasia jurisprudence entered a new phase of maturity. By this stage, the fundamental constitutional questions had largely been resolved. The judiciary was no longer debating whether passive euthanasia was permissible; instead, it was concerned with ensuring that the right could be exercised effectively.

The focus shifted towards procedural simplification, implementation of living wills, and reducing practical barriers faced by patients and families. This represents an important evolution in judicial reasoning. Constitutional rights acquire meaningful significance only when supported by accessible procedures, and the judiciary increasingly recognized that excessive procedural requirements could undermine the very autonomy that earlier judgments sought to protect.

A Constitutional Shift: From Life Centric to Dignity Centric jurisprudence

A holistic examination of these decisions reveals a clear evolution in constitutional thought. **Gian Kaur** viewed **Article 21** primarily through the lens of sanctity of life. **Aruna Shanbaug** introduced the idea that dignity may, in certain circumstances, justify the withdrawal of life sustaining treatment. **Common Cause** elevated dignity an autonomy into enforceable constitutional principles, while subsequent developments focused on translating these principles into practical reality.

Thus, the journey of euthanasia jurisprudence in India is not merely a sequence of judicial decisions but a reflection of the judiciary's evolving understanding of human dignity. The courts progressively moved away from treating life as a purely biological phenomenon and towards recognizing that the constitution protects not only the right to live, but also the right to make deeply personal decisions concerning the manner in which one approaches the end of life.

Conclusion

The development of euthanasia jurisprudence in India demonstrates how constitutional interpretation can respond to evolving human conditions and ethical dilemmas. What began as a rigid legal position has gradually been reshaped into more humane understanding of law that acknowledges suffering, medical reality, and individual choice. At the same time, the subject continues to raise a difficult legal and moral questions that remains unresolved in a definitive

sense. The ongoing judicial engagement with euthanasia indicates that the law in this area is still in a stage of careful development rather than final settlement. In essence, the journey of euthanasia in India reflects the broader evolution of constitutional law itself gradual, adaptative and continuously shaped by the tension between certainty and compassion.

BIBLIOGRAPHY

Cases

1. *Gian Kaur v, State of Punjab*, (1998) 2 SSC 648
2. *Aruna Ramchandra Shanbaug v. Union of India*, (2011) 4 SCC 454
3. *Common Cause v. Union of India,* (2018) 5 SSC 1
4. *Harish Rana v. Union of India*, 2026 SSC Online SC 358

Statutes

1. Constitution of India, 1950 – Article 21
2. Indian Penal Code, 1860 – Sections 302, 304, 306 and 309
3. Mental Healthcare Act, 2017 – Section 115

Web Sources

1. https://indiankanoon.org/doc/217501/
2. http://api.sci.gov.in/jonew/judis/37709.pdf
3. http://indiankanoon.org/doc/184449972/
4. http://indiankanoon.org/doc/125527568/