

Research Article

The Attitudes of Nursing and Medical Students Towards Euthanasia: The case of Turkey

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Abstract

This study was aimed to evaluate the attitudes of nursing and medical students towards euthanasia. This study descriptive study. It was conducted with nursing and medical faculty students studying at a university. This study 240 medical faculties and 472 nursing students participated in the study. Questionnaire and the Attitude Scale About Euthanasia, Death and Dying Patient. Nursing students 50.8% had knowledge about euthanasia, 40.8% of the medical students 61.3% did not have knowledge about euthanasia, and 87.1% did not follow up the dying patient. The question "What do you think about euthanasia practice?" was answered as "Disobedience to Allah" by a great majority of the nursing students "human/patient right" by the medical students. The question "should the euthanasia be legal?" was answered as "yes" by 60.8% of the medical students but "no" by 57.8% of the nursing students ($p < 0.05$). The mean scores of the nursing students' attitude about euthanasia, death, dying patient and their total mean scores were 37.5 ± 7.5 , 23.5 ± 2.8 , 23.0 ± 2.5 , and 84.1 ± 9.3 , respectively. The scores of the medical students were 35.8 ± 9.3 , 21.6 ± 3.1 , 22.8 ± 3.0 , and 80.3 ± 11.4 ($p < 0.05$). Most of medical students did not have knowledge about euthanasia, however they stated that this practice was a "human/patient right" and they stated that this practice should be legal in Turkey.

Keywords: Euthanasia; Medical students; Nursing students

Introduction

Euthanasia is defined as the medically termination of life of the patients who have to live with a disease that cannot be treated and causes to feel pity upon their request [1]. In another definition, euthanasia is expressed as an action in which the active substance causing the death of a patient is given directly by other people [2]. On the other hand, the American Medical Association defined euthanasia as to provide painless death to patients whose pains cannot be relieved and cannot be treated by the medicine field with their request in order to stop their suffering or to stop treatment or not putting effort for keeping them alive [3]. The Hungarian Medical Chamber defined euthanasia as an action or inaction to mercifully shorten or end of the life of a person suffering pain [4]. Despite its different definitions, the only moral justification in the implementation of euthanasia is that the patient has a completely physical inability to end his/her own life [5]. It seems more possible to accept euthanasia in situations that cannot be treated with today's medical possibilities and prevent the person to have a quality life and his/her autonomy; on the other hand, in the case of accepting euthanasia, depriving patient of the advances in medicine and the combination of many cultural, social and religious factors

make the subject controversial [6]. The issue of euthanasia which has led to various discussions in ethics, religion, law, social and political fields as well as in the medical fields both in the world and in Turkey leads to prejudiced thoughts and interpretations among healthcare professionals [1,7]. Healthcare professionals experience dilemmas caused by the duties and responsibilities for protecting, maintaining and improving the lives of individuals and by the principle of respecting autonomy. Although nurses often encounter euthanasia requests, it is not clear how nurses experience euthanasia. However, having more awareness about the specific contribution of nurses to the care of patients who want euthanasia may support optimal nursing care. Therefore, each stage of the process requires nurses to have certain competencies [8]. In addition, attitudes of healthcare professionals towards euthanasia may affect their behaviors. This is particularly crucial for nurses because nurses are continuously in contact with patients and often face with euthanasia problem. Another factor that makes euthanasia one of the most challenging issues in the medical field is the lack of consensus among experts in this field. Therefore, it is believed that all aspects of this issue should be investigated more carefully and thoroughly particularly in terms of determining patient rights [9]. In Turkey which is a secular, democratic country having mostly Muslim population, euthanasia is illegal and considered as murder and students may face conflicts about euthanasia in terms of ethical dilemmas, legal problems, religious beliefs, social and cultural values [10]. When students confront with deadly ill patients, they experience certain communication problems, mostly have a technical and superficial relationship with them, spend less time with them starting from the time of diagnosis, avoid talking with patient's relatives about the patient's condition and possible treatment options, and try not to encounter with them in hospital corridors and patient rooms [11]. However, regardless of being a student or an employee, the important duties of healthcare professionals include informing the patient and his/her family, not forgetting that the

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patient is an individual and caring about the rights of the patients who are about to die [12]. Although both healthcare team members can take part in euthanasia application, they also fulfill their role as patient advocacy and undertake the liability to defend and protect the patient in cases where no decision can be made about the patient. All these lead health care team members to experience ethical dilemma about euthanasia [6]. Therefore, studies investigating the opinions of nursing students, physicians, nurses and healthcare professionals about euthanasia have been conducted [1]. However, discussions about euthanasia have continued multi-directionally worldwide and the attitudes of healthcare professionals are becoming more and more important [1,13]. Including the opinions of the students who will take part in healthcare on euthanasia subjects before starting to work is considered as important in terms of discussing ethical, political and legal problems in this issue [1]. Accordingly, the attitudes of the nursing and medical students about euthanasia were investigated in this study.

Methods

Type of the study

This descriptive study was carried out between February and May 2018 with nursing and medical students of a university.

Population and sample of the study

The population of the study was composed of the nursing and medical students and it was aimed to reach all the students without sample selection. However, the study was completed with a total of 712 students including 240 Medical students and 472 Nursing students.

Dependent Variables: Mean scores of attitude level about euthanasia, death, dying patient.

Variables: Students' sociodemographic characteristics (age, gender, their department, class etc.) and thoughts about euthanasia.

Data collection tools

The data of the study were collected using Questionnaire and the Attitude Scale About Euthanasia, Death and Dying Patient.

Questionnaire

This form includes the questions about students' age, gender, class, parents' educational status, place of residence, status of smoking and drinking alcohol, presence of chronic disease, status of loving the profession, and euthanasia.

Attitude scale about euthanasia, death and dying patient

The scale evaluates attitudes towards euthanasia, death and dying patient and was developed by Senol et al. [14] to measure the attitudes of individuals towards euthanasia. The Cronbach's alpha coefficient of the scale was determined as 0.84. The scale has three subscales examining the attitudes towards euthanasia, death and dying patient. The highest score is 56 and the lowest score is 14 for the subscale measuring the attitude towards euthanasia. The highest score is 36 and the lowest one is 9 for the subscale measuring the attitude towards death. The highest score is 32 and the lowest score is 8 for the subscale measuring the attitude towards dying patient. Scale total score is obtained by summing the scores corresponding to the answers given to the items. Accordingly, the highest and lowest scores of the scale are 124 and 31, respectively. Higher total score is evaluated as "more negative" attitude towards euthanasia, death, and dying patient.

Application process of data collection tools

Before starting to collect data, the students were informed about

the purpose of study and their supports about the participation to study were provided. The data collection tools were applied by the researcher through face-to-face interview method. The students filled out the questionnaires during the school hours and in the classroom environment. It took approximately 15 minutes for the individuals to respond the forms.

Ethical approval

Before starting the study, permission was obtained from Gaziantep University Clinical Research Ethics Committee with the decision number 2018/42, as well as from the Faculty of Medicine, Faculty of Health Sciences and students. In addition, the students participating in the study were informed about the study and that the information obtained as a result of the study would not be used anywhere except for the study report.

Data analysis

In the comparison of the data obtained from the study, chi-square, student-t, one-way ANOVA, Kruskal Wallis and Mann Whitney U analysis were used. The results were accepted as statistically significant at $p < 0.05$ and confidence interval of 95%.

Results

It was observed that most of the nursing and medical students were aged between 17-21 years ($p > 0.05$), female, living in city center, expressed that they liked their profession ($p < 0.05$), had no chronic disease ($p > 0.05$), defined euthanasia correctly and knew that euthanasia is not legal in Turkey ($p < 0.05$) (Table 1). In addition, it was also found that majority of the students studying in both departments responded to the question "What does death mean to you?" as "a new beginning" ($p < 0.05$). It was determined that 50.8% of the nursing students had knowledge about euthanasia and 65.0% did not do follow-up of a dying patient. 61.3% of the medical students had no knowledge about euthanasia and 87.1% did not followup a dying patient ($p < 0.05$). For the question "What do you think about euthanasia practice?", majority of the nursing students responded as "Disobedience to Allah" and medical students responded as "the human/patient right". For the question "should euthanasia be legal?", 60.8% of the medical students responded as "yes"; whereas, 57.8% of the nursing students responded as "no" ($p < 0.05$) (Table 2). While the subscale and total mean scores of the nursing students from the attitude scale about euthanasia, death, and deadly ill patient were 37.5 ± 7.5 , 23.5 ± 2.8 , 23.0 ± 2.5 , and 84.1 ± 9.3 , those of the medical students were 35.8 ± 9.3 , 21.6 ± 3.1 , 22.8 ± 3.0 , and 80.3 ± 11.4 , respectively ($p < 0.05$). There was no statistically significant correlation between the age, class, presence of chronic disease, the status of loving the profession of the nursing and medicine students and their total mean scores from the Attitude Scale About Euthanasia, Death, and Dying Patient. It was determined that the female nursing and medical students who responded as "no" to the question "should euthanasia be legal?" had more negative attitude towards euthanasia, death and dying patients ($p < 0.05$). In addition, the medical students, who stated that they had no knowledge about euthanasia and did not followup dying patients, had more negative attitudes towards euthanasia, death and dying patients ($p < 0.05$) (Table 3).

Discussion

Euthanasia, which is still controversial and causes ethical problems in international and national level is closely related to healthcare professionals. In particular, nurses and physicians who involved in the treatment and care services of patients have a decisive role in

Table 1: Comparison of the Results Related to Some Characteristics of Students.

Characteristics	Nursing n(%)	Medical n(%)	p
Gender			
Female	367(77.8)	133(55.4)	0.000
Male	105(22.2)	107(44.6)	
Age			
17-21	340(72.0)	164(68.3)	0.305
22-26	132(28.0)	76(31.7)	
Year			
1	145(30.7)	66(27.5)	0.000
2	120(25.4)	76(31.7)	
3	109(23.1)	98(40.8)	
4	98(20.8)	0(0.0)	
Mother's Educational Status			
Illiterate	146(30.9)	13(5.4)	0.000
Primary school	265(56.1)	97(40.4)	
High school	50(10.6)	63(26.3)	
University	11(2.3)	67(27.9)	
Father's Educational Status			
Illiterate	27(5.7)	0(0.0)	0.000
Primary school	302(64.0)	48(20.0)	
High school	88(18.6)	78(32.5)	
University	55(11.7)	114(47.5)	
The longest residence place			
Village	79(16.7)	16(6.7)	0.000
District	142(30.1)	53(22.1)	
Province	251(53.2)	171(71.3)	
Smoking			
Yes	45(9.5)	29(12.1)	0.292
No	427(90.5)	211(87.9)	
Drinking alcohol			
Yes	24(5.1)	52(21.7)	0.000
No	448(94.9)	188(78.3)	
Presence of chronic disease			
Yes	39(0.3)	26(10.8)	0.260
No	433(91.7)	214(89.2)	
Status of liking profession			
Yes	320(67.8)	208(86.7)	0.000
No	152(32.2)	32(13.3)	
Total	472(100.0)	240(100.0)	

euthanasia [6]. Nursing Codes and ANA recommends nurses not to participate in euthanasia but should be a party to delivery an honorable and humanitarian care [2]. However, in the ethical dilemmas to be experienced in the case of termination and limitation of treatments to allow patients in terminal period to have a peaceful and respectable death, ethical principles such as autonomy, beneficence/nonmaleficence of decision and fairness play a role. Healthcare professionals' developing ethical approach and playing an ethical role is undoubtedly dependent on the development of skills to make decisions and to analyze in ethical issues in education programs. Besides, it is noteworthy that the students' opinions about euthanasia and suicide are different and it is seen that the students evaluate euthanasia as an ethical problemat higher rate and suicide as an ethical problem at lower rate. In fact, although both cases are related to the patient's desire to end his/her own life under the direction of his/her own will, the evaluation of euthanasia as an ethical problem at higher rate by the students may result from the support of euthanasia by healthcare professionals [15]. It should also be remembered that nursing and medical students who will be doctors and nurses of the future have responsibilities in this field. In particular, witnessing the lives of deadly ill patients and their relatives is an important factor in students to understand the patient without drowning in his/her own emotions and in avoiding the perspective of seeing the incurable patients as objects of their failure. On the other hand, this process can

Table 2: Comparison of Results of Students Towards Euthanasia.

Characteristics	Nursing n(%)	Medical n(%)	p
What does death mean to you?			
End of the life that God has determined	13(2.8)	7(2.9)	0.000
A fresh start	86(18.2)	24(10.0)	
End	30(6.4)	13(5.4)	
Salvation	33(7.0)	9(3.8)	
End of life	39(8.3)	28(11.7)	
Fact of life	24(5.1)	23(9.6)	
Another dimension	11(2.3)	5(2.1)	
Termination	13(2.8)	16(6.7)	
No answer	68(14.4)	57(23.8)	
Passing to the other world	72(15.3)	12(5.0)	
Sadness, separation	15(3.2)	7(2.9)	
Union	27(5.7)	12(5.0)	
Accountability	6(1.3)	6(2.5)	
Eternity	25(5.3)	14(5.8)	
Fear	10(2.1)	7(2.9)	
Did you follow up deadly ill patients?			
Yes	165(35.0)	31(12.99)	0.000
No	307(65.0)	209(87.1)	
Do you have knowledge about euthanasia?			
Yes	240(50.8)	93(38.)	0.002
No	232(49.2)	147(61.3)	
Describe euthanasia			
I do not know			0.005
The patient decides his own death	81(17.2)	20(8.4)	
Killing the patient	195(41.3)	11(49.4)	
Request of deadly ill patient to die with medication	39(8.3)	16(6.7)	
Dead of deadly ill patient without suffering	13(2.8)	17(7.1)	
Suicide	112(23.7)	53(22.2)	
Murder	12(2.5)	8(3.3)	
What do you think about euthanasia?			
Disobedience to Allah	20 (4.2)	7(2.9)	0.000
Murder	132(28.0)	52(21.7)	
Medical practice	72(15.3)	16(6.7)	
Human/patient right	95(20.1)	36(15.0)	
Other	96(20.3)	103(42.9)	
	77(16.3)	33(13.8)	
Should euthanasia be legal?			
Yes	199(42.2)	146(60.8)	0.000
No	273(57.8)	94(39.2)	
Do you want to get information about euthanasia?			
Yes	166(35.2)	76(31.7)	0.363
Partially	154(32.6)	91(37.9)	
No	152(32.2)	73(30.4)	
Total	472(100.0)	240(100.0)	

sometimes be too difficult for the student to cope with. Therefore, it is very important to prepare students in approaching death phenomenon along with deadly ill patients and their relatives through appropriate education methods and contents [11]. In this study conducted to compare the attitudes of nursing and medical students towards euthanasia, it was observed that the subscale mean scores of both medical and nursing students from attitude scale about euthanasia, death and dying ill patient were "moderate level" while their total mean score was "higher than moderate level". It was also determined that most of medical students answered "yes" to the question of "should euthanasia be legal?" and most of nursing students answered "no" to that question. When the studies conducted on this subject in Turkey are evaluated; it has been determined that most of the students do not want euthanasia for both themselves and their relatives and

Table 3: Comparison of Some Characteristics of Students and their Mean Scores from the Attitude Scale About Euthanasia, Death and Dying Patient.

Characteristics	Nursing		Medical	
	X±SD	P	X±SD	P
Age				
17-21	84.2±9.3	0.525	80.8±11.5	0.332
22-26	83.6±9.4		79.3±11.4	
Gender				
Female	84.9±9.1	0	81.7±11.0	0.043
Male	81.2±9.5		78.6±11.9	
Year				
1	84.0±8.8		78.8±12.4	
2	82.9±9.4	0.351	81.9±12.1	0.278
3	85.1±9.0		80.1±10.1	
4	84.5±10.3		-	
Presence of chronic disease				
Yes	81.5±8.8	0.72	75.6±9.6	0.422
No	84.3±9.3		80.9±11.5	
Status of liking profession				
Yes	84.1±9.1	0.743	80.0±11.5	0.273
No	83.8±9.9		82.4±10.8	
Following up deadly ill patient				
Yes	84.2±9.3	0.864	76.4±12.4	0.044
No	84.0±9.3		80.9±11.2	
Do you have knowledge about euthanasia?				
Yes				
No	84.1±9.8	0.898	78.2±13.6	0.021
	84.0±8.8		81.7±9.6	
Should euthanasia be legal?				
Yes	78.9±7.7	0	75.3±10.1	0
No	87.9±8.6		88.2±8.6	
Total	84.1±9.3		80.3±11.4	

display negative attitude towards euthanasia [10,16]. The studies conducted in Iran and Sudan revealed that nursing and medical students showed negative attitude towards euthanasia [9,16] and there was a significant correlation between some demographic characteristics of the students including gender, age and religious beliefs with euthanasia [17] and their clinical experiences as in the present study [16]. Iranian law evaluate the practice of euthanasia as a crime and this is based on Islam and the viewpoint of religious leaders. These two factors may have a significant effect on the attitudes and perspectives of the students. In addition, the studies have showed that attitudes towards euthanasia are mostly related to education. In addition, the lack of consensus among experts in this field also makes euthanasia one of the most challenging issues. For this reason, it is thought that this issue should be investigated more carefully and in depth from all aspects especially in terms of determination of patient rights so that students and doctors can express their opinions more confidentially [9]. Death is conceptualized in different ways by different cultures and civilizations [18,19]. In the laws applied especially in Muslim and Christian countries, there are many differences helping to explain medical and nursing practices at the end of life [20]. While Muslim countries show more negative attitude towards euthanasia, it was determined in a study conducted in Germany that nurses had a more positive attitude towards euthanasia [21]. Again, in another study conducted in intensive care unit in Greece, it was determined that both nurses and physicians supported euthanasia and found it ethically appropriate [22]. In a study conducted in Netherlands, it was found that the majority of medical students had a very positive attitude towards physician-assisted suicide and these attitudes were related to their religious levels [23]. In a study conducted in Norway collecting the opinions of medical, law and psychology students, it was determined that 61% of the law

students, 59% of the psychology students and 24% of medical students support active euthanasia in patients with fatal disease and 69%, 64% and 35% of them supported assisted suicide, respectively. It was found that 30% of Christian students supported active euthanasia in fatal disease and 39% of them supported assisted suicide, 57% and 65% of the students with other religious belief or without an identifiable belief supported them, respectively and there was no significant difference in terms of gender [24]. In a study conducted with 5th and 6th grade medical students of four Norwegian medical schools, it was determined that 19% of the students thought that euthanasia should be legalized in case of fatal disease, 31% thought that physician-assisted suicide should be allowed, 28% expressed that they did not know about this issue. It was found that those who were female and stated that their religious beliefs were important for them were less positive than males, the majority of the students refused the legalization in most of explained situations, most of them expressed an opinion in favor of the legalization in fatal disease case but more participants were undecided [25]. It was determined in another study that 65.1% of the students supported discontinuance of the technology maintaining the life of a deadly ill patient suffering from severe pain (passive euthanasia), 34.3% supported doctor-supported euthanasia, 28.3% supported active euthanasia and students defining themselves as democrat supported euthanasia more than the students who defined themselves as republican [26]. In a study conducted with medical students in three countries, it was stated that 82% of German students, 61% of Swedish students and 48% of Polish students accepted euthanasia, the rate of German students who accepted euthanasia was significantly higher than the Swedish and Polish students and this difference may be associated with religious beliefs which are an element of cultural diversity among the three countries [27]. It was concluded in a review that there was a clear relationship between religions or worldview and nurses' attitudes toward euthanasia or physician-assisted suicide but none of the studies has examined the relationship of the nurses' attitudes towards euthanasia or doctor-assisted suicide with religious or worldview in detail and further studies should be conducted [28]. It was stated in a review investigating 35 studies published between 1990 and 2007 that nurses in various geographical regions and clinical environment played an important role in supporting patients in need of euthanasia and nurses had extremely complex feelings about euthanasia, there were methodological and terminological problems in the studies investigating the nurses' approaches toward euthanasia and there was a need for more carefully designed qualitative studies that thoroughly examine nurses caring patients who demand euthanasia [29]. In a study conducted with 1509 nurses working in hospitals, home care institution and nursing homes, it was determined less than half of the nurses (45%) stated that they would be willing to serve in committees examining euthanasia and doctor-assisted suicide cases and most of them stated that preparing patient for euthanasia (62.9%) and practicing it (54.1%) should not be considered as nursing duty [30]. Another noteworthy point in the studies on euthanasia is that health workers express that euthanasia is secretly applied despite the prohibition. In a study, it was found that a significant rate of nurses (43.3% - 59.6%) believed that euthanasia was secretly applied despite the prohibition. Therefore, it is stated that the subject should be investigated from many dimensions based on the widespread belief that euthanasia is applied secretly even if it is prohibited [31]. In another study, it was emphasized that there were many nurses and physicians who believed that euthanasia was applied in certain cases although it was not illegal and this issue should be discussed [13]. In

another study conducted with physicians, 52% of physicians stated that they were against euthanasia and 60% of those who opposed presented their reason as "it would be misused" [32]. In the study by Leppert et al. [33], it was stated that students from two universities shared similar opinions about possible misuses following the euthanasia, euthanasia selection, euthanasia law and the legalization of euthanasia. These results show that the well-structured studies to be conducted about euthanasia with large sample groups are extremely important. It was found in the present study that women exhibited a more negative attitude towards euthanasia. In a study conducted in Turkey, it was stated that total mean score of the students was higher in women than men and this could be explained by the more emotional structure of women [6]. However, it is thought that comprehensive studies should be conducted in order to reach clearer results on this subject. It was determined in this study that medical students who expressed not to have any knowledge about euthanasia and did not followup deadly ill patients presented more negative attitudes. The difficulties experienced by the students may be related to the complexity and nature of euthanasia and death. For this reason, students should be informed about this subject, graduate with certain competencies and their own experiences should be investigated in detail. It is also very important that students learn the principles and processes on ethical dilemmas and decision-making during their education. Because the practice of ethical principles can contribute to the treatment and care of patients requesting euthanasia and to the search of the best solutions to the complex problems at the end of life. It should also be remembered that the most appropriate approach is the one that is suitable for the conditions of the country.

Limitations of the Study

The limitations of the study are that the study was conducted with the nursing and medical students of only one university and there is the lack of cultural and religious diversity in Turkey.

Conclusions and Recommendations

In this study comparing the attitudes of the nursing and medical students towards euthanasia, it was determined that both nursing and medical students had negative attitudes towards euthanasia, death and deadly ill patients and opposed the legalization of euthanasia. However, when considering that the quality of health services is based on the team concept, different thoughts of the physicians and nurse candidates who are the main managers of treatment and care process may cause some problems in the clinic. In the guidelines, it is recommended to strengthen the cooperation between doctors and nurses in order to prevent ethical and legal misunderstandings. For this reason, it can be recommended to train students of both departments in detail about death and euthanasia concepts before starting to clinic, include courses about this subject to the curriculum, and reflect this information to the patients and their relatives.

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