

ANALYSIS

Suicide following her son's death: the slippery slope of euthanasia

LIFE AND BIOETHICS

26_04_2026



**Tommaso
Scandroglio**



It is up to each individual to decide when their life is no longer worth living. This over-used slogan has been repeated in the Western world for years now, if not decades, in an

attempt to normalise euthanasia. The story of Wendy Duffy, a 56-year-old Englishwoman, embodies this slogan perfectly. Four years ago, Mrs Duffy lost her 23-year-old son in a trivial accident when he choked to death on a cherry tomato.

She never recovered from that loss. "I no longer feel any joy. I have no desire to carry on living," she told the [Daily Mail](#). "I won't change my mind. Be happy for me. I know I will die with a smile on my lips." She was unhappy to be alive, but happy to die. Given that the assisted suicide bill has stalled in the UK's House of Lords, Mrs Duffy decided to fly to Switzerland, where she died yesterday. After undergoing several psychiatric assessments – because not every suicide is an act of insanity – she closed her eyes forever at the Pegasos clinic, having paid ten thousand pounds. "The clinic is very beautiful, and there's a splendid view of the garden from my room," she commented. She asked for her bedroom door to be left open to prevent her spirit from becoming trapped within those four walls.

Before travelling to Switzerland, she waited for her two dogs to die. When she knew the day and time of her death, she set a countdown on her phone. Having previously attempted suicide, she had risked becoming disabled and so opted for this more scientific, organised and less improvised method. "This seems to me a calmer and more orderly way to proceed." Furthermore, Mrs Duffy showed great sensitivity: 'I could throw myself off a bridge or a building, but that would leave whoever found me grappling with that scene for the rest of their lives.'

It is relatively surprising that the media continue to report that this case has reignited the debate on euthanasia and assisted suicide in the United Kingdom.

This is surprising because, in reality, the British public, like the European public, has long since accepted the idea that a person should have the right to end their own life when and how they wish. The debate has, in truth, been over for some time. The only remaining debate is about the grounds for accessing assisted suicide and euthanasia. People are bewildered by Mrs Duffy's decision to end her life, as she was not physically ill, but mentally ill. Yet, given the circumstances, this emotional reaction is unjustified.

Since most people believe it is right to end one's own life when it loses meaning, it is difficult to understand why certain reasons for dying should be considered more valid than others. If it is up to the individual to decide how to end their suffering, then every reason is legitimate. As Mrs Duffy herself put it, 'It is my life, it is my choice'.

From this distorted perspective, my life might no longer make sense if I am terminally ill, have ALS or am in a coma. Likewise, my life might lose its value if my girlfriend leaves me, if I get a bad mark at school, if my company goes bankrupt, if I have a child who is addicted to drugs, or if I cannot come to terms with a bereavement, as in the British case. The underlying reason for supporting euthanasia is suffering. The nature of that suffering is irrelevant; it may be physical, psychological, sensory or moral. To exclude certain forms of suffering from the list of those that justify this extreme act would be discriminatory, irrational, and contradictory. In short, either all choices are beyond question or none are. One cannot remain in limbo.

Moreover, this conclusion gains substance if we consider that physical pain, disabilities, serious illnesses and fatal conditions always translate into psychological and moral suffering. When a terminally ill patient decides to end their life, it is because they are unhappy. This means that the ultimate criterion is the person's state of mind, their inner condition. Therefore, there is no difference between an ALS patient who wishes to die and a mother who has lost a child and wishes to die, because the reference framework for choosing euthanasia is the same in both cases: inner suffering. The only difference is that in one case it stems from a pathological condition, and in the other, from bereavement. However, within our individualistic society, no one can judge the nature of suffering by claiming that the moral suffering arising from ALS carries greater weight and dignity than that arising from the loss of a child. The impact of suffering depends on many factors. A six-year-old child exerts the same effort lifting ten kilos as an adult lifting fifty. Therefore, the psychological suffering caused by an incurable tumour may be equal to, or even less than, that caused by the death of a child. Needless to say, however, it is never permissible to take one's own life or ask to be killed, whatever the suffering endured. Suffering does not justify moral evil.

Therefore, the controversies surrounding the bill currently before the British Parliament, which would exclude cases similar to Mrs Duffy's because she is not terminally ill, appear futile because they are unfounded. Once such a law is passed, it will only be a matter of time before even physically healthy but unhappy people are able to die at the hands of the state. This is what happened in Belgium and the Netherlands, which initially did not allow euthanasia for psychiatric patients, but now do. It is also the story of Spain, where the young Noelia recently died by state-sanctioned euthanasia because she was depressed; at one time, this would not have been permitted. It is also the story of Canada, where there is currently a debate over whether to extend the criteria for euthanasia to include people who are simply unhappy with their lives.

Ultimately, it is the story of the slippery slope that never ceases to apply universally without exception.

Or rather, not. Thanks to faith, however, this slippery slope can be brought back into balance. The only way out is to point to the death on the cross of the suffering Christ in order to prevent euthanasia of those who are crucified by their own suffering.