

Analysis of the Position of Islamic Law on Human Euthanasia Practices in Nigeria

By

Mardhiyyah Munir Ja'afar PhD*

Abstract

Human euthanasia, commonly referred to as mercy killing, remains one of the most contentious topics in modern legal, ethical, religious and medical discourse. In Nigeria, where Islamic Law coexists with legislations, the received English law and customary law, the debates on euthanasia raise profound questions relating to sanctity of human life, the limits of medical intervention and the role of compassion in end-of-life decision-making. Within the framework of the Shari'ah, the concept is discussed vis-a-vis the sanctity of human life and the preservation of lineage as guaranteed under the Shari'ah. Consequently, the Shari'ah forbids ending human life regardless of motives built upon mercy or compassion due to terminal illness. Adopting a doctrinal methodology, this paper examined the meaning, motivation, classification, legal and ethical implications of euthanasia under the Islamic criminal justice system with particular reference to the primary and secondary sources of the Shari'ah including the opinion of classical and contemporary juristic views. The paper found that there is a difference between actively ending the life of the terminally ill on the ground of compassion, which is forbidden under the Shari'ah and the withdrawal of extraordinary intervention due to futility which the Shari'ah permits. Consequently, it recommended putting in place a legal framework in Nigeria that is in line with the Shari'ah that clearly addresses ending human life due to terminal illness and withdrawal of extraordinary intervention from the terminally ill.

Keywords: Analysis, Islamic Law, Euthanasia, Active Euthanasia, Passive Euthanasia, Shari'ah Ruling

*PhD, Senior Lecturer, Baze University, Abuja. Email: mardhiyyah.jaafar@bazeuniversity.edu.ng Tel: 08037037878

1.0 INTRODUCTION

Human euthanasia and assisted dying have become a significant subject of discourse in contemporary medical law, ethics, and bioethics, especially with the framework of the (*Shari'ah*) Islamic Law. Progress in science, technology and medicine has led to prolonging human life artificially but has also heightened debates regarding its ethical, legal, religious and social implications vis a vis the sanctity of human life, right to dignity, and patient autonomy. While human euthanasia and assisted dying remain highly controversial in the world, European Countries (EU) such as Belgium, Spain and the Netherlands have enacted laws that permit euthanasia provided it is administered by a physician, Germany, Italy and Austria permit assisted suicide only.¹ Islamic Law on the other hand is rooted in the preservation of life as one of the fundamental necessities in the *Shari'ah* but clearly distinguishes cases of termination of the life of the terminally ill on compassionate ground from cases of withdrawal from life support machines on the futility ground.

Islam recognises sickness as an inevitable part of human existence and makes seeking medical treatment permissible. The Messenger of Allah (peace be upon him) mentioned in a *hadeeth* narrated by Abu Hurairah (RA): “There is no disease that Allah has sent down, except that He also has sent down its treatment”.² Abud-Darda' (RA) reported that the Messenger of Allah (peace be upon him) said: “Allah has sent down the disease and the cure and has made for every disease the cure. So, treat sickness, but do not use anything prohibited (*Haram*).³ However, alleviating suffering must be in line with the *Shari'ah*. The increasing prevalence of extraordinary interventions for the terminally ill in Muslim societies has necessitated Muslim jurists to distinguish between actively causing death and withdrawing or withholding life sustaining treatments where qualified medical practitioners determine that recovery is medically impossible.

¹European Parliament Research Service, *Euthanasia Legislation in the EU* [https://www.europarl.europa.eu/RegData/etudes/BRIE/2025/775914/EPRS_BRI\(2025\)775914_EN.pdf](https://www.europarl.europa.eu/RegData/etudes/BRIE/2025/775914/EPRS_BRI(2025)775914_EN.pdf) accessed 6 June 2026.

² Muhammad M Khan, *Summarized Sahih Al-Bukhari: Arabic-English* (Maktaba Dar-us-Salam Publishers & Distributors 1994) 938.

³Abubakar A Al-Baihaqy, *Al-Sunan al-Sagir* (1st edn, Islamic University Pakistan 1989) vol 4 84.

It is in the light of the foregoing that this paper examines the Islamic Law perspective on human euthanasia.

Human euthanasia illustrates the intricate relationship between law, bioethics, and religion, and continues to generate significant legal, ethical, social, and practical challenges due to its apparent incompatibility with the right to life. The controversy surrounding euthanasia is further compounded by the absence of a universally accepted definition of the concept, thereby necessitating a clear distinction between the intentional termination of the life of a terminally ill patient through direct action and the withdrawal or withholding of life-support measures under Islamic law. The Western conception and application of euthanasia must therefore be examined within the framework of contemporary Islamic jurisprudence in order to determine the Islamic law perspective regarding its permissibility or otherwise. This necessity is particularly important in the reality that Muslims may encounter such situations either in jurisdictions where euthanasia has been legalized, in societies where it is practised unlawfully, or in circumstances where uncertainty exists concerning its legal status. Furthermore, Islamic bioethics continues to play a significant role in contemporary global healthcare discourse, especially in relation to end-of-life decisions such as euthanasia and more significantly, the *Shari'ah* obligation imposed upon Muslims to ascertain the lawfulness or otherwise of their actions and utterances before engaging in them. Consequently, Muslim jurists, both individually and collectively through juristic councils and Islamic legal institutions, have extensively examined the issue with the aim of providing guidance consistent with the principles and objectives of Islamic Law. It is in the light of the foregoing that this paper seeks to answer the following research questions: What is euthanasia? What are the types of euthanasia? and what is the Islamic Law perspective on euthanasia?

The aim of this paper is to examine the Islamic position on human euthanasia practices in Nigeria.

2.0 CONCEPT OF EUTHANASIA

The term “euthanasia” is derived from the Greek words ‘Eu’ and ‘Thanatos,’ which together signify a gentle and easy death. It has been defined from different perspectives namely: it is defined as the “act or practice of painlessly ending the life of an individual who is suffering from severe and incurable disease or an incapacitating physical disorder or allowing them to die by withholding

treatment or withdrawing artificial life-support measures.⁴ Euthanasia is “the intentional killing of a patient by act or omission as part of their medical treatment”.⁵ Harrap’s Dictionary of Medicine and Health defines euthanasia as:

Deliberate taking of somebody’s life when continued existence would mean further suffering. It is illegal, in any circumstances, even if the person specifically requests death. Ethical and legal questions arise, however, when a patient is allowed to die through withholding of treatment, or when there is a question over the definition of “life” in relation to the person.⁶

The above definitions clearly indicate an absence of consensus regarding the precise scope of euthanasia. While some definitions expressly include withholding or withdrawal of life-sustaining treatment within the concept of euthanasia, others confine it to the intentional termination of a patient’s life, whether through a positive act or an omission to act, regardless of whether the patient is terminally ill. Consequently, Mason and McCall Smith rightly observed that:

The subject of euthanasia is, in our opinion, clouded by uncertainties of definition. Stedman’s Medical Dictionary has two citations - a quiet, painless death and the intentional putting to death by artificial means of persons with incurable or painful disease...Collins English Dictionary confines itself to ‘the act of killing someone painlessly, especially to relieve suffering from an incurable illness’...Any useful discussion of euthanasia must accept the - admittedly unpalatable - fact that it involves some form of active killing.⁷

It is the absence of unanimity in the definition of euthanasia that complicates the various approaches and decisions relating to it, especially within the context of the *Shari’ah*.

2.1 Classification of Euthanasia

Euthanasia is classified into several categories: voluntary, involuntary, and non-voluntary and all could be achieved actively or passively hence the further division of euthanasia into active and passive forms.⁸ These classifications provide a clearer framework for understanding the subject.

⁴Encyclopaedia Britannica, *Euthanasia* <https://www.britannica.com/topic/euthanasia> accessed 10 June 2026.

⁵Daniel K Sokol and Gillian Bergson, *Medical Ethics and Law: Surviving on the Wards and Passing Exams* (Trauma Publishing 2005) 175.

⁶Arthur W Boylston and others, *Harrap’s Dictionary of Medicine and Health* (Harrap Books 1988) 147.

⁷Ahmed A Yacoub, *The Fiqh of Medicine: Responses in Islamic Jurisprudence to Developments in Medical Science* (Ta-Ha Publishers 2001) 159.

⁸D Nehra, P Kumar and S Nehra, *Euthanasia: An Understanding* https://www.researchgate.net/publication/252626984_Euthanasia_An_Understanding accessed 25 June 2026.

2.1 Voluntary Euthanasia

Voluntary euthanasia is “a death brought about by an agent *at the request of the person who dies*.”⁹ under this heading, the terminally ill makes a request to another to have his or life ended believing that death will bring an end to his suffering i.e. consent to be killed out of compassion is granted but it is mostly through the administration of overdose of substances such as morphine and if assisted by a doctor, it is known as physician assisted suicide (PAS).

2.2 Involuntary Euthanasia

Involuntary euthanasia is “the killing of someone who could consent but does not”.¹⁰ In this situation, the consent of a competent terminally ill patient is not sought but his life is terminated and hence is not different from murder.

2.3 Non-voluntary Euthanasia

This amounts to “the killing of an individual who has no capacity to understand what is involved, again out of kindness or a paternal consideration of the patient’s ‘best interests.’”¹¹ There are situations where a terminally ill patient’s life (who lacks the capacity to understand what euthanasia entails) has his life terminated on compassionate ground or in his best interest but without the patient’s consent.

2.4 Active Euthanasia

Active euthanasia is the intentional ending of one person’s life by another, motivated solely by the best interest of the person who dies, through the deliberate administration of a life-ending substance or procedure.¹² It is the intentional act of bringing about a patient’s death.

⁹(n7) 160.

¹⁰Ibid.

¹¹Ibid 172-173.

¹²Brassington Iain, 'What Passive Euthanasia Is' *BMC Medical Ethics* (2020) 21(1) <https://www.researchgate.net/publication/341389749_What_passive_euthanasia_is> accessed 11 April 2026.

2.5 Passive Euthanasia

Passive euthanasia is the intentional ending of one person's life by another, motivated solely by the best interest of the person who dies, through the deliberate withholding of a life-preserving substance or procedure.¹³ Thus when an extraordinary life sustaining measure is removed or refrained and death occurs, it amounts to passive euthanasia. The distinction between active and inactive euthanasia is that active euthanasia is carried out through an intentional act that brings about a patient's death while passive euthanasia occurs from an omission. However, the distinction on whether acting or omitting to act is a valid legal and ethical act is hotly debated and the distinction was clearly illustrated by Lord Goff in *Airedale NHS Trust v Bland*,¹⁴ who stated as follows:

The law draws a crucial distinction between cases in which a doctor decides not to provide, or to continue to provide, for his patient treatment or care which could or might prolong his life, and those in which he decides, for example by administering a lethal drug, actively to bring his patients life to an end.¹⁵

3.0 BRIEF EXPOSITION TO EUTHANASIA PRACTICES IN NIGERIA¹⁶

Nigeria has no specific legislation regulating euthanasia. The principal reference is found in Rule 67.0 of the Nigerian Code of Medical Ethics (NCME), 2008, which regulates the conduct of medical and healthcare professionals. Nevertheless, euthanasia remains illegal under the Nigerian criminal justice system as provisions under the Criminal and Penal Codes and sections 33 and 34 of the CFRN, 1999 address acts amounting to the intentional termination of human life: Under the Criminal Code euthanasia is murder while under the Penal Code, involuntary and non-voluntary euthanasia is equivalent to culpable homicide punishable with death.¹⁷

Furthermore, it is stated that:

...the current legal framework in Nigeria and the moral attitude of the nation is incompatible with the practice of euthanasia. Life is

¹³Ibid

¹⁴*Airedale NHS Trust v Bland* [1993] AC 789.

¹⁵Claudia Carr, *Unlocking Medical Law and Ethics* (Hodder Education 2012) 310.

¹⁶ Mardhiyyah Munir Ja'afar. 'Human Euthanasia: Legal and Ethical Implications under Nigerian Law' *The Nnamdi Azikiwe University Journal of Commercial and Property Law* (2026) 13(4) <<https://journals.ezenwaohaetorc.org/index.php/NAUJCPL/issue/view/309/showToc>> accessed 20 July 2026

¹⁷Ibid

constitutionally protected, and criminal law provisions as well as prevailing moral norms provide for strong support to its prohibition. However, as the nature of healthcare becomes more complex, there is an increasing need for clearer statutory guidance on palliative care and end-of-life decision-making, to ensure that uncertainty is minimised without the deprivation of the basic right to life.¹⁸

4.0 SHARI'AH PERSPECTIVE ON EUTHANASIA

Islam provides clear guidance on every matter, whether related to worship (*ibadat*) or social dealings (*Mu'amalat*). The primary and secondary sources of the *Shari'ah* help guide Muslims and prevent them from exceeding the limits set by Allah and His Messenger (SAW). The Qur'an and the *Sunnah* are the main sources, and they are the first references for any issue. If these primary sources are silent or lack clear rulings on a matter, scholars use the secondary sources through *Ijtihad*.¹⁹ Both ending the life of a terminally ill person for mercy and withdrawal of a patient from life support due to futility of medical treatment are not directly addressed in the main sources of *Shari'ah*, as this is a modern issue. Because of this, Muslim scholars (*Ulama*) and Muslim jurists (*Fuqaha*) must use *Ijtihad*, drawing from both primary and secondary sources, as well as the principles of *Maqasidush Shari'ah* and *Qawa'idul Fiqhiyyah* to arrive at legal opinion (*Fatwa*) that will guide Muslims²⁰. Consequently, *fatwa* has been issued on the different types of euthanasia and futility of medical treatment

4.1 Active Voluntary, Involuntary and Non-Voluntary Euthanasia

Two situations are contemplated while discussing active voluntary euthanasia: where the terminally ill kills himself, such as taking a lethal dose, or where he instructs a physician or anyone else to administer a dosage to end his life. For active involuntary euthanasia, the terminally ill had the capacity to consent to being killed but he did not. However, the physician ends his life. This situation is indistinguishable from the crime of killing even if the physician says he acted to put an end to the suffering and misery of the terminally ill. While active non-voluntary euthanasia is in relation to incompetent patients, their lives are ended to put an end to their suffering and misery.

¹⁸ Ibid.

¹⁹ Abdul Rashid Bhat, 'Ijtihad in Islam: An Analysis of Shah Wali-u Allah's Approach' (2012) 12 *Insight Islamicus* 51–72 <<https://islamicstudies.uok.edu.in/Files/36892408-1fed-4431-9848-0761b9e02587/Journal/f1013049-3dc1-4281-87b2-842932c3960f.pdf>> accessed 20 July 2026

²⁰ Naim Almashoori, *Islamic Legal Maxims (Qawaid Fiqhiyyah)* (SlideShare presentation) <https://www.slideshare.net/slideshow/islamic-legal-maxims-qawaid-fiqhiyyah/70592755> accessed 23 July 2026.

The explicit application and use of the above terminologies are not explicitly covered by the *Nusoos* but could be subsumed under the law of homicide as provided in the Qur'an and the *Sunnah*. Although the four most orthodox schools of Islamic jurisprudence have discussed death resulting intentionally, by mistake, by poisoning, suffocation, withholding food and water and on the request of the person killed as well as penalties under the Islamic criminal justice system,²¹ the situations are not in the context of actively or passively causing the death of a terminally ill on ground of mercy. However, reference will be made to contemporary juristic views that directly address euthanasia.

In Islam, killing oneself is regarded as suicide, and it is a forbidden act, let alone ending the life of another without a legal excuse.²² It is argued that ending the life of the terminally ill is to put an end to his suffering, and regardless of this argument, and even with the consent of the terminally ill, this remains forbidden under the Islamic criminal justice system. It is for the Giver of life to decide when, where and how, not any individual, irrespective of the consent of the terminally ill and the motive. Allah SWT has clearly made killing oneself and others illegal, as provided below:

...Do not throw yourselves into destruction...²³

...And do not kill yourselves (nor kill one another). Surely, Allah Most Merciful to you.²⁴

And whoever kills a believer intentionally, his recompense is Hell to abide therein; and the Wrath and the Curse of Allah are upon him, and a great punishment is prepared for him.²⁵

...We ordained for the Children of Israel that if anyone killed a person not in retaliation of murder, or to spread mischief in the land - it would be as if he killed all mankind, and if anyone saved a life, it would be as if he saved the life of all mankind...²⁶

The Messenger of Allah (SAW) said: "He who uses a weapon or poison to kill himself will remain eternally and perpetually in the hereafter stabbing himself and swallowing the poison".²⁷

²¹Yacoub (n 7) 176, 184-185.

²² Muhammad Taqi-ud-Din Al-Hilali and Muhammad Muhsin Khan, *Interpretation of the Meanings of The Noble Qur'an in the English Language* (Darussalam 2011) 60, 159.

²³Ibid 60.

²⁴Ibid 159.

²⁵Ibid 177.

²⁶Ibid 210.

²⁷Yacoub (n 7) 183-184.

Although the above evidence addresses both killing oneself and the unlawful killing of another individual, their cumulative effect underscores a clear prohibition of such acts. While the punishment for suicide is reserved for the Hereafter, the Qur'an expressly prescribed punishment for the unlawful killing of another person without lawful justification because it is contrary to the preservation of life (*hifdhun nafs*) under the *daruriyyatus Sitta* (the six necessities) under the fundamental objectives of Islamic Law (*Maqasidush Shari'ah*) and is therefore forbidden (*haram*).

5.0 CONTEMPORARY VIEWS ON EUTHANASIA

In global discourse on healthcare, particularly relating to end-of-life decisions, Islamic bioethics remains influential. Through collaborations with international health organisations, institutions like the Islamic Organisation for Medical Sciences (IOMS) advance the integration of Islamic ethical principles into modern day medical practice that aligns with the *Shari'ah*.²⁸ Also Muslim jurists in their individual and collective capacities have issued *Fatwa* (legal opinions) on contemporary issues that either have no clear cut rulings in the primary sources of the *Shari'ah* or are silent on. One of which is ending the life of the terminally ill on grounds of mercy, for which Muslim jurists have made a distinction between actively ending the life of the terminally ill out of mercy and situations of futility of treatment.

On active and passive euthanasia, The Islamic Organisation for Medical Sciences' (IOMS) reaffirmed the difference between active euthanasia and the withholding or withdrawal of futile treatment. Consequently, IOMS issued the following *Fatwa*:²⁹ It decisively condemned hastening the death of patients through intentional acts thus explicitly prohibiting acting euthanasia due to the sanctity of human life which prohibits suicide and assisted suicide.³⁰ On the other hand, it opines that treatment may be withheld or withdrawn in situations of medical futility provided that essential patient care, including hydration, nutrition, nursing support, and pain management are maintained.³¹

²⁸M Bayer and Maryam Ellam, 'Islamic Medical Ethics: A Legacy of Compassionate Care' (2025) 20(7) *Journal of the British Islamic Medical Association* <<https://jbima.com/article/islamic-medical-ethics-a-legacy-of-compassionate-care/>> accessed 13 January 2026.

²⁹Ayman Shabana, 'Limits to Personal Autonomy in Islamic Bioethical Deliberations on End-of-Life Issues in Light of the Debate on Euthanasia' <<https://brill.com/display/book/9789004459410/BP000021.xml>> accessed 10 March 2026.

³⁰ Ibid

³¹ Ibid

Shaykh Abdul Azeez bin Baz, has ruled that euthanasia, or mercy killing including the withdrawal of life-support apparatuses that sustain individuals suffering from incurable diseases or coma is contrary to *Shari'ah* principles due to the inviolability of human life.³² Similarly, the prominent Egyptian jurist, Yusuf Qaradawi, issued a fatwa equating euthanasia with murder, while at the same time permitting the withholding or discontinuation of medical treatment considered medically futile or non-beneficial.³³

The International Islamic Code for Medical and Health Ethics states that: Human life is regarded as sacred and may not be terminated except in circumstances expressly permitted by it should never be wasted except in the cases specified by *Shari'ah* and the law. Decisions concerning the termination of lives are not within the proper ambit of medical practice.³⁴ Thus, a physician is prohibited from intentionally causing the death of a patient regardless of such request being made by the patient or his legal representative and regardless of the existence of terminal sickness, severe congenital abnormalities or severe pain that cannot be relieved effectively through conventional means. Instead, a physician should encourage patients to remain steadfast, remind them of the Islamic Law perspective on the benefits that will accrue to those that exercise patience and perseverance and also to provide care and support. This principle is particularly needed in cases of euthanasia.

6.0 WITHHOLDING LIFE SUPPORT TREATMENT

Qaradawi commented on withholding and withdrawing of treatment and differentiates it from mercy killing as follows: “But in cases when sickness gets out of hand, and recovery happens to be tied to miracle, in addition to ever increasing pain, no one can say treatment then is obligatory or even recommended. Thus, the physician’s act of stopping medication, which happens to be of no use, in this case may be justified, as it helps in mitigating some negative effects of medications, and it enhances death. But it is different from the controversial mercy killing as it does not imply

³²Kiarash Aramesh and Shadi Heydar, 'Euthanasia: An Islamic Ethical Perspective' (2007) 6 Iran J Allergy Asthma Immunol 35 <https://www.researchgate.net/publication/228684359_Euthanasia_An_Islamic_Ethical_Perspective> accessed 4 June 2026.

³³Ibid.

³⁴ Abdul Rahman A Al-Awadi and Ahmad Rajai El-Gendy, The International Islamic Code for Medical and Health Ethics<<https://theislamicmedicine.org/wp-content/uploads/2024/08/The-International-Islamic-Code-for-Medical-and-Health-Ethics.pdf>> accessed 7 February 2026.

a positive action on the part of the physician; rather, it is some sort of leaving what is not obligatory or recommended and thus entails no responsibility”.³⁵

The Islamic *Fiqh* Council (IFC) of the Muslim World League (MWL) mentioned that it is permissible to withdraw patients from life support systems where all brain functions have ceased irreversibly ceased:

So-called mercy killing is not permissible, whether it is done by withholding treatment from the patient or by any other means. It comes under the heading of haraam killing which the Prophet (blessings and peace of Allah be upon him) regarded as one of the major sins. There are no exceptions to that except what has been mentioned above concerning one who comes under the rulings of those who have died.³⁶

The IFC of the MWL further provides that prior to the withdrawal of patients from life support systems, a committee of three specialist, trustworthy and experienced doctors must have determined that all brain functions have ceased completely and are irreversible even if breathing and blood circulation is maintained mechanically.³⁷ However, the rules that apply to the dead such as shrouding, termination of marriage contract and devolution of estate of the deceased will not apply until the terminally ill’s breathing and heart stop completely after the machine is switched off.

It is permissible and in certain circumstances recommended to discontinue medical treatment that is deemed futile by physicians such as respirators so that death can proceed in its natural course. This is for the comfort of the patient and to alleviate the family’s distress.³⁸

³⁵Akbar Shah and U Tun Aung, ‘Euthanasia from the Islamic Perspective: Ending Life of a Patient whose Recovery is Absolutely Impossible’ (2018) 17(2) *IJUM Medical Journal Malaysia* (Special Issue 2) 353–357 <<https://doi.org/10.31436/imjm.v17i2.952>> accessed 23 July 2026.

³⁶Islam Question & Answer, ‘Taking a Patient off a Respirator and the Ruling on Mercy Killing’ <<https://islamqa.info/en/answers/129041/taking-a-patient-off-a-respirator-and-the-ruling-on-mercy-killing>> accessed 2 January 2026.

³⁷ Ibid

³⁸Yousuf RM and Mohammed Fauzi AR, ‘Euthanasia and Physician-Assisted Suicide: A Review from Islamic Point of View’ *International Medical Journal Malaysia* (2012) 11(1) <<https://journals.iium.edu.my/kom/index.php/imjm/article/view/556/330>> accessed 5 June 2026.

Majma' al-Fiqh al-Islami has issued a *fatwa* on the withdrawal of life-support measures in two situations namely when either there is an irreversible cessation of cardiorespiratory functions or complete stoppage of total brain function and brain disintegration has started. Although some bodily functions continue to be maintained artificially.³⁹

This position can be clearly differentiated from the deliberate termination of the life of the terminally ill on the ground of compassion. Futility of medical treatment may happen in situations where blood circulation and respiration of patients that are terminally ill or not are sustained mechanically, and competent physicians, acting with probity, honesty and professional integrity, objectively determine that continued treatment is futile, the withdrawal of life-support machine may be justified on the basis of medical futility rather than intending to cause death out of compassion for the terminally ill.

It should however be noted that brain death should not be taken as a criterion for euthanasia because of the tendency for abuse. The lack of clarity on the meaning of brain death or brain stem death goes beyond the question of what constitutes death and “is deplorably devoid also of philosophical clarity and foundation”.⁴⁰

It can be clearly subsumed from the above that Islam forbids active euthanasia regardless of the motive while withholding or withdrawing life-sustaining treatment other than hydration, feeding is permissible. However, caution must be exercised to deter potential abuse, especially in cases involving the retrieval of organs from the terminally ill whose organs and blood supply are maintained mechanically, as the superior viability of such organs is an incentive that could compromise ethical decision making.

7.0 SHARIAH-COMPLIANT FRAMEWORK FOR REGULATION OF EUTHANASIA PRACTICE IN NIGERIA

³⁹Islam Question & Answer, 'When Is It Permissible to Turn Off the Life Support Systems of a Person Who Is Thought to Be Dead?' <<https://islamqa.info/en/answers/1824/when-is-it-permissible-to-turn-off-the-life-support-systems-of-a-person-who-is-thought-to-be-dead>> accessed 1 June 2026.

⁴⁰Josef Seifert, 'Brain Death and Euthanasia' in Michael Potts, Paul A Byrne and Richard G Nilges (eds), *Beyond Brain Death: The Case Against Brain Based Criteria for Human Death* (Philosophy and Medicine, vol 66, Springer 2000) 201–227 <https://doi.org/10.1007/0-306-46882-4_9> accessed 23 July 2026.

There is the need to put in place a framework on euthanasia that is firmly grounded in Islamic jurisprudence. It should align with the *Shari'ah* and take cognisance of the fundamental objectives of Islamic Law, especially the preservation of human life. The framework should be developed through the collaborative efforts of stakeholders such as Muslim jurists, medical and health care practitioners and representatives of bodies such as the Supreme Council for Islamic Affairs and the Islamic Medical Association of Nigeria. The framework should make a distinction between withholding or withdrawing of life-sustaining interventions on futility ground and cases of ending the life of the terminally ill due to terminal illness while also making a strong case for the establishment of hospices and palliative care homes as viable alternatives to ending the life of the terminally ill.

8.0 SUMMARY OF FINDINGS

- i. Findings reveal that the confusion about euthanasia starts from the lack of unanimity on its definition. The definition accommodates ending the life of the terminally ill and withholding life sustaining treatment or pulling the plug. Although these two results in the same outcome, the law distinguishes them in terms of their permissibility or otherwise.
- ii. Three types of euthanasia have been identified: voluntary, involuntary and non-voluntary. All the three may be carried out actively or passively.
- iii. Ending the life of the terminally ill patients on the ground of mercy is clearly forbidden in Islam while withdrawal from a life support machine is permissible provided treatment has been declared to be futile according to trustworthy medical doctors.

90 CONCLUSION AND RECOMMENDATIONS

Active voluntary, involuntary and non-voluntary euthanasia are clearly prohibited by the *Shari'ah* regardless of the supposed justification by its advocates that it is done on the grounds of mercy, the motive being to put an end to the suffering of the terminally ill. This prohibition is derived from the Qur'an, the *Sunnah*, the consensus of Islamic jurists, all of which emphasise the sanctity and preservation of life. While withdrawal or withholding of life sustaining treatment from the terminally-ill which is considered as passive euthanasia is permissible provided a committee of

three specialist, trustworthy and experienced doctors have determined that all brain functions have ceased completely and is irreversible even if breathing and blood circulation is maintained mechanically. However, the rules that apply to the dead such as shrouding, termination of marriage contract and devolution of estate of the deceased will not apply until the terminally ill's breathing and heart stop completely after the machine is switched off.

In view of the foregoing, the paper recommends thus:

- i. There is the need to put in place a clearly defined framework for Muslims on euthanasia, focusing on the differences between willful termination of the life of the terminally ill and withdrawal of the terminally ill from a life support machine, the conditions precedent to such withdrawal, who makes the decision and penalties for breach.
- ii. There is a need to clearly include the distinct definitions of the three types of euthanasia that have been identified, the means in which they can be carried out vis a vis the Islamic criminal justice system and liability.
- iii. Putting in place clearly defined penalties for terminating the life of the terminally ill will deter relatives, doctors, friends from assisting the terminally ill in dying while also providing a clearly defined protocol on withdrawal of extraordinary care from terminally ill on account of futility.