

ARUNA SHANBAUG v. UNION OF INDIA¹

The Supreme Court's landmark judgment in *Aruna Ramchandra Shanbaug v. Union of India* (2011) marked the first formal recognition of the right to die with dignity as part of the fundamental right to life under [Article 21](#) of the Indian Constitution. In this decision, the Court distinguished passive euthanasia from active euthanasia and laid down detailed guidelines for when and how passive euthanasia may be lawfully permitted in India. This ruling became the foundational precedent for recognising that the right to life also encompasses the right to avoid prolonged suffering and to refuse unnecessary medical intervention. At the same time, the judgment acknowledged the ethical and legal complexities involved, particularly the risk of misuse by relatives or caregivers, given the increased ability of modern medical science to indefinitely prolong life. Although the broader right to die was not fully accepted until 2018, the *Aruna Shanbaug* decision served as the crucial starting point for India's legal framework on passive euthanasia.

Facts of the Case

Aruna Ramchandra Shanbaug was a young nurse working at King Edward Memorial Hospital, Mumbai, when she was brutally assaulted by a hospital employee on 27 November 1973. The attack caused severe strangulation injuries, which deprived her brain of oxygen and resulted in significant and irreversible neurological damage. The next day, she was found unconscious on the hospital premises. Medical assessment revealed that the assault had left her in a state of profound and permanent cognitive impairment, ultimately placing her in what later came to be diagnosed as a Permanent Vegetative State (PVS).

For decades, Aruna remained bedridden, entirely dependent on caregivers for her survival. In 2009, 36 years after the incident, a close friend of Aruna's, Pinki Virani filed a petition under [Article 32](#) of the Constitution before the Supreme Court of India, seeking permission for the withdrawal of life support so that Aruna could be allowed to die with dignity. These circumstances formed the factual background against which the Court considered broader constitutional questions relating to passive euthanasia and the right to die with dignity. After that, the Supreme Court assigned a group of three eminent medical professionals to conduct a comprehensive examination of Aruna and provide the Court with a detailed report on her condition.

The petitioner asked the Court to direct the hospital to stop feeding Aruna Shanbaug, but the hospital reported she could accept food and showed limited responses. The Supreme Court

¹ AIR 2011 SC 1290

rejected the plea, yet the case led to a landmark ruling allowing passive euthanasia under strict safeguards, permitting withdrawal of life support in exceptional cases.

Counsel for the petitioner relied on judicial precedents to support his arguments. He cited *Vikram Deo Singh Tomar v. State of Bihar* (1988), where the Supreme Court held that the right to life includes the right to a **quality and dignified life**, consistent with human personality. He also referred to *Gian Kaur v. State of Punjab* (1996), emphasising that Article 21 encompasses the concept of **death with dignity**, particularly relevant in cases involving patients in a permanent vegetative state.

Question of Law

The writ petition filed under Article 32 raised three central issues before the Supreme Court. First, whether it is legally permissible to withdraw life-support from a patient who is in a permanent vegetative state, and under what conditions such withdrawal may be allowed. Second, the Court considered whether a patient's "living will" or advance directive, expressing their wish to refuse life-prolonging treatment should be recognised and honoured in situations where they can no longer express consent. Third, the petition questioned whether the patient's family or next of kin could lawfully request the withdrawal of life-support when the patient is incapable of making an informed decision. Collectively, these issues required the Court to balance medical ethics, individual autonomy, and constitutional protections under Article 21.

Judgement

The Supreme Court, while deciding Aruna Shanbaug's case, clearly distinguished between active and passive euthanasia. It held that **Active euthanasia** - the intentional ending of a person's life through lethal substances, is illegal in India and punishable under Sections 302, 304, and 309 of the IPC. In contrast, **Passive euthanasia** - which involves withholding or withdrawing life-sustaining treatment, may be permitted in exceptional circumstances. The court recognised the evolving medical understanding of death, expanding the definition beyond the cessation of heart and lung function to include irreversible loss of brain function. The judgment also discussed the doctrine of *parens patriae*, under which the State assumes a protective role over persons unable to safeguard their own interests, particularly those with severe disabilities.

The Court laid down a detailed procedure to ensure that passive euthanasia is not misused. It ruled that decisions on withdrawing life support must be made only by the High Court under Article 226. Upon receiving a request, the Chief Justice of the High Court must form a special bench, which will consult a medical board of three independent, expert doctors to thoroughly examine the

patient. The Court must also notify the patient's family and the State before deciding. Ultimately, the High Court must deliver a prompt, well-reasoned judgment in each case.

While rejecting the plea to stop Aruna's feeding, this landmark ruling established the legal foundation for passive euthanasia in India, allowing life support withdrawal under strict judicial supervision.

The Court observed that because Aruna Shanbaug had been in a permanent vegetative state for decades and was incapable of making decisions about her own welfare, a surrogate decision-maker was necessary. It concluded that the KEM Hospital staff, who had cared for her continuously and understood her medical needs, were the appropriate representatives to act on her behalf.