At a glance

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of Bioethics

Editors David Černý

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Sciences)

Format Peer-reviewed edited

volume

Key dates

28 Feb 2026 Extended abstracts due

30 Oct 2026 Full chapters due

30 Dec 2026 Final manuscript to Springer

Submission

Send a single PDF/DOCX with: title, 400-800 word abstract, 4-6 keywords, and a short bio.

Submit to the editors (david.cerny@ilaw.cas.cz).

Subject line: "Psychiatric Euthanasia – Chapter Proposal".

Psychiatric Euthanasia

Philosophical, Ethical, and Legal Perspectives

Psychiatric euthanasia and physician-assisted dying for persons with mental disorders has become one of the most contested frontiers in end-of-life ethics, psychiatry, and health law. We invite chapter proposals that bring conceptual clarity, normative rigor, and attention to ethical, legal and clinical realities.

Aim of the volume

This edited volume provides a systematic, international account of psychiatric euthanasia, integrating philosophical analysis, normative bioethics, comparative law, and clinical/empirical perspectives.

We invite chapters that...

- advance a clear thesis with defensible argumentation;
- engage with uncertainty, treatment resistance, capacity, and voluntariness;
- address safeguards, oversight, vulnerability, justice, and accountability.

Suggested topics (indicative)

Foundations

- conceptual distinctions; the nature of mental suffering;
- autonomy, competence/capacity, voluntariness, ambivalence.

Normative debates

- parity arguments (psychiatric vs somatic indications) and their limits;
- slippery-slope and expressivist concerns; symbolic meaning and stigma.

Law & governance

- comparative regulation and oversight (e.g., Netherlands, Belgium, Canada);
- regulatory design: safeguards, accountability, evidentiary standards.

Clinical & empirical

- irremediability, prognosis, and epistemic limits in psychiatry;
- assessing voluntariness and stability of the wish to die; distinguishing suicidality-as-symptom from a sustained request
- future directions: research priorities, policy implications, professional guidance.

Further details

Chapters may be disciplinary or interdisciplinary, but should be written in a way that is legible across fields. We encourage authors to connect normative claims with procedural, legal, and clinical realities, and to be explicit about assumptions.

Expanded list of possible angles

- "irremediability" and evidentiary thresholds in psychiatry;
- uncertainty, risk, and the ethics of prognostic judgment;
- suicide prevention and assisted dying frameworks;
- vulnerability, coercion, and structural injustice (stigma, poverty, loneliness, access to care);
- review procedures and professional accountability; second opinions and multidisciplinary panels;
- comparative analysis of statutes, guidelines, and case law; lessons for emerging jurisdictions;
- policy implications and research priorities for the next decade.

What to include in the abstract

- research question / thesis and contribution to the debate;
- brief outline (main sections or argument steps);
- method or approach (normative analysis, legal doctrine, empirical synthesis, etc.);
- short note on how the chapter speaks to an international audience.

Review and editorial process

All submitted chapters will be reviewed as part of an editor-coordinated peer-review process. Editors will work with authors to ensure terminological clarity, conceptual coherence across parts, and high scholarly standards.

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