

10 g's will kill you
by Tucker Lieberman

A roller coaster is a great escape. It is an escape on a level more fundamental even than an island vacation or a video game marathon, because a roller coaster lets you briefly escape gravity itself. The coaster accelerates, the so-called "g-force" exceeds what you are normally accustomed to on the ground, and your body parts become weightless, lifting, floating, pushing separately inside you.

A little extra g-force, briefly, is fun. Too much g-force is not a good thing. In principle, it is possible to design a roller coaster that would kill all its passengers. Julijonas Urbonas reasoned that an unusually tall and steep roller coaster, if built to include some quality upside-down time, would cause passengers to "black out" and to die of cerebral hypoxia. That means they would not get enough oxygen delivered to their brains for a period long enough to cause brain death.

One person rides at a time. Urbonas allows the rider to change their mind upon reaching the top. As he puts it, "you have a few minutes to contemplate your decision and your life in retrospect. You even find enough time to adapt to the height and get through a series of imaginary fatal falls," after which there is the choice to "press the FALL button." After that, one might hesitate to call the hypothetical rider a "person" anymore, as they are already as good as dead.

As a PhD candidate at London's Royal College of Art, Urbonas displayed a model of his lethal ride at the Science Gallery in Dublin in 2011. It was just one of his projects in what he calls "gravitational aesthetics."

Certainly there are people who wish to escape life permanently, for all sorts of reasons. Terminal illness is the reason most commonly cited in discussions about the legalization of physician-assisted euthanasia. No matter how compelling the individual's desire, however, euthanasia remains controversial on multiple grounds: the surprise that someone might prefer death over life; the fear that social institutions could allow and condone this behavior; the revulsion that a physician - who is supposed to heal people - might help someone die; the concern about the degree to which a physician could be allowed to help someone die (for example, a doctor might be allowed to prescribe and deliver medication but perhaps could require the patient to administer the medication to themselves); the minefield of establishing criteria about who has a valid reason to die; the worry that some people who are deemed eligible will feel pressured to choose death; and the inherent uncertainty and subjectivity of opinion about the least painful ways to die. It is this last concern - the method of death - that Urbonas addressed with his "Euthanasia Coaster."

The difficulty of imagining choosing euthanasia

I do not think excessively about my inevitable death. I prefer to imagine that, as I double or triple my years on Earth, my body and perhaps my mind will slow down a bit and I will gradually resign myself to the fact that my life will come to an end. One night I will have a small meal with a glass of wine and die in my sleep as I dream of running through a field of wildflowers. It will be surprising only in the

sense that I generally prefer to be suddenly distracted by someone yelling “What’s that?” and pointing out the window when a doctor must prick my finger. It will be unsurprising enough that I will have my affairs mostly in order, having fulfilled my contribution to posterity, prepared for the night to take me when it will.

This is how most people would like to go, I suppose – in their sleep – except for those who believe they’d prefer to be riddled by shrapnel on the front lines of a just war, or those who pray to be consumed in a fireball for Christ, or those who would readily deal with the devil to be able to enjoy the better part of a century of lechery until a jealous lover finally brains them with their own dentures.

It’s harder to imagine that something might go wrong that would cause me to want to hasten my death. By hastening my own death, I don’t mean refusing to take my daily medicine when I’m 95 because it tastes foul and causes more problems than it solves. I mean a more active form of euthanasia at a more startling moment, where a decision is made to significantly speed up the process of dying. This is not a possibility I consider often in great detail because I have not had to contend with serious illness or injury. The phrase “neurologically debilitating,” for example, rings with a certain poetry of detachment for me. I hear its many mysterious syllables without fully grasping the significance it could have on my life someday. It is hard for me to imagine that a day may come - tomorrow, even, were I to meet with an accident - when I might not be able to pronounce or type the words “neurologically debilitating” anymore. What, then, would I do?

If dying painlessly in my sleep at a convenient moment after a long, happy life is not an option, there might come a time when I am presented with the burden of deciding whether, when and how to end my own life. The difficulty of this decision would be compounded by my likely uncertainty about my prognosis - after all, the disease might stop progressing, my pain might go away - and it would be fraught with guilt and fear related to my awareness that a poorly chosen suicide could gratuitously hurt myself and others who care about me. I might resent being presented with the option, as if it were the choice of a gentle death to release me from my illness, and not the illness itself, that burdened me. But if I were in enough pain and if I had enough certainty about the limitations of my future, then my conviction might be clear.

Is a coaster the best way to go?

Urbonas describes euthanasia by roller coaster as “pleasing, elegant and meaningful.” This is debatable. Cerebral hypoxia - which, less exotically, is ordinarily a consequence of suffocation - can cause headache, nausea, fatigue, and difficulty with motor control and breathing. The only thing pleasing about it on this ride is that the person is supposed to be dead in less than a minute. Urbonas might find this sensation pleasing, but he is a self-professed devotee of gravitational aesthetics. As for elegance and meaning, while some might find that the Euthanasia Coaster evokes for them an amusement park ride, others might read into it a skydiving fail or even the Holocaust’s packing of people into trains to take them to their deaths.

A lethal injection may indeed be too clinical for some people’s tastes, but a roller coaster doesn’t hit everyone’s ritualistic sweet spot, either. One person might

say that, if you choose a lethal injection, at least you get to lie quietly in bed. Another might say that, with a roller coaster, at least you get to go to an amusement park. It all depends on what you're trying to escape from and what you're trying to embrace.

Reference

Julijonas Urbonas' website:

<http://www.julijonasurbonas.lt/p/euthanasia-coaster/>