Executing Timothy McVeigh

Even many of the most vociferous opponents of capital punishment were subdued in their protests when Timothy McVeigh, the Oklahoma bomber, was put to death in the early hours of 11 June in Terre Haute, Indiana. The execution, which was the first federal application of the death penalty in the United States for 38 years, was carried out painlessly and aseptically with an injection of sodium thiopental, pancuronium, and potassium chloride. It was the culmination of a drawn out process that cost more than $15m (£10.7m) in legal fees and received the maximum amount of media coverage and hype. Videotaping the execution was forbidden, but some survivors or relatives of the victims watched in person or on closed circuit television.

Although many people oppose capital punishment, repeated polls indicate that at least 65% of Americans are in favour of it. There was even greater support for the execution of Timothy McVeigh. The Chicago Tribune, among others, argued that such execution was neither vengeance nor deterrence, but punishment plain and simple, society's justifiable response to a small number of extraordinarily vicious crimes, such as genocide, mass murder, or terrorism.

State medical societies and the American Medical Association have issued clear guidelines on what doctors may or may not do (BMJ 1998;316:1394). More recently the World Medical Association went further by ruling that doctors should take no part whatsoever in executions, not even certifying death, and it was hoped that doctors would exert pressure on governments to outlaw capital punishment.

Yet in a survey of 482 American doctors last year, 74% felt that it was acceptable for doctors to certify death and 43% saw nothing wrong with injecting the drugs. The author of the survey, a doctor, was surprised and troubled by results indicating that while medical societies opposed participation in executions, individual doctors paradoxically seemed to condone it.

Also, paradoxically, the same doctors were evenly split about physician assisted suicide, with 20% unsure and many more prepared to deny their patients with painful terminal metastatic disease the same painless exit accorded to the slayer of 168 men, women, and children.