

Saving Money by Taking Lives

Two weeks ago, my 91-year-old mother-in-law died in a nursing home in Amsterdam. But although she had been suffering for nine months from a paralysis that prevented her from speaking and eventually from swallowing her food, she did not die a natural death from lack of nourishment. She died because the doctors decided that her time had come.

Even though she had never given any indication of wanting to die, the medical authorities at the Amstelhof home refused to perform a simple surgical procedure to put a nourishment tube in her stomach in order to prolong her life. They even refused to give her water intravenously. Without the benefit of widely available modern medical care, my mother-in-law expired within five days. Because she was unable to speak, the doctors at the government-financed nursing home made that decision for her.

While her case was not one of euthanasia, it clearly was a product of the "culture of euthanasia" that now abounds in Holland. Once the taboo against terminating patients dissolves, it is a short step to ending patients' lives "for their own good" with neither the patient's nor the family's consent. The point, we were told, was to save her from further pain and misery. But until the day when she could no longer swallow, she had shown a voracious appetite and a zest for life.

The real motive for the Amstelhof doctors' deadly actions, of course, was economic. Caring for old people is a significant burden on the public finances of the welfare state. Moreover, to extend life in fragile old people can be very costly. The medical authorities at the nursing home never informed us about the options for prolonging my mother-in-law's life because it was in neither their personal interest nor their country's economic interest to do so. A well-informed patient is an expensive one.

In the U.S., my dog got better treatment than this. The week before my mother-in-law died in Holland, my 13½-year-old Irish setter was stricken with kidney disease and refused to eat. The vet said the dog would die without nourishment and that the only way we might extend her life was to place a tube in her stomach or esophagus. When I winced, the vet convinced me the procedure was simple and effective. We went ahead with the operation.

Free-market opponents might say the vet pushed the tube solution only to make a handsome fee on the operation. But if this is the case, it's a blessing. The vet's economic incentives encouraged her to let me know what my options were. With that knowledge, I was free to decide. In Holland the potential for profit gouging has been removed from the health-care system. As a result, the Dutch medical community cannot make money extending life; they can only lose it.

Sadly, both my dog and my mother-in-law died within a week. But my dog died despite the doctors; my mother-in-law died because of them.

—MELVYN KRAUSS
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A Mad Scramble at 30,000 Feet

by Edward J. Lopez

Airlines have been taking it on the chin lately. Travelers are busier, delays are likelier and longer, airports are bursting at the seams, and FAA complaints have doubled. Last summer Andy Rooney stood up for all travelers on his *60 Minutes* commentary when he raged at the airlines, “we’re sick and tired and we’re not going to take it anymore!” The airlines aren’t sitting on their tail fins, either. On June 29, 1999, the industry announced its Air Traveler’s Bill of Rights, with gems such as declaring the passenger’s right to access the court system. Then in August 1999, American Airlines and United Airlines publicly apologized to passengers for severe delays at busy airports.

This is a difficult situation for the airlines because passengers are partly responsible for delays. Excess carry-on baggage, in particular, costs the airlines a lot of time and money. In December 1998, United installed baggage templates at X-ray machines to prevent passengers from carrying on bags larger than 14 inches long or 9 inches tall. American Airlines did the same thing a year later. Their thinking is that less time will be wasted scrambling for overhead bin space, which will get passengers to their seats sooner and help eliminate delayed departures. Sounds good in theory. But will it work?

A healthy dose of economic analysis

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promises an efficient solution to this problem that will suit everyone involved.

First the problem. Most people do not like to check their bags because it adds time and the risk that the airline will misdirect, damage, or lose the luggage. Airlines figured this out long ago and recognized that without some restrictions, most passengers would try to carry on all their bags. This would be a problem (not enough space) as well as a safety hazard. In response, airlines began to limit the amount of luggage passengers may carry onto the plane—typically two pieces of a certain size. These restrictions are meant not only to ensure passenger safety, but also to create an *equal* amount of carry-on space for all passengers.

Anyone who has taken a flight recently knows the system doesn’t work. Airplanes have two areas for you to place carry-on baggage: the small space beneath the seat in front of you and in the overhead bins. Most passengers prefer to put their bags overhead so they can have more legroom. People who get on the plane first tend to stow both bags up there. Soon the bins fill up and people who board the plane later cannot find overhead space. Passengers become frustrated as they scurry up and down the aisle looking for an open bin. Flight attendants get flustered and often have to gate-check extra bags. As a result, the departure is usually late by a few minutes, and if it isn’t, it’s because the airline has factored this wasted time into their schedules. In short, no one is happy.