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## Why do we treat the newborn differently?

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### Abstract

End-of-life decisions are often taken in neonatology, based on widely accepted guidelines, to avoiding futile therapies. Usually, the criteria upon which these guidelines rely are different from those used for older patients, even when patients require a guardian to decide on their behalf. Main differences are the weight of parental interests and the probabilistic base of the choice. A careful analysis of the literature found three main reasons of this difference: the obsolescence of the guidelines criteria, the difficulty to distinguish between parents' and babies' interests and the neonatologist's responsibility to prolong a life with the prospective of severe disability. In conclusion, the future guidelines for newborn end-of-life decisions should follow at least the same moral criteria used for older patients.

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