7 REASONS TO SAY 'NO' TO ASSISTED SUICIDE



EVIDENCE-BASED PRO-LIFE ARGUMENTS AGAINST ASSISTED SUICIDE



What do the words really mean?

"Assisted dying" is commonly used to describe a doctor giving a lethal drug to people so that they can take their own lives. The term "assisted dying" has been coined by those who want to make this practice legal.

"Assisted dying" and "assisted suicide" mean the same thing. The word "suicide" sounds negative and as one commentator has said: "assisted suicide proponents found that the word 'suicide' was deadly to their cause."



After 23 years of failed attempts to legalise assisted suicide in California, the words "End of Life Option" were chosen for its latest bill. This was done to make the public think positively about doctors prescribing a poisonous lethal dose so that vulnerable people can kill themselves.

Euthanasia is where the doctor, for example, injects the lethal dose into the patient.

Involuntary euthanasia refers to a situation where the patient has the capacity to give consent, but has not done so.

Non-voluntary euthanasia is when a person is unable to give consent, for example due to dementia or a coma.

 $^{{}^1}http://www.nationalreview.com/article/418623/californias-assisted-suicide-measure-would-meanfalsified-death-certificates}$

² California Senate Bill 128

1. Doctors are against assisted dying

GPs in the UK have said that they do not want assisted suicide to be made legal.

How do we know this?

In 2013 the Royal College of General Practitioners (RCGP) consulted its members throughout the UK on assisted dying.

- 77% said the RCGP should oppose a change in the law to allow assisted dying,
- 18% favoured the RCGP moving to a neutral position, and
- only 5% wanted to change the law.

The survey showed that over three quarters of UK GPs oppose assisted dying.4

GPs who responded to the consultation gave a number of reasons for their opposition to assisted dying. They said that a change in the law:

- would make patients afraid of their doctor.
- would make vulnerable patients most at risk from assisted dying. Some GPs said that they regarded protecting the vulnerable as one of their major responsibilities.
- would mean less focus on investment in palliative care.
- would become like abortion legislation, which started as something for extreme circumstances and is now effectively on demand.
- would lead to patients being pressurised into choosing death and that the "right to die" could quickly become "a duty to die".
- would make it impossible to tell the real reason why patients decided to end their lives, because illness can cause people to become depressed and frightened.

Some GPs who responded to the consultation said that they would feel forced to resign if assisted dying was made law.

³ Assisted Dying Consultation Analysis January 2014, Royal College of General Practitioners

⁴ Ibid

2. Vulnerable people will be at risk of being killed

Any bill to legalise assisted suicide will inevitably be based on the principle that some people should be given help to die. This is saying that some lives are worth less than others.

The current law of the land protects every life equally, at least after birth. Assisted dying means a two-tier system where some people can be killed or helped to die. This is wrong.

Assisted dying is not a genuine choice when:

- vulnerable people feel pressurised to choose death, or
- vulnerable people are killed without their explicit consent.

How will giving some people a choice to die put other people at risk?

Saying to elderly, vulnerable people "Would you like us to help you to die now?" immediately makes them feel that they are worthless. Offering people the choice to end their lives in this way creates pressure for them to choose death.

This is what is happening in the US where assisted suicide is legal:

- In **Washington State** in 2013, 61% of people who were killed by assisted dying said that being a burden was a key reason for choosing death.⁵
- In **Oregon** in 2013, 49% of those killed by assisted dying said that being a burden was a reason to end their lives.⁶

Could euthanasia laws lead to people being killed without giving consent at all?

Yes, they could. Holland and Belgium have legalised euthanasia.

• More than 500 people in the Netherlands are killed each year by euthanasia without their consent.⁷

⁵ 2013 Death with Dignity Act Report, Washington State Department of Health

⁶ 2013 Death with Dignity Act Report, Oregon Public Health Division

⁷ Legalising euthanasia or assisted suicide: the illusion of safeguards and controls, J Pereira, Current Oncology, 2011

• In 2013, 1.7% of all deaths in Belgium were hastened without the explicit request of the patient.⁸

The author of a 2015 report on euthanasia in Belgium, Professor Raphael Cohen-Almagor of Hull University, said: "The decision as to which life is no longer 'worth living' is not in the hands of the patient but in the hands of the doctor." 9

⁸ Recent Trends in Euthanasia and Other End-of-Life Practices in Belgium, New England Journal of Medicine, 17 March 2015

⁹ First do no harm: intentionally shortening lives of patients without their explicit request in Belgium, Raphael Cohen-Almagor, Journal of Medical Ethics, 2015

3. Assisted dying is not the answer to pain

Assisted dying is not a solution to pain. Nor should lack of pain control be used as an excuse to promote any form of euthanasia. Good palliative care should ensure that pain is controlled well. Legalising assisted dying risks less investment in palliative care.

Does saying 'no' to assisted dying mean condemning sick people to a life of severe pain and suffering?

No. Pain can be well controlled in the vast majority of cases. And besides, lack of pain control is not usually the deciding factor for those who choose assisted dying.

Again we can look to the Oregon experience where:

- 93% said that 'loss of autonomy' was a reason they wanted to die prematurely,
- 89% said that they wanted death because they couldn't take part in activities which made life enjoyable for them,
- 73% gave loss of dignity as a reason for choosing assisted dying, and
- only 23.7% of people chose to be killed because of inadequate pain control. 10

We must work to enhance life for sick, disabled and elderly people, not pass a law offering them death.

A prominent campaigner against assisted dying, Nikki Kenward, who is herself disabled, said she wants to be given "reasons to live, not reasons to die." Alison Davis (1955-2013) was a tireless fighter for the right to life of disabled people. Ms Davis was born with spina bifida. She experienced periods of pain and depression in her life and attempted suicide on several occasions. Had assisted dying been legal at that time, she said she would have been deprived of the best years of her life. During her last years she lived with constant, intense pain, but continued her witness of opposition to assisted suicide and euthanasia.

¹⁰ 2013 Death with Dignity Act Report, Oregon Public Health Division

4. Assisted dying kills those who are not dying

Recent assisted dying proposals have stipulated that assisted dying should only be offered to people with terminal illnesses who are not expected to live longer than six months. This is supposed to be a safeguard.

However in Oregon USA, where the Death with Dignity Act 1997 has this type of clause in it, it often gets ignored:

• In 2013, the Oregon Public Health Division reported one in six people killing themselves under the act did not have a terminal illness, such as cancer or heart disease.¹¹

We can also look at the Dutch experience. Both assisted suicide and euthanasia have been legal in the Netherlands since 2001. From 2008, the Dutch right-to-die association NVVE (Dutch Association for a Voluntary End to Life), has been campaigning for euthanasia for:

- people with dementia,
- people with a mental illness and
- those who are old and tired of life but not ill.

None of these categories of people have terminal conditions. Killing these people is not legal under the Dutch law.

Yet in 2013 in the Netherlands:

- 42 people with psychiatric problems were killed by euthanasia, and
- 97 people with dementia were killed. 12 13

A survey published in 2015 found the percentage of Dutch physicians who might provide euthanasia or assisted suicide in cases where:

- Patients were tired of living 27%.
- Patients had psychiatric illnesses 34%.
- Patients were in early-stage dementia 40%.
- Patients had advanced dementia 29-33%.14

¹¹ 2013 Death with Dignity Act Report, Oregon Public Health Division

 $^{^{12}\ \}underline{http://www.euthanasiecommissie.nl/overdetoetsingscommissies/jaarverslag/default.asp}$

¹³ http://alexschadenberg.blogspot.co.uk/2014/09/netherland-2013-euthanasia-report-15.html

¹⁴ http://www.ncbi.nlm.nih.gov/pubmed/25693947

5. Changing the law would lead to rising numbers of deaths

In countries where assisted dying and euthanasia have been legalised the number of people killed by these means has risen steadily.

- In the **Netherlands** there were 4,829 official cases of euthanasia in 2013, an increase of 15% on 2012. 15
- In **Oregon** the number of assisted suicide deaths rose by 430% between 1998-2013.¹⁶
- In **Belgium** the percentage of euthanasia deaths increased from 1.9% of all deaths in 2007 to 4.6% of all deaths in 2013 a 242% increase in six years. Demand for euthanasia increased between 2007-2013 along with an increased willingness among physicians to meet the requests.¹⁷
- In **Washington State** deaths by assisted suicide rose from 64 in 2009 to 159 in 2013. 18

The growth of euthanasia in Belgium has been truly alarming. Euthanasia was legalised in 2002.

- In 2003 there were 235 euthanasia deaths.
- Five years later in 2008, there were 1,133 euthanasia deaths.
- Five years after that in 2013, there were 1,807 such deaths. 19

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http://www.dutchnews.nl/news/archives/2014/09/nearly 5000 people died via eu/#sthash.g2hjbRuC.dpuf ¹⁶ 2013 Death with Dignity Act Report, Oregon Public Health Division

¹⁷ Recent trends in Euthanasia and Other End-of-Life practices in Belgium, New England Journal of Medicine, 17 March 2015

¹⁸ 2013 Death with Dignity Act Report, Washington State Department of Health

¹⁹ First do no harm: intentionally shortening lives of patients without their explicit request in Belgium, Raphael Cohen-Almagor, Journal of Medical Ethics, 2015

6. The thin end of the wedge

No matter what so-called 'safeguards' are contained in any law permitting assisted suicide, it will be the thin end of the wedge for widespread euthanasia in Britain.

Pushing the boundaries

In the near future we could see newborn babies and the over 70s targeted and mobile euthanasia teams in operation. These practices are proposed or already happening in Holland.

In his book "Do you call this a life?" Dutch journalist Gerbert van Loenen said: "Those who think that the 2001 euthanasia law put an end to the discussion on termination of life are mistaken. On the contrary, the advent of the law that allowed the killing of people in specific situations has launched numerous controversial issues."²⁰

In his book Mr van Loenen cites:

The Groningen Protocol of 2005 which are guidelines to regulate ending the lives of newborn babies who had serious disabilities or illnesses, but did not need intensive medical care.

- The 2010 initiative of Dutch pressure group 'Of One's Own Free Will' which called for an amendment to the euthanasia law to allow everyone over 70 to have the option for assisted suicide, with no requirement for illness.
- The opening of an "end-of-life clinic" in 2012 by the Dutch right-to-die group NNVE. This group also set up mobile teams which drive around the Netherlands helping people to die at home.

7. Media manipulation – and what people really think

There is a campaign by euthanasia groups to use legal cases and media stories to manipulate public opinion in favour of assisted dying. Stories about celebrities who want to have the choice to kill themselves are not a sound basis for passing a law.

Having a choice is the main reason people in the UK support the idea of a law to allow assisted dying. In a poll conducted in July 2014, 73% of people said that they agreed with assisted dying in principle.²¹

But 42% of those who agreed in principle changed their minds when they were asked to consider the following points:

- People may feel pressurised to end their lives so as not to be a burden to loved ones
- There has been a steady rise in assisted suicides in places where it is legal
- End of life care may worsen when it costs £3-4,000 per week for hospice care, but £5 for the lethal drugs
- Major disability rights groups oppose a change in the law*
- Majority of doctors oppose it including the British Medical Association and the Royal College of GPs.

^{*} Disability rights groups who do not want an assisted dying law are: Action on Elder Abuse, Mencap, Scope, Veterans Association UK, Disability Rights UK and Not Dead Yet UK.