

Conversations in Ethics:

The Ethics of Physician Assisted-Suicide

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Baptist Hospital MCVI

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and Live Webcast

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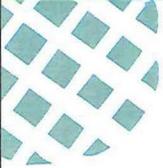
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Conversations in Ethics: The Ethics of Physician Assisted Suicide: Against Physician Assisted Suicide



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Principles of Medical Ethics



- Autonomy
- Beneficence
- Non-Maleficence
- Justice

- Values should be synthesized in medical decision making
- Autonomy is NOT absolute

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Prevention of Suffering: Palliative Care and Hospice



- Treatment of all symptoms
 - Physical
 - Psychosocial
 - Spiritual
- There is no maximum dose of medication to treat a symptom. Medication should be titrated according to patient need.

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Prevention of Suffering:
Palliative Care and Hospice 

Palliative Sedation
A medical intervention designed to produce a state of unawareness in a terminally ill patient who is experiencing unremitting symptoms that have remained unrelieved despite exhausting all reasonable efforts to effectively treat those symptoms in an interdisciplinary fashion.

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Prevention of Suffering:
Palliative Care and Hospice 

Terminally ill patients with:

- Intractable Physical Symptoms such as:
 - Pain
 - Nausea and Emesis
 - Agitation and/or Delirium
- Intractable depression or other psychological or psychiatric conditions
- Intractable existential suffering

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Judeo/Christian Religious Influences 

Judaism
Bible: The Death of King Saul: 1 Samuel 31:3-4

- Saul and the Israelite army are defeated by the Philistines
- Saul is mortally wounded
- He asks his armor bearer to kill him. The armor bearer refuses.
- Saul falls on his own sword and dies.

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Judeo/Christian Religious Influences

Judaism

Bible: The Death of King Saul: 2 Samuel 1:2-16

- An Amalekite youth tells David of Saul's death.
- Thinking that David would be pleased, he tells David that after Saul fell on his sword he was mortally wounded but did not die.
- The Amalekite quoted Saul as saying: "Stand, I pray thee, beside me, and slay me, for the agony hath taken hold of me; because my life is just yet in me (1:9).
- Even though according to the Amalekite Saul was mortally wounded, David has him executed for murdering the king

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Judeo/Christian Religious Influences

Judaism

Talmud: Avodah Zara 18a

The Execution of R Chanina ben Tradyon

- Sentenced to be burned at the stake
- Body wrapped in a Torah Scroll and in wet tufts of wool to prolong his suffering
- His students urged him to open his mouth, and allow the flames to enter his body, which would hasten his death and end his suffering.
- He refused.
- He did allow the Roman executioner to remove the tufts of wool.

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Judeo/Christian Religious Influences

Judaism

- Euthanasia and assisted suicide are forbidden
- Man's body and life are not his to give away.
- The proprietor of all human life is none other than God Himself.
- Not related directly to "Thou shalt not kill."
- Suicides are not buried in the normal fashion.

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Judeo/Christian Religious Influences

Christianity

- St. Augustine: "Thou shalt not kill" applies to suicide as well as homicide, based on the fact that the commandment does not say "your neighbor" as does the commandment against bearing false witness.
- St. Thomas Aquinas reinforced this.
- Middle Ages: suicides are not buried properly, property is confiscated and the body may be desecrated.

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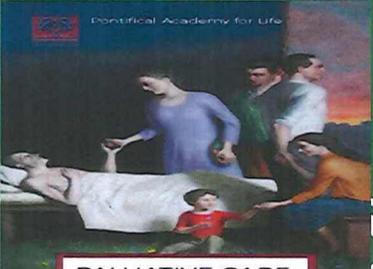
Judeo/Christian Religious Influences

Christianity

- Catholics
 - Euthanasia remains strictly forbidden.
 - God is the Master of Life.
 - Questions of moral culpability and eternal salvation are left open
- Anglicans: Opposed, assisted dying involves the responsibility of others
- Lutheran: Opposes euthanasia and assisted suicide
- Greek Orthodox: Views euthanasia and assisted suicide as a form of murder

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Pontifical Academy for Life



PALLIATIVE CARE: EVERYWHERE & BY EVERYONE

Palliative Care in every region
Palliative Care in every religion or belief
Rome February 26th - March 1st 2018
WORKSHOP PROGRAM

Historical Perspective: Nazi Germany



Hitler's Euthanasia Decree (Erlass), 9/1/39:

- Orders his personal physician Dr. Karl Brandt and Reichsleiter Philip Bouhler, "to enlarge the authority of certain physicians to be designated by name in such a manner that persons who, according to human judgment, are incurable can, upon a most careful diagnosis of their condition of sickness, be accorded a mercy death (Gradentod).

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Historical Perspective: Nazi Germany



T-4 (Tiergartenstrasse 4)

- Address of the headquarters of the euthanasia "apparatus"
- Strict Secrecy
- "Mercy killings" in nursing homes and mental institutions
- Medical experiments and mass killings of those considered a "burden to society"

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Historical Perspective: Nazi Germany



T-4 (Tiergartenstrasse 4)

Ich Klage An (I Accuse)

- 1941 Propaganda film depicting the virtues of euthanasia and assisted suicide
- Starred well known German actors and actresses
- Showed "mercy killing" from a sympathetic viewpoint, allowing the debate to be raised in the society and raising it as a legal and moral solution for the dilemma that doctors face when treating an incurably ill patient wishing for death.
- Voluntary euthanasia/suicide is seen as a "duty to the Fatherland"

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Slippery Slope: The Dutch Experience



Soylent Green

1973 film starring Charlton Heston & Edward G. Robinson

- Plot
 - Overcrowded, polluted world of 2022
 - Food in short supply
 - Soylent Green created as food substitute
 - Government sponsored "euthanasia" is encouraged as a means of population control
- "Sol Goes Home"
 - Scene depicting Edward G. Robinson's choice to submit to euthanasia

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Desensitization of Society



Star Trek: The Next Generation

"Half a Life": Season 4, Episode 22, 5/6/91

- Plot
 - David Ogden Stiers guest stars as scientist Timacin of the planet Kaelon II, who is working on a way to save his planet's dying sun.
 - The Enterprise assists him in an experiment, which fails
 - He is forced to return to his planet, where, as he has reached his 60th birthday, he is to undergo the ritual Resolution, a celebration followed by his voluntary suicide

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Desensitization of Society



Star Trek: Voyager

"Death Wish": Season 2, Episode 18, 2/19/96

- Plot
 - A renegade member of the "Q" continuum is freed by Voyager from an asteroid where he was imprisoned
 - He requests from "Q" to be made mortal so that he can commit suicide and experience death
 - During the episode "Q" and the Voyager command crew grapple with the morality of his request
 - After he is made mortal, he chooses to commit suicide, using an agent supplied by "Q"

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Desensitization of Society

Million Dollar Baby

2004 film starring Clint Eastwood, Hillary Swank, and Morgan Freeman

- Plot
 - The story of a young woman who strives to be a champion boxer, groomed by a crusty old trainer
 - She is badly injured in a bout and is irreversibly paralyzed
 - The trainer is put into the position of deciding whether or not to help her die, and although urged not to do so by a priest, ultimately assists in her death

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Slippery Slope

Slippery Slope:

“...an argument frequently invoked in the world of bioethics. It connotes the notion that a particular course of action will lead inevitably to undesirable or unintended consequences. Saying no to the original action, even if that act is moral in itself, may, in light of the slope that looms, be the ethical thing to do.”

Lerner and Caplan. Euthanasia in Belgium and the Netherlands: On a Slippery Slope? JAMA Int Med 2015;175(10):1640-1641

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Slippery Slope: The Dutch Experience

1984

- Despite being technically illegal, Netherlands Ministry of Justice and Royal Dutch Medical Association develop “non-prosecution agreement” allowing euthanasia/PAS under defined circumstances
- Guidelines were developed and endorsed by the government

1991

- 3700 physician assisted deaths between 1984 and 1991
- 2/3 of 486 cases studied met guidelines
- 1000 deaths were in incompetent patients who were not eligible according to the guidelines

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Slippery Slope: The Dutch Experience



Recent Headlines from the Netherlands

- 2015: "Doctor Sued for Saying No to Euthanasia"
- 2017: "Netherlands Clears Doctor of Wrongdoing for Ordering Family to 'Hold Down' Woman in Assisted Suicide"
- 2017: 'Dying together was their deepest wish': Couple, 91, die in rare double euthanasia
- 2017: Catholic Hospital Brothers of Charity to Face Vatican for Defiantly Granting Euthanasia to Mentally Ill
- 2018: Suicide machine draws crowds at Amsterdam funeral show

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Slippery Slope: The Dutch Experience



Completed Life Bill

- "The Dutch Parliament is currently considering revising the Netherland's euthanasia laws to allow anyone older than 75 to have the right to assisted suicide, widening the restriction which limits the practice to the terminally ill."
- The KNMG, the Dutch physician organization, has come out in opposition to this bill.

Showalter, Netherlands Clears Doctor of Wrongdoing for Ordering Family to 'Hold Down' Woman in Assisted Suicide. 2/1/17. Accessed on line on 5/8/18 at <https://www.christianpost.com/news/netherlands-clears-doctor-wrongdoing-ordering-family-hold-down-woman-assisted-suicide-173910/>

Dutch doctors reject separate euthanasia rules for 'completed lives.' 3/3/17. Accessed on 5/8/18 at <https://www.dutchnews.nl/news/2017/03/03/dutch-doctors-reject-separate-euthanasia-rules-for-completed-lives/>

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Death with Dignity

STORY OF JOHN

- 38 year old male.
- Diagnosed with AIDS.
- Bilateral amputee – learned to walk and dance.
- No wish to die.
- Kaposi's sarcoma.
- Cryptosporidiosis.
- Toxoplasmosis.

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TERMINOLOGY

- Medical aid in dying.
- Physician assisted suicide.
- Physician assisted dying.
- Physician assisted death.
- Aid in dying.
- Death with dignity.
- Right to die.
- Compassionate death.
- Compassionate dying.
- End of life choice.
- Medical assistance at the end of life.

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COUNTRIES WHERE AID IN

- Switzerland (1940)
- Colombia (1997)
- The Netherlands (2002)
- Belgium (2002)
- Luxembourg (2009)
- England and Wales (2010)
- Canada (2016)
- Australia district of Victoria (passed 2017, but in effect 2019)

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UNITED STATES

- 1997 US Supreme Court ruled (unanimously) that there is no constitutional right to assisted suicide, and that the states therefore have the right to prohibit it.
- There is an ongoing debate at a State level

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STATES WHERE DEATH WITH DIGNITY IS LEGAL

- Oregon (1997)
- Washington (2008)
- Montanan (2009)
- Vermont (2013)
- California (2016)
- Colorado (2016)
- Washington DC (2017)
- Hawaii (2018)

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HAWAII

- Death with dignity bills introduced but not heard in 1999,2000 and 2001.
- 2002- near win with 72% Hawaiian residents in favor of bill.
- 2005-2017 numerous bills passed but subsequently died.
- April 5th 2018 the Governor signed "Our Care, Our Choice Act".

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MAINE

- 2017 – 73% Mainers support legislation expanding rights of terminally ill patients.
- April 19 2018 official campaign launched to place an assisted dying measure on the 2019 statewide ballot.

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NEW YORK

- April 16 2018 coalition formed to build support among legislators for Act under consideration.
- Senator Sovino:
"There is no legislation more important in the current legislative session. Terminally ill New Yorkers want to be able to decide how they exit in this world. They want some control over what happens to them in their final moments, so they can say goodbye with humanity and compassion and dignity".

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REASONS FOR REQUEST

- Loss of autonomy.
- Loss of dignity.
- Inability to enjoy life.
- Lack of pain control.

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OREGON DEATH WITH DIGNITY ACT: ANNUAL REPORT 2017

- 218 patients received prescriptions.
- Written by 92 physicians.
- 143 people took the prescribed medications.
- 80% were older than 65.
- 76% had cancer.
- 90% were on hospice at the time of death.
- 90% died at home.

Since 998 a total of 1,967 people have received the Rx and 1,275 patients have died from ingesting the medication.

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REQUIREMENTS

- Adults over the age of 18.
- Resident of Oregon.
- Able to make and communicate healthcare decisions.
- Terminal illness that will lead to death in estimated 6 months or less.
- A request can be cancelled at any time.

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REQUIREMENTS CONT'D.....

- Physician must be licensed in the State of Oregon.
- Patient must make 2 oral requests separated by at least 15 days.
- Patient must provide a written request signed in the presence of two witnesses.
- Prescribing physician and a consulting physician must confirm the diagnosis of terminal illness and whether the patient is capable- may need to be referred to Psychiatrist or Psychologist.
- Prescribing physician must inform patient of feasible alternatives.
- Prescribing physician must request (but not require) patient to notify next of kin about the decision.

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REQUIREMENTS CONT'D.....

Reports must be sent to the Oregon Health Authority:

- Within 7 days of prescribing medication:
 - Patients written request and consent form
 - Attending physician compliance form
 - Consulting physician compliance form
 - Psychiatric physician compliance form if applicable
- Within 10 days of pharmacy dispensing the drug:
 - Pharmacy dispensing record form.
- Within 10 days of ingestion:
 - Attending physician follow up form

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BARRIERS

- Difficulty finding doctors (especially in rural areas).
- Must find 2 doctors – one who writes the prescription and one who consults.
- Difficulty finding a pharmacy that will fill the prescription APHA – have the right o conscientious objection if against moral, ethical or religious beliefs.
- Cost of medication increased 10x in recent years (\$320 in 2012, \$3,800-\$5,000 in 2017 when Valiant Pharmaceuticals acquired rights.
- Many insurance companies do not pay. Federal health plans such as Medicare and VA cannot.

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MEDICATIONS USED

- Secobarbital (Seconal)- most common. Usual therapeutic dose for insomnia 100mg. Usual doctor- prescribed suicide dosage is 9,000mg. Capsule opened and mixed with sweet substance. Given with anti-emetic.
- Phenobarbital (Nembutal). Lundbeck, owner of drug stopped selling it to US states that impose the death penalty .

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Australian Scientist -David Goodall

- 104 years old
- Failed suicide after fall.
- Flew from Australia to Switzerland with his children and grandchildren.
- Intending to die May 10.
- "I have lived too long and greatly regret having reached that age. I feel that as a citizen of Australia I should have the right to die. "

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JACK

- 92 year old professor- still writing papers and doing research at time of his diagnosis of renal cancer
- No wish to have surgery or chemotherapy.
- Stated he would go to Switzerland to die.
- Too sick. No-one to accompany him.
- Headaches, no longer able to write, incontinent, generalized pain , difficulty with gait.
- Enrolled in Hospice.
- Painful, lonely death- loss of autonomy, loss of dignity, loss of ability to have a meaningful life, lack of pain control.

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