



...the legal & ethical issues surrounding end-of-life care.

Forgoing Medical Therapy

Legal & ethical issues in withholding or withdrawing medical therapies.

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Topics in Medical Therapy: Assisted Suicide

Ethical Issues Around Assisted Suicide

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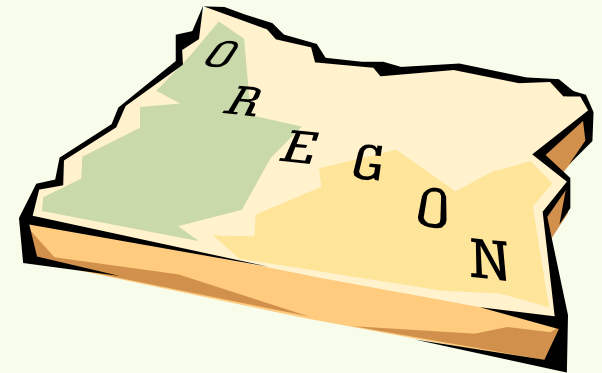
Topics in Medical Therapy: Assisted Suicide

- Assisted suicide is defined as providing a terminal patient, at their specific request, with the means to commit suicide.



Background Issues I

- Assisted suicide is illegal in every country and state with several exceptions (i.e., Oregon State).
- Assisted suicide is usually referred to as physician-assisted suicide (PAS).
- PAS currently occurs in the US, but is not openly revealed or discussed.
- Today, a majority of Americans believe that PAS should be legalized. (Only a few decades ago, few Americans were in favor of legalization.)

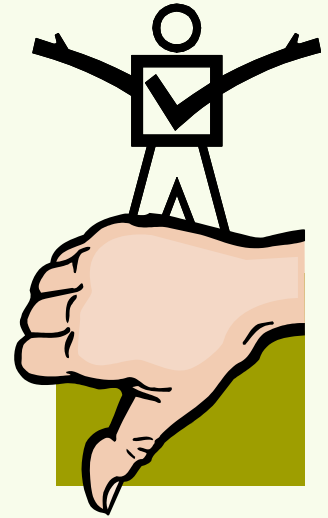


Background Issues II

- Common means for committing suicide: Overdose of legal medications.
- “Physician-assisted” highlights the role of the physician, who writes a prescription knowing that the patient intends to use it to commit suicide.
- Other participants may include: Pharmacist, hospice or home health nurse, and family and friends, who may be asked to help the patient take medication or to provide a “backup option” (e.g., plastic bag over the person’s head).
- Hence, the most active party in the act of assisted suicide, besides the dying person, is their intimate support group.

Current Legal Issues: Assisted Suicide

- Several legal battles around the world:
 - Oregon voters recently endorsed a referendum making it legal for physicians to prescribe fatal doses of medication for dying patients.
 - There are efforts to create a federal law prohibiting PAS – overriding the Oregon law.
 - PAS is illegal in Holland but the practice of is not prosecuted in the legal system.
 - Recently, a territory in Australia voted to legalize PAS, but that law is being challenged in the judicial system.



Ethical Issues: Assisted Suicide

- If PAS fails, family, or supporters may be faced with questions about whether to provide assistance using other methods.
- Concerns that dying patients will be influenced to request PAS by family or care providers (e.g., financial, caregiver burden, quality of life)
- Concerns that dying patients will request PAS due to treatable depression.
- Concerns that insurers will exert subtle pressure to encourage terminal patients to use PAS.

Arguments for Legalizing Assisted Suicide

- If assisted suicide is legalized and made reportable, it can be monitored and regulated.
- Patients who are dying, but who are not dependent on a medical therapy do not have the opportunity to hasten their dying process under similar “medical management” as patients who are dependent and have requested withdrawal of medical therapies
- There is no compelling state interest in controlling assisted suicide since it concerns persons who are expected to die in a short time.

Arguments Against Legalizing Assisted Suicide I

- Health care professionals should focus on providing excellent end-of-life palliative care to all patients instead of providing assistance with suicide.
- Physicians often don't recognize treatable depression and might be more likely to provide assistance with suicide rather than treatment for depression.



Arguments Against Legalizing Assisted Suicide II

- Advocacy groups fear:
 - disabled persons may be disproportionately seen as appropriate candidates for assisted suicide.
- Suicide is morally wrong, even in the face of overwhelming illness.
- Health care providers may have financial motivation:
 - Providers may offer assistance with suicide over more expensive palliative care.

