



# *Euthanasia Prevention Coalition*

## NEWSLETTER

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### **This Federal Election - A Call to Action!**

The Euthanasia Prevention Coalition needs your help!

We expect that another private members bill to legalize euthanasia and/or assisted suicide will be introduced in the next parliament. In the last parliament, our supporters collected this information on many members of parliament. This greatly helped our lobbying efforts during the C-384 debate, and made

them much more effective.

Bill C-384 was defeated on April 21, 2010; by a vote of 228 to 59.

This newsletter contains a questionnaire for the candidates in your riding, in both English and French. Our questionnaire has been designed in as simple as possible. Phone or visit your candidates early in the election, and obtain the answers we need. Get the candidates'

responses back to us by fax, phone, or mail. Photocopy the questionnaire if you need more copies.

We need information from as many candidates as possible. The information we receive will enable us to defeat future attempts at legalizing euthanasia and assisted suicide in Canada.

### *Celebrating our successes*

### *preparing for new challenges*

The Third-International Symposium on Euthanasia and Assisted Suicide will launch June 3, 9 AM at the Vancouver Airport Marriott Hotel. The conference ends June 4 at 5 AM.

Registration is: \$199 regular and \$149 for a student or a person with a disability. The cost for the rooms are \$139 for a regular room, \$159 for a suite. Reserve your room at: 1-877-323-8888 and state that you are attending the Euthanasia Symposium.

The Friday night banquet fee is \$50 (not included with regular registration).

The Third International Symposium will explain how groups and individuals are defeating the eutha-

nasia lobby world-wide and how we need to prepare for the new challenges we will face in the future.

The speaker for the Friday night banquet is Australian Senator Helen Polley the federal representative from Tasmania.

If you are unable to attend the Third International Symposium, please donate \$199, to enable a student or a person with a disability to attend the full event.

For more information, please go to our website at: [www.epcc.ca](http://www.epcc.ca)



### **EPC Seeks to Intervene in Rasouli Case**

The Euthanasia Prevention Coalition (EPC) is seeking intervenor status in the Rasouli case, which due to be heard before the Superior Court within the next month. EPC considers this case to be a precedent-setting case of national importance. This is a precedent-setting case that will decide whether doctors withdraw life-sustaining

medical treatment or care without consent. We have retained lawyers Hugh Scher and Mark Handelman to represent us. EPC will require significant financial support pay for the intervention.

There have been many previous cases whereby a doctor withdraws life support against the previously

expressed wishes of the person or without the consent of the substitute decision-maker. Many of these decisions are made based on futile care theory, cost containment, and "quality of life" evaluations by doctors. Some of these decisions result in a death by "slow euthanasia" (dehydration of a person who is not otherwise dying) or are based

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on negative attitudes toward people who live with disabilities or other vulnerable conditions.

The Rasouli case will determine whether doctors in Ontario are required to obtain the consent of the patient, the patient's guardian, or the Consent and Capacity board before withdrawing life support. This decision will apply to all life-sustaining interventions, including the withdrawal of hydration and nutrition.

### ***The Rasouli case***

In October 2010, Hassan Rasouli underwent surgery at the Sunnybrook Health Sciences Centre (the Hospital) in Toronto to remove a benign tumour in his head. Following the procedure, Mr. Rasouli developed bacterial meningitis and ventriculitis. The infection caused a severe and widespread brain injury as well as damage to the brainstem and the spinal cord. He has been in coma since October 16, 2010 and is on a ventilator and being fed through a tube inserted in his stomach.

Mr. Rasouli was examined on five occasions. His doctors, Dr. Brian Cuthbertson and Dr. Gordon Rubinfeld, are convinced that he is in a Persistent Vegetative State (PVS) and they decided to withdraw all treatments, including mechanical ventilation.

Parichehr Salasel, Mr. Rasouli's wife, a doctor who had practiced medicine in Iran and the substitute decision-maker, met with the physicians and discussed their proposed treatment plan (non-treatment). She refused to consent to their treatment plan.

In response, the doctors attempted without success to have Mr. Rasouli transferred to another hospital in Toronto.

Ms. Salasel applied to the court for an injunction to prevent the doctors and the Hospital from withdrawing life-sustaining treatment from her husband.

Ms. Salasel will not provide

consent to withdraw the ventilator from her husband because the action is not consistent with their religious views. As a Shia Muslim, they believe that life must be respected and upheld until all signs of life are gone.

The family also believes that Mr. Rasouli is not PVS and that he may improve. They stated that he is moving and he has some awareness of his surroundings.

The doctors state that they are not required to continue providing treatment which they believe to be of no benefit. They stated that they are obliged to refrain from continuing such treatment even if the patient or substitute decision-maker does not consent to the treatment plan. In other words, they believe that they have the right to decide when to withhold life-sustaining medical treatment or care.

Justice J. Himel heard the case on February 25, 28 and March 3, 2011. Her judgement was published on March 9, 2011. This decision is a precedent setting case concerning the question of who has the right to decide to withdraw life-sustaining medical treatment.

### ***The Rasouli Decision***

The first question Justice Himel examined was: Should the physicians have brought the proposed plan to withdraw treatment to the Consent and Capacity Board or is the Superior Court of Justice the appropriate forum to determine the case?

The doctors argued that they were not required to ask the Consent and Capacity Board for consent to withdraw treatment. They were only required to seek consent for treatment.

Justice Himel concluded that the doctors should have brought the case to the Consent and Capacity Board for a decision. She stated that:

“Treatment” under the Health Care Consent Act includes the withdrawal of life support. There-

fore doctors require consent when withdrawing life support in Ontario.

The second question was: Does the Canadian Charter of Rights and Freedoms apply to this case?

The lawyers for Mr Rasouli and his wife argued that since the Charter applies to Hospitals, because they are a publicly funded institution, that the Charter also applies to the doctors, who work in the hospitals and are paid through public funds. They argued that Mr. Rasouli's Charter rights were breached under Section 7 - rights to “life, liberty and security of the person”

Justice Himel concluded that the Charter does not apply in this case. She stated:

“I am of the view that the Canadian Charter of Rights and Freedoms does not apply to the proposed decision of the Physicians to withdraw mechanical ventilation.”

The Third question was: Is injunction relief appropriate in this case?

The lawyers for Mr. Rasouli and his wife argued that an injunction was necessary in order to prevent the doctors from withdrawing the ventilator from Mr. Rasouli without consent.

The lawyers for the doctors argued that consent was not required for the doctors to withdraw the ventilator and that no injunction could prevent them from withdrawing the ventilator.

Justice Himel concluded that an injunction was not necessary because the doctors were required to obtain consent before withdrawing the ventilator. Without consent they were obligated to seek consent through the Consent and Capacity Board. She stated:

“I have concluded that the doctors do need consent of the substitute decision-maker under the statutory scheme of the Health Care Consent Act to remove Mr. Rasouli from life support. Accordingly, no

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injunction need be granted.”

The doctors have appealed the decision of Justice Himel to the Superior Court. The doctors continue to believe that they are not required to obtain consent before withdrawing life support.

**What is at stake?**

If the doctors win the appeal at the Superior Court, then doctors will not be required to obtain consent before withdrawing life

support. The definition for life support includes providing Hydration and Nutrition (fluids and food). Therefore, they will be able to withdraw fluids and food without consent from a person who is, for example, diagnosed as PVS, but is not otherwise dying. Families of people with cognitive or other disabilities and people experiencing life threatening conditions will be unable to prevent the withdrawal of life-support, if the doctor decides to act without their consent.

Many doctors are experienc-

ing increased pressure to contain the cost of health care. There is an increasing tendency to make decisions based on a “quality of life” ideology. Considering these trends, it is essential that the Himel decision be upheld by the Superior Court.

***Please support the Euthanasia Prevention Coalition by making a generous donation today.***

## Breaking News: Idaho Rejects Assisted Suicide

Bill SB 1070, the bill that makes assisted suicide a felony in Idaho, passed is going to the Governor to be signed.

Last year, Compassion & Choices, formerly the Hemlock Society, organized a significant push to gain public support for legalizing assisted suicide in Idaho. In response to the push by the suicide lobby, on February 4, Senator Russ Fulcher introduced Senate Bill SB 1070 to clean-up the criminal code making assisted suicide a felony in Idaho.

On March 11, the Idaho Senate passed the bill by a vote of 31 to 2 and on March 27, the Idaho House passed the bill by a vote of 61 to 8.



This is a significant victory that was supported by the Idaho Medical Association. This amendment will ensure that Idaho citizens and elders are protected from assisted suicide.

## Internet Suicide Predator Found Guilty

William Francis Melchert-Dinkel has been found guilty of advising two people to commit suicide. The evidence shows that Melchert-Dinkel worked from his home in Minnesota, and used the internet to actively encourage Mark Drybrough to hang himself in Coventry, UK, in 2005. In 2008, he encouraged Nadia Kajouji to end her life in Ottawa, Canada. Both victims committed suicide within days or hours of Melchert-Dinkel's last contact.

**About The Victims**

As a young man, Mark Drybrough displayed symptoms of depression. The disease became worse at about 30 years of age,

when he had a nervous breakdown that made him unable to work. During that time, he began to meet other suicidal people on an internet chat site. For over seven weeks, Melchert-Dinkel consistently encouraged Mark to commit suicide. Mark hung himself at home on July 27 2005.

Nadia Kajouji had was in her first year at Carlton University in Ottawa. Shortly after a miscarriage, she was assailed by a deepening depression. Melchert-



Dinkel pursued her on a different chat site, and for ten days intensely urged her to follow through on her suicidal feelings. She drowned after jumping into the freezing Rideau River March 9 or 10.

Both Mark and Nadia were in contact with loving parents. Both of them were suffering from the disease of depression. Both were receiving medication and professional counselling to deal with their suicidal thoughts. After hearing Melchert-Dinkel's deceptive words, both Mark and Nadia died alone and in despair.

**About Melchert-Dinkel**

Mr. Melchert-Dinkel is a 49-year-old husband and father of

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two. In statements to police, he revealed that he:

- had been frequenting suicide chat rooms for at least three years.
- was in contact with 11 suicidal people, of whom 5 committed suicide.
- hid his identity from the victims, most often representing himself as a female nurse
- used three different web identities to camouflage his activity
- kept his activities secret from his wife
- attempted to blame his daughter for the incriminating web correspondence
- offered specific advice on hanging, his preferred method
- attempted to persuade his victims to let him watch their strangulation on web cams
- pretended to enter suicide pacts with the victims, to encourage them to kill themselves
- freely described all of this to police officers, changing his story to avoid consequences

To neither his victims nor to their grieving families did he ever display more than the briefest display of sympathy. William Melchert-Dinkel is clearly a very sick man, but a criminally competent suicide predator.

***Judge Thomas Neville's Decision***

1. Minnesota's law is valid. Suicide is not a fundamental liberty; the state has a compelling interest in preserving human life; and the law does not unduly restrict free speech.
2. Melchert-Dinkel's speech is "categorically unprotected" by the U.S. constitution. To be protected as free speech, the specific speech must be

publicly uttered, and must address an issue in the public interest. Melchert-Dinkel's communication to the victims was private, and it did not address suicide as an issue for public discussion. Instead, the speech was uttered specifically to encourage the destruction of two human beings.

3. The suicidal tendency of his victims is no defense.
4. Under Minnesota law, Melchert-Dinkel can be held responsible for intending to utter speech that would encourage the suicide of the two victims. It is not necessary for the state to prove that Melchert-Dinkel intended their deaths, or that his speech was solely responsible for their deaths.
5. Melchert-Dinkel will be sentenced on May 4.

***What This Means For Us***

Minnesota appears to have a well-framed law that may serve as a model for similar laws in other jurisdictions. There is certainly a need for such a law: Melchert-Dinkel is not the only person with a voyeuristic compulsion to watch people die. Jack Kevorkian's self-portrait is sketched with the same pencil.

Because cause-and-effect can easily straddle national boundaries, every jurisdiction has a responsibility to establish laws against the act of encouraging suicide via the internet. Nadia Kajouji was a Canadian citizen who died in Canada, yet Melchert-Dinkel was not extradited to face charges in Canada. It appears that the Ottawa police believed that Melchert-Dinkel was less likely to face justice in Canada than he was in Minnesota. The law must be amended to assure that Canada can protect people like Nadia and Mark from suicide predators from any nation with decisive strength.

## Huge victory in New Hampshire may help to defeat assisted suicide bill in Vermont.

On March 15, 2011, bill HB 513, the "Oregon Style" assisted suicide bill was massively defeated in New Hampshire by a vote of 234 to 99. This is the second year in a row that an assisted suicide bill has been soundly defeated

in New Hampshire.

After the clear defeat of the assisted suicide bill in Neighboring New Hampshire, the Vermont assisted suicide Bill H 274 appears to be stalling. Nonetheless, an identical bill was introduced in

the Vermont Senate on March 29.

True Dignity Vermont and the Vermont Alliance for Ethical Healthcare continuing their efforts to defeat the assisted suicide bill in Vermont.