

CANADIANS FACE CONTINUED EUTHANASIA THREATS IN COURTROOMS

In three Canadian courts, euthanasia continues to simmer below the media's attention. It appears that the courts in various jurisdictions are changing their schedules, so that decisions in one regional court might influence legal outcomes in other cases in Canada

The *Leblanc* Case In Quebec

The Quebec Superior Court has postponed hearing the *Leblanc* case in Quebec until after the BC Court of Appeal hears the appeal of the *Carter* decision.

Ginette Leblanc, who is living with ALS, is seeking to strike down Section 241b of the Criminal Code as unconstitutional. Her lawyer, René Duval, has set up the case to be nearly identical to the Sue Rodriguez case. The Supreme Court decided in 1993 that Sue Rodriguez, living with ALS, did not have the right to assisted suicide in Canada.

Similar to *Carter* in BC, *Leblanc* seeks to legalize a limited form of euthanasia, arguing that the plaintiff's medical condition may require another person to administer the lethal dose.

Originally scheduled to be heard in Trois-Rivières from December 11 – 14, 2012, *Leblanc* has now been postponed until after the BC Court of Appeal hears the appeal of the *Carter* decision which is scheduled for March 4 – 8, 2013. The *Leblanc* case will now be heard March 25 – 28, 2013.

The *Euthanasia Prevention Coalition* and *Vivre dans la Dignité* in Quebec were granted co-intervener standing in the *Leblanc* case. Our legal team has been informed that our factum must still be submitted in early December.

Carter Case Appealed In Bc

In her June 15 *Carter* decision, Justice Lynn Smith decided that Canada's laws protecting people from assisted suicide were unconstitutional. She ordered parliament to legalize assisted suicide and a limited form of euthanasia. In addition, she gave Gloria Taylor, one of the plaintiffs, a constitutional exemption to die by euthanasia or assisted

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ONE-SIDED EUTHANASIA REPORTS IGNORE EUTHANASIA DATA FROM BELGIUM, NETHERLANDS

By Alex Schadenberg

In the past year there have been three reports and one court cases concerning the legalization of euthanasia and/or assisted suicide in Canada and the UK. All three reports concluded that euthanasia and/or assisted suicide can be safely legalized and one of the court cases came to the same conclusion.

It has recently been reported that another study on the legalization is being prepared in Australia.

In response to these one-sided reports and the decision by Justice Smith in the *Carter* case, I decided

to research the most recent peer reviewed studies concerning the practice of euthanasia and assisted suicide in Belgium and the Netherlands. Based on this research, I wrote the book: *Exposing Vulnerable People to Euthanasia and Assisted Suicide* that is now published and available through the Euthanasia Prevention Coalition

By analysing the data from three studies on the practice of euthanasia in Belgium and the most recent study on the practice of euthanasia and assisted suicide in the Netherlands, we learn that the practice of euthanasia is often abused and the euthanasia

law is often ignored. (See *Ins!ght* for details page 2)

Royal Society Report November 2011

The Royal Society of Canada published its one-sided *End-of-Life Decision Making* panel report. They claimed that euthanasia and assisted suicide can be safely legalized, with no fear of a "slippery slope." They based their conclusions on evidence from jurisdictions where "assisted death" has been legalized. From its inception, the panel was stacked with pro-euthanasia activists.

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WHAT WE HAVE LEARNED FROM BELGIUM

Alex Schadenberg

- 32% of the euthanasia deaths are done without explicit request in the Flanders region of Belgium.
- Nurses are carrying out euthanasia deaths in Belgium, even though it is illegal for nurses to do euthanasia.
- 47% of the euthanasia deaths in the Flanders region of Belgium are not reported.
- 23% of the euthanasia deaths in the Netherlands are not reported as euthanasia.
- When a physician does report a euthanasia death as euthanasia, the physician has usually followed the rules for euthanasia that are outlined by the law.
- When a physician does not report a euthanasia death as euthanasia, that physician usually has not followed the rules that are outlined by the law.
- When physicians do not report a euthanasia death as euthanasia, their reasons include the following
 - the doctor wishes to avoid the administrative burden
 - the doctor is aware that the legal due requirements were not met
 - the doctor wishes to avoid possible legal consequences
 - often the physician never intended to report the death as euthanasia.
- When a euthanasia death is not reported in Belgium, the patient is more likely to be over the age of 80, die in a hospital, and is often incompetent to consent to the act.
- The same demographic is also over-represented when a euthanasia death is done without explicit request.
- The same demographic is also over-represented when a euthanasia death is done by a nurse in Belgium.
- Euthanasia deaths done outside the law (without explicit request, not legally reported, or done by nurses) all tend to include the same demographic group. One research paper states that his demographic group “fits the description of a ‘vulnerable’ patient group” who have died by euthanasia without request.
- Euthanasia deaths that are done by nurses in Belgium are not legal, yet these studies document that they do occur. These deaths are usually done by order of a physician, but sometimes they are done without consulting a physician. These deaths are usually done by intentional opioid overdose, even though sometimes they are done by neuromuscular relaxants.
- Nurses who reported being involved in one recent euthanasia death were far more likely to have been involved in one or more previous euthanasia deaths than other nurses.
- Male nurses were far more likely to carry out euthanasia in Belgium than female nurses.

Some Of The Studies Cited:

Physician-assisted deaths under the euthanasia law in Belgium: a population-based survey - *CMAJ* June, 2010

The role of nurses in physician-assisted deaths in Belgium - *CMAJ* June, 2010

Reporting of euthanasia in medical practice in Flanders Belgium: cross sectional analysis of reported and unreported cases - *BMJ* November, 2010

Trends in end-of-life practices before and after the enactment of the euthanasia law in the Netherlands from 1990 to 2010: a repeated cross-sectional survey - *Lancet* July 2012

NEWS FROM AROUND THE GLOBE

Vermont Governor Vows To Legalize Assisted Suicide, Again

Vermont Governor, Peter Shumlin, has stated once again that Vermont will legalize assisted suicide in the 2013 legislative session.

Shumlin, a long-time supporter of assisted suicide, received money from the assisted suicide lobby during his 2010 leadership campaign. He stated in the last two years that the Vermont legislature would legalize assisted suicide. Both attempts have failed.

The *Barre Montpelier Times Argus* reported in an article published on November 28 that:

From “death with dignity” to marijuana decriminalization, Gov. Peter Shumlin on Tuesday said he aims to seal the deal on several notable pieces of unfinished business from the last legislative biennium.

“I’m confident that regardless of who leads the various bodies in the Legislature, that we can pass decriminalization of marijuana, death with dignity and the (unionization) bill for child care workers,” he said. “We’re going to get them done.”

Key lawmakers aren’t so sure.

Sen. John Campbell, the Windsor County Democrat nominated to a second term as Senate president by his party colleagues Tuesday afternoonsaid he won’t try to squelch a vote on any end-of-life legislation. In fact, he said the topic in 2013 will receive more attention from Senate committees than it did in either of the last two sessions.

“I recognize that this issue is not going to go away, and if the majority of people want to have a debate, then that debate should happen,” he said.

At the same time *Vermont Public Radio* reported on November 26 that Shumlin is seeking to eliminate the deficit in 2013 through budget cuts but not tax increases. The report stated:

The Shumlin Administration is in the process of drafting its budget for next year and the Governor says he’s asking all agencies and departments of state government to submit a level funded spending plan for policy makers to consider.

Shumlin says the state once again faces a sizeable gap between available revenue and budget demands and he says the solution is not to increase any broad based taxes.

“We’ve got some tough fiscal times that need to be dealt with once again,” said Shumlin. “I was hoping that we wouldn’t be back here dealing with another \$50 million to \$70 million budget deficit, we are, and I’m going to be presenting a budget that’s going to ask the Legislature to once again balance the budget the old fashioned way by making tough spending choices not raising broad based taxes.”

We point out that Shumlin will be required to reduce the budget through

cuts to health care spending. In 2011, Shumlin made a similar proposal that included cuts to health care spending.

Euthanasia will certainly improve Shumlin’s bottom line.

Australia Facing New Threats To Legalize Euthanasia

The euthanasia lobby in Australia has organized a multi-tier push to legalize euthanasia. The Greens have introduced a bill in the Federal Senate that focuses on the rights of Territories, knowing that the Northern Territory may once-again legalize euthanasia, if they had the right to do so.

South Australia is facing another attempt to legalize euthanasia by stealth. A bill that would clarify rights related to “palliative care” includes fuzzy language that would allow for certain forms of euthanasia.

A report is expected to be tabled in Tasmania, very soon, that will advocate for the legalization of euthanasia.

HOPE Australia has reacted to the push to legalize euthanasia by asking people to sign the Declaration of HOPE, a declaration that opposes euthanasia and assisted suicide and supports palliative care.

Exposing Vulnerable People



to Euthanasia and Assisted Suicide

Alex Schadenberg

New EPC Publication

“Using already existing studies, Schadenberg has uncovered the shocking truth about euthanasia in Belgium, the lives lost and the deep threat to others. His work demonstrates unequivocally that we must never follow this Belgian pathway to the easy killing of people whose lives are not valued by those who do the killing.”

Kevin Fitzpatrick, Not Dead Yet, UK

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suicide. The federal Minister of Justice has appealed the *Carter* decision. On November 20, the Euthanasia Prevention Coalition (EPC) applied for intervener standing before the BC Court of Appeal.

Because many groups are seeking to intervene in the *Carter* appeal, the judge has attempted to manage the number of intervention applications. Lawyers for the Carter family, the BC Civil Liberties Association, have done everything possible to single out EPC and limit our intervention. EPC is concerned that the BCCLA may persuade the Court to eliminate our ability to emphasize the errors in fact that were made by Justice Smith.

We realize that the Crown will make these same arguments. We intend to work with the other interveners and the Crown to ensure that the appeal is properly heard by the BC Court of Appeal March 4 – 8, 2013.

Rasouli Case at Supreme Court of Canada

The *Rasouli* case, to be heard by the Supreme Court on December 10, 2012, will decide whether doctors have the unilateral right to withdraw life-sustaining treatment with-

out the consent of the patient or the substitute decision maker. EPC has intervener standing at the Supreme Court in the *Rasouli* case. We previously intervened before the three judge panel at the Ontario Court of Appeal, helping obtain a unanimous decision that doctors must obtain consent before withdrawing life-sustaining treatment such as a ventilator, hydration and nutrition, or even antibiotics.

The case concerns Hassan Rasouli, a man who was declared to be in a Persistent Vegetative State (PVS) after he experienced brain damage from an infection after an operation. The “doctors” are arguing that only they can determine when life-sustaining medical treatment is futile. When they deem care is futile, they argue that they are not required to continue treatment.

The doctors originally based their case on their diagnosis of PVS. Mr. Rasouli has recently been diagnosed as having some level of cognitive ability.

EPC is concerned about the power that the “doctors” are demanding, especially as both the Quebec government and the *Carter* decision compare euthanasia and assisted suicide to medical treatment.

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UK Falconer Report January 2012

The *Commission on Assisted Dying* in the UK published its one-sided report calling for the legalization of assisted suicide in the UK. Also known as *The Falconer Commission Report*, it was funded by euthanasia activist Terry Pratchett and the assisted suicide lobby in the UK and chaired by Lord Falconer, a long-time promoter of legalizing assisted suicide.

QC Dying with Dignity Report March 2012

The Quebec government *Dying with Dignity* report recommended legalization of euthanasia in Quebec.

The report stated that Quebec could safely legalize euthanasia as a medical act, similar to the Belgium euthanasia law. From the outset, members of the committee advocated for Belgium style euthanasia.

BC Carter Decision June 2012

Justice Lynn Smith decided in the *Carter* case in British Columbia to strike down Canada’s assisted suicide law and to order parliament to legalize euthanasia. Smith stated that “assisted death” could be safely legalized in Canada and that there are no signs of a “slippery slope” in jurisdictions where it is legal.

The reports that were published by

the *Royal Society of Canada*, the *Commission on Dying* in the UK and the *Quebec Dying With Dignity Report* are one-sided reports that appear to have ignored the data from Belgium and the Netherlands that prove that vulnerable patient groups are dying by euthanasia without request and that doctors are abusing the law and covering it up by not reporting the death as euthanasia.

The decision by Justice Smith in the *Carter* case was heavily based on the *Royal Society of Canada* report and should be overturned for its lack of objectivity.