

Petition and Letter Writing Campaign

The petition, letter writing and email campaign organized to uphold our current assisted suicide prohibition has been very successful.

Our petition campaign collected almost 15,000 signatures. Our letter writing and email campaign was successful. We received a call from a researcher stating that he received information through Access to Information revealing that our letters and emails to the Justice Minister greatly outnumbered the pro-assisted suicide letters and emails.

The Euthanasia Prevention Coalition would like to thank all of you who responded to our request and sent letters, emails or circulated our petition. The petition will be presented in Parliament by Liberal MP Pat O'Brien.

Euthanasia Kits Available at Belgium Pharmacies

Brussels AFP - Sunday, April 17, 2005 (edited)

Family doctors who wish to carry out euthanasia at a patient's home can now procure a "kit" containing the necessary materials at 250 pharmacies throughout Belgium, media reported.

The general practitioners will have to order the kit themselves and pick it up in person 24 hours later, according to the television channel RTI-TVi.

Doctors in Belgium have complained of difficulties in practicing home euthanasia in suitable conditions due to a lack of knowledge about products, doses or procedures.

Euthanasia is carried out in the home in 40 percent of reported cases in Belgium

The kit costs 60 euros and has been available at the Multipharma high-street chain store chemist since last Friday, according to the national daily newspaper Le Soir.

In September 2002 Belgium partially decriminalized euthanasia.

Euthanasia Poll shows interesting results

The Euthanasia Prevention Coalition was involved with producing a comprehensive poll concerning euthanasia and assisted suicide. The poll involved 1122 participants who are involved in an online survey company.

Dr. Will Johnston, President of the Euthanasia Prevention Coalition of BC expressed an interest in determining the effect on the Canadian public of the acquittal of Evelyn Martens. (See Newsletter #49)

Alex Schadenberg was concerned about the effect of the media promotion of assisted suicide in relation to Justice Minister Irwin Cotler's comments on establishing a committee to investigate the issues of euthanasia and assisted suicide. We also wanted to accurately access the level of support and opposition to "Mercy Killing."

The poll produced some very interesting results:

- 77% believed that vulnerable Canadians might be euthanised without consent, even with safeguards in place.
- 75% believe that recent assisted suicide cases are not reason enough to change the current law.
- 69% agreed that the law should discourage suicide by restricting the promotion of devices and methods.
- 67% agreed that legalizing assisted suicide would increase the suicide rate.
- 54% believe that guaranteeing pain control and good hospice care is a higher priority than legalizing euthanasia or assisted suicide.
- 69% are more concerned about protecting vulnerable Canadians than legalizing assisted suicide with 16% undecided.
- 45% believed that euthanasia should be legalized with 39% opposed and 16% undecided.

The poll shows that Canadians are clearly divided on the issues of euthanasia and assisted suicide. We used an online survey because it allowed us to ask more questions and the person being surveyed has more options.

The poll results are encouraging because they confirm that there is no consensus to change the law and Canadians want good care provided for people who are vulnerable or dying.

Abuse by Care-givers is Getting More Attention

By: Helen Henderson, Toronto Star, April 22, 2005

In the brilliant Australian film *Dance Me To My Song*, an abusive, self-absorbed personal care worker named Madelaine treats her client, Julia, who has cerebral palsy, like a sack of flour.

Madelaine slings Julia around, abandons her in the shower, then uses Julia's voice synthesizer to give a glowing report about herself to the agency that employs her.

She mimics Julia's laboured breathing and constantly refers to her as an expletive-deleted "spastic."

If her job conflicts with her social life, Madelaine may bring a date to work with her, then force Julia to watch while they have sex.

The story of how Julia triumphs over Madelaine is a testament to the film's star and creator, Heather Rose, who has cerebral palsy.

It's also a graphic example of how vulnerable people with disabilities are.

"Nobody should be afraid to bring forward complaints," says Jerry Lucas, vice-president of program development at the Ontario March of Dimes, a major supplier of personal care services.

But getting justice is not simple.

"It's really important to document incidents," says Lana

Kerzner, a lawyer with ARCH, a Toronto legal resource centre for people with disabilities.

Kerzner, who recently attended a California conference on abusive care-givers, says the subject is slowly getting the recognition it deserves.

Still, she says, few lawyers really understand the issue and turning to the law involves a lengthy public process that carries its own risks for people who are already vulnerable.

The hard truth is that any formal complaint process takes time.

In the interim, advocates suggest the best form of protection may come not from the health care system or the justice system but from ordinary people who make up neighbourhoods.

They advise forming circles of care — strong, community-based groups of people who watch out for each other, phoning, visiting and keeping an eye open.

Living independently in the community involves risks, says Sandra Carpenter of the Centre for Independent Living in Toronto. But "it's a myth that institutions are safer," she says.

"Violence and abuse are crimes of opportunity. In institutions we are sitting ducks."

Elder Abuse, Euthanasia and Assisted Suicide: Must We Consider the Link?

Phil Prins who has been employed in the field of labour relations for 15 years has completed a paper on the issue of Elder Abuse and abuse of the vulnerable.

His focus was on the attitudes that lead to the acts of abuse. Phil asks the question: Since elder abuse and abuse of vulnerable persons has become so prevalent in our society, would legalizing euthanasia or assisted suicide lead to death becoming the ultimate form of abuse.

The answer to the question isn't self-evident.

Phil analyses the current legal and social culture in Canada in relation to elder abuse. He studied government and private reports on the incidence and nature of abuse. Incidents of assisted suicide in the State of Oregon and

incidents of euthanasia in the Netherlands are discussed. Books written by advocates of legalizing assisted suicide are studied.

Phil then points out the "disarming connections" between elder abuse and assisted suicide.

These connections are not only based on individual cases but also on the attitudes that are clearly evident in places where euthanasia or assisted suicide is accepted.

To purchase a copy of this report, **send a donation of \$15.00** to the Euthanasia Prevention Coalition and indicate that you want the Elder Abuse report.

Jury Left to Weigh Story in Assisted Suicide Trial

by Maria Kubacki, The Ottawa Citizen, April 28, 2005

Is Steve Cyr telling the truth when he says he was so intoxicated he doesn't remember anything other than "flashes" of the weekend he survived an alleged suicide pact with his common-law wife, Sylvie Lamoine?

Or are there inconsistencies and contradictions in testimony the jury heard that call his credibility into question?

As the Crown and the defence made closing arguments yesterday at the trial of the 37-year-old Outaouais truck driver, the jury was left to ponder whether someone who consumed as much cocaine and alcohol as Mr. Cyr says he did that weekend was capable of consciously committing the crime of which he is accused — assisting or encouraging Ms. Lemoine to commit suicide August 26, 2002, at their home in the rural community of Waltham in the Pontiac region.

In earlier testimony the court heard Ms Lemoine died of carbon monoxide poisoning in the cab of a pickup truck in the garage of the couple's home. A hose had been taped to the exhaust pipe and fed through a rear window. The passenger door had been sealed with duct tape while the driver's side was not.

Although a suicide letter signed by Mr. Cyr declared he and Ms. Lemoine had undertaken a "love pact" and wanted to die together because their addiction to freebasing drugs made them unfit to care for her children, only Ms. Lemoine died.

Mr. Cyr testified Monday that after several days of freebasing cocaine with Ms. Lemoine, he woke in bed alone around one in the morning on August 26, 2002, searched for Ms. Lemoine and was shocked to find her dead in the truck. He told court he did not remember what happened. He also testified he had never been suicidal.

Mr. Cyr is only the fourth person charged under Section 241 of the Criminal Code, which prohibits counselling another

person about suicide, encouraging them to commit suicide or helping them to commit suicide. If convicted he faces a maximum of 14 years in prison.

Mr. Cyr's lawyer, Perre Gagnon, asked the jury to reflect on the testimony of witnesses who confirmed Mr. Cyr's version of events — including his assertion that he freebased large quantities of cocaine with Ms. Lemoine that weekend and that he was shocked to find her dead.

Mr. Gagnon reminded the jury that several witnesses, including Mr. Cyr's friends, Manon Crete and Francois Fortin described the accused as being in a state of shock after he found Ms. Lemoine's body. Ms Crete told the court Mr. Cyr was very pale, "like a ghost," when he arrived at their house after finding Ms. Lemoine, and that he had been crying.

Crown prosecutor Pierre Desrosiers drew the jury's attention to apparent contradictions and inconsistencies in Mr. Cyr's story.

Mr. Cyr told the jury he sold his boat to buy more cocaine Saturday, but in a videotaped police interrogation that took place two weeks after Ms. Lemoine's death, he said it was Sunday. He also told the court he didn't remember selling the boat, that he was relying on what others had told him after the fact — although, Mr. Desrosiers, pointed out, a letter signed by Mr. Cyr and addressed to his ex-wife makes reference to selling the boat.

The jury was also reminded that after Ms. Lemoine was found dead, Mr. Cyr told several people the truck was turned off and it must have run out of gas. In fact, police were able to start the truck and found there was some gas left.

The judge will give instructions to the jury on May 2.

Current cases of Euthanasia and Assisted Suicide in Canada

The Cyr case that was heard in Outaouais Quebec is of interest to the Euthanasia Prevention Coalition based on how Section 241 of the criminal code is applied.

This is not a case of "mercy killing." But if he is found guilty, the sentence for Mr. Cyr will affect how Canada's assisted suicide law is applied.

There are two other cases of concern to the Euthanasia Prevention Coalition.

David Carmichael of Toronto was charged with first-degree murder in the death of his 11 year old son Ian. Ian is alleged to have been diagnosed with a brain tumor. His trial is likely to begin in September 2005 in London Ontario.

Marielle Houle was charged with aiding the suicide death of her son Charles Fariala. Her preliminary hearing is likely to begin on October 5, 2005 in Montreal.

Half of Infant Deaths in Flanders were Euthanasia

By David Rennie, Telegraph Group in Brussels, April 10, 2005

Nearly half the newborn babies who died in Flanders over a recent year-long period were helped to die by their doctors, a new study reported yesterday.

Paediatricians in the Dutch-speaking region of Belgium either discreetly stopped treating the babies or, in 17 cases, illegally killed them with lethal doses of painkillers.

The study, published in *The Lancet*, examined the deaths of every baby who died within a year of birth in Flanders between August 1999 and July 2000.

The results of a survey on the causes of death were stark: paediatricians who responded to the survey admitted they had taken "end of life" decisions in more than half the cases.

Most commonly, that involved withholding or withdrawing treatment because physicians believed the baby had no real chance of survival or the baby had no chance of a "bearable future".

In 40 cases, opiate pain killers were used in doses with a potentially life-shortening affect. In 17 cases, a lethal dose or lethal drugs were administered.

Overall, the research yielded information on 253 out of the total of 298 infant deaths in the region over the period. The lethal doses of painkillers, which broke Belgian law, were mainly administered to babies less than a week old.

Most were premature babies with severe congenital malformations or handicaps and what was described as a poor quality of life, or very premature babies with severe brain damage.

Four fifths of the doctors who completed an "attitudinal survey" agreed that "the task of the physician sometimes involves the prevention of unnecessary suffering by hastening death".

The report went further than any other study in exposing the degree to which infant euthanasia has become commonplace in

the most liberal regions of northern Europe.

In 2002, Belgium legalised euthanasia for adults who are suffering "constant and unbearable physical or psychological pain", and who are sufficiently conscious to make the request to die. Holland passed a similar law in 1995. In neither country is it legal to put infants to death.

But doctors in Holland have led a public campaign in recent years to have the law changed to reflect what they call the reality that paediatricians routinely assist children to die.

Not all Belgian paediatricians support a change in the law. Dr Gunnar Naulaers, a neonatologist at the Catholic University Hospital in Leuven, told *The Telegraph* that his colleagues arguably hastened deaths, but only as a side-effect of easing severe pain in critically ill infants.

He said decisions to withhold or withdraw intensive care when an infant's prognosis was "hopeless" happened all over the world, including Britain.

"In this unit, we increase doses until babies are comfortable, and of course at the end of life, higher doses are needed. . . that in healthy babies would be lethal."

It was vital to secure parents' agreement and to let them know when the end was near, Dr Naulaers said. "It's very important the parents should be left with the baby when he's dying, for their sake later."

Some Belgian doctors wanted laws to regulate euthanasia.

"We are a bit frightened about making a law. Where do you put your lines?" Dr Naulaers asked, listing potential pitfalls. "What is a very handicapped baby, and who decides? If you say the parents, what if they are divorced? The patient cannot decide. It is a baby."

Council of Europe: Social Health and Family Affairs Committee rejects Euthanasia Resolution

In our last newsletter we reported that a committee of the Council of Europe was considering changing its position by supporting the legalization of euthanasia throughout Europe.

The resolution "*Assistance to patients at the end of life*" was presented by representative Dick Marty from Switzerland.

In our last newsletter the Euthanasia Prevention Coalition referred to this report as a one-sided report.

The report was rejected by a vote of 138 to 26.

Bishop Elio Sgreccia, president of the Pontifical Academy for Life stated: "It means that there are still forces in Europe that respect and want the life of the seriously ill patient respected, in the final stage."

Dick Marty expressed the hope that the assembly would return to the issue in the future.