

THE SUPREME COURT OF CANADA WAS WRONG ON ASSISTED DEATH

For several years the Oregon suicide stats seemed to indicate that legalizing assisted suicide had a suicide contagion effect.

The assisted suicide lobby argue that legalizing assisted suicide prevents desperate people from dying by suicide and they argue that legalizing assisted suicide enables people to live longer because they do not need to die earlier by suicide in order to be capable of causing their own death. The second argument was wrongly accepted by the Supreme Court of Canada in the Carter decision.



The data is clear. A study published by the Southern Medical Association (October 10, 2015) concludes:

Legalizing PAS has been associated with an increased rate of total suicides relative to other states and no decrease in nonassisted suicides. This suggests either that PAS does not inhibit (nor acts as an alternative to) nonassisted suicide, or that it acts in this way in some individuals but is associated with an increased inclination to suicide in other individuals.

The study examined the suicide rates in Oregon, Washington State, Montana and Vermont, where assisted suicide is permitted. After taking into account factors that are known to effect suicide rates, the data indicates that:

PAS is associated with an 8.9% increase in total suicide rates (including assisted suicides), an effect that is strongly statistically significant (95% confidence interval [CI] 6.6%Y11.2%). Once we control for a range of demographic and socioeconomic factors, PAS is estimated to increase rates by 11.79% (95% CI 9.3%Y14.1%). When we include state-specific time trends, the estimated increase is 6.3% (95% CI 2.7%Y9.9%).

Therefore legalizing assisted suicide is associated with at least a 6.3% increase in the rate of suicide deaths.

The other assertion is that legalizing assisted suicide

enables people to live longer because they do not need to die earlier based on being able to commit suicide.

The Supreme Court of Canada agreed with this assertion:

In 2014, “Evidence of premature death,” resulting from the lack of access to PAS, was presented before the Supreme Court of Canada.

In February 2015, the court concluded that “the prohibition deprives some individuals of life.”

The study found no evidence that people delay death when assisted suicide is legal:

The evidence from suicide rates in states that have legalized PAS is not consistent with Posner’s conjecture that such legal changes would lead to delays and net reductions in suicide. Rather, the introduction of PAS seemingly induces more self-inflicted deaths than it inhibits. Furthermore, although a significant proportion of non-assisted suicides involve chronic or terminal illness, especially in those older than age 65, the available evidence does not support the conjecture that legalizing assisted suicide would lead to a reduction in non-assisted suicides. This suggests either that PAS does not inhibit (nor acts as an alternative to) non-assisted suicide or that it acts in this way in some individuals but is associated with an increased inclination to suicide in others.

Therefore, the Supreme Court of Canada was wrong when it asserted that prohibiting assisted death was an infringement of Section 7 of the Charter, the right to life. The data does not uphold this dangerous and irresponsible conclusion.

Canada’s parliament will need to respond by either using the Notwithstanding Clause (Section 33 of the Constitution) to put aside the Supreme Court’s decision or to protect Canadians with robust legislation that prohibits euthanasia and assisted suicide.

EUTHANASIA BULLIES FLEX THEIR MUSCLES WITH A WINNER-TAKES-ALL MENTALITY

By Will Johnston, Chair of the EPC-BC.



Dr. Will Johnston

I am a family physician. From my point of view, the Canadian medical system is, for at least a few more months, a safe space free of assisted suicide and euthanasia. As much as possible of it needs to be preserved in safety. The general public is not served by ideologues who want it all the other way.

For instance, the palliative care centres in Quebec refuse to have anything to do with euthanasia, for reasons of medical judgment and ethics. This has apparently angered Jean-Pierre Menard, the lawyer who helped write Quebec’s euthanasia law, Bill 52, the End-of-life Care Act. The Act specifically states that palliative care centres are not required to provide euthanasia – but maybe to Menard those were just soothing words to get Bill 52 passed. Now Menard says money should be taken away from palliative services that won’t provide euthanasia on their premises. And the Minister of Health, Gaetan Barrette, threatened to revoke the hospital privileges of doctors who won’t comply.

This is wrong. The doctors and nurses who devote themselves to the care of dying people reject euthanasia because it is a tempting substitute for diligence and creativity. People with exceptionally difficult end-of-life illnesses can have reversible palliative sedation, not intended to kill, for complete symptom relief. This makes intentional killing of the patient an unnecessary and dangerous intrusion. Intentional killing is quick and it is irreversible.

Quebec’s hospice workers are wary of the risks and harms, which include causing distress among many dying patients and their family members who want safe spaces with no risk of interaction with euthanasia minded doctors or nurses. (The broadly worded law would seem to allow for people with disabilities or depression, who are not dying, to be killed as well, but these people are living in the community, not in palliative care centres.)

So why the temper tantrum from the euthanasia enthusiasts who designed Bill 52? We are seeing a winner-takes-all mentality among the activists who recently celebrated the Supreme Court’s *Carter* decision legalizing assisted suicide and possibly euthanasia. These activists are far from planning a peaceful coexistence with those many doctors and nurses who want nothing to do with killing or suicide. After years of agitation by publicly funded activist Jocelyn

Downie, an assault on the objectors’ rights to exist as doctors and nurses in the Canadian healthcare system is underway. Downie and others claim that unless their version of medical ethics reigns, patient choice to undergo euthanasia and assisted suicide is threatened.

Assisted suicide and euthanasia are being re-imagined as a triumph of autonomy, with the euphemism “medical aid in dying” serving as the lipstick on the pig. This conveniently overlooks all the lost autonomy of patients who do not want officially available suicide pills and lethal injections added to the attitude hazards in their hospital, and the demoralization of doctors and nurses who are being told to do what they think is wrong because tax dollars pay for the buildings. Downie and company also overlook the years of autonomy lost by those dead patients steered to suicide by its celebrated availability, and send up trial balloons about euthanasia of people with cognitive disabilities who are not able to volunteer for it.

It is alarming to see an activist assault on medical judgment inside Quebecois politics, but truly dangerous when officials in the provincial Colleges of Physicians and Surgeons buy in. Using bits of Downie’s preferred “model conscience policy” word-for-word, the College in Saskatchewan has been angling to coerce its members to refer for assisted suicide and euthanasia in the way that Ontario’s College did a few months ago. This arm-twisting is notable for its pointlessness. In our totally connected world, suicidal people and others under their direction will have no more trouble contacting euthanasia providers than ordering pizza.



With a little creativity and a spirit of fairness, it would be easy to design a system that allows legal but unsavory practices like euthanasia without bullying those who want to continue unmolested in providing actual medical care. Our hospitals and hospices are national treasures which are awaiting invasion by bitterly contentious new practices. This is faced with deep foreboding by many of us. The activists who want to rule, not coexist, are a threat to us all.

JUDGE UPHOLDS TENNESSEE'S ASSISTED SUICIDE LAW

A Tennessee judge upheld the state law protecting people from assisted suicide.

Chancellor Carol McCoy, ruled that former Democrat politician, John Jay Hooker, does not have standing to bring action and challenge Tennessee's assisted suicide law.

The Tennessean reported McCoy as saying:

"The aid-in-dying prescription involves a script for a lethal dose of medication to cause quick death, not to provide palliative care to relieve physical pain and discomfort, as is allowed,"

"If the physicians intend to provide lethal drugs to end their patients' lives, they engage in criminal conduct."



According to *The Tennessean*, Hooker will continue lobbying for assisted suicide.

Last week, Hooker appeared in a wheelchair before the Davidson County Grand Jury. He presented his case, and asked the Grand Jury to request the state legislature to support his request to end his life with the help of a willing doctor.

The jury issued its report earlier this week. It showed support for aid-in-dying legislation.

"This Grand Jury overwhelmingly supports Mr. Hooker's desire to have the laws of Tennessee amended to permit a severely ill patient to have option to end his or her life, thus ending all the pain and suffering for the patient and his or her family," the report reads.

Hooker said that he has forwarded the Grand Jury's report to the members of the Tennessee General Assembly.

In the past year, the *New Mexico Court of Appeal* and two *California judges* have upheld laws that protect people from assisted suicide.

CALIFORNIA SENIORS' GROUP FILE PAPERS TO CHALLENGE ASSISTED SUICIDE LAW

A California group called Seniors Against Suicide, who opposed the California assisted suicide bill that was signed into law by Governor Brown on October 5, filed papers with the California Attorney General's office to put the issue of assisted suicide on the State ballot in 2016, as reported by the *Associated Press*.



According to the *LA Times*, a letter from clinical psychologist, Dr Mark Hoffman stated:

"Illness is never a reason for ending a life,"

He said that he is:

"working with other opponents of medically killing depressed and ill patients."

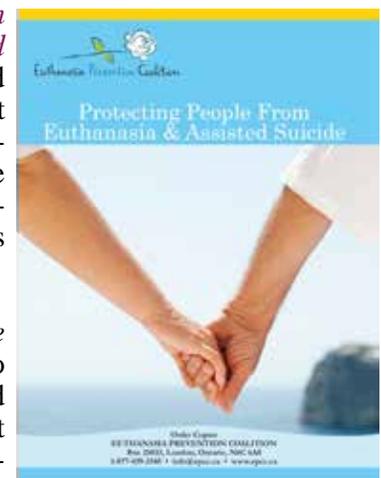
According to California law, opponents of legislation have 90 days (January 3, 2016) to collect 365,880 signatures to place the issue on the 2016 ballot.

PROTECTING PEOPLE PAMPHLETS

The *Protecting People from Euthanasia and Assisted Suicide* pamphlet is updated based on the Supreme Court of Canada's decision and references new studies on the abuses of euthanasia and assisted suicide in jurisdictions where they are legal.

The *Protecting People* pamphlet is designed to counter the false ideas and the intentional confusion that surround the issues of euthanasia and assisted suicide.

The *Protecting People* pamphlet can be ordered for \$25 for 100 copies or \$100 for 500 copies (plus postage).



ASSISTED SUICIDE AND EUTHANASIA: POLITICAL PARTIES ARE FLEEING THEIR RESPONSIBILITIES

The election campaign is moving ahead and politicians are firing out their promises. Yet despite their life or death implication for all Canadians, the issues of assisted suicide and euthanasia remain taboo! The next government will have as a first duty the enormous responsibility of passing a law to regulate assisted suicide in time for the Supreme Court's February 6, 2016 deadline.



Dignity are adding their voice to those calling for a clear position with firm commitments from all political parties before the end of the election campaign so that Canadians can make an informed choice.

Together, we ask that all political parties publicly commit themselves to enact legislation and implement regulations which:

Moreover, the aggressive reaction of Quebec's politicians against palliative care professionals who refuse to kill people under their care announces a serious danger for all of Canada. This attack on freedom strongly suggests that the "right to die" will inevitably become an obligation to kill if we do not take all legislative precautions to avoid it.

We recognize that the wording of laws and regulations will either enable or discourage misuse of assisted suicide or euthanasia. However, it is well known that no safeguards can entirely prevent the deaths of ineligible and non-consenting people. The data from a recent study in Belgium, where euthanasia is legal, found that 1.7% of all deaths were intentionally hastened without request and people with depression and cognitive disorders are dying by euthanasia. The new Canadian government must use all means available to prevent such tragedies.

Faced with the silence of the political parties, the Physicians' Alliance against Euthanasia, the Euthanasia Prevention Coalition (EPC), the EPC - BC, and Living with

- protect vulnerable citizens from inducement to suicide, including people with physical and intellectual disabilities, those with mental illness, loss of autonomy or advanced chronic disease, and those at the end of life;
- improve the quality and accessibility of palliative care for all Canadians, for there is no true free and informed consent to death if the patient is not aware of, or has no access to, the alternatives;
- uphold freedom of conscience for caregivers in all health care environments by preventing any form of coercion and pressure to participate in the killing of persons under their care.

It would be a serious injustice to Canadians to leave unaddressed such fundamental issues for the future of our society. Canadians have the right to know how our elderly, disabled and terminally ill citizens will be treated after the federal election of October 19.

EPC NATIONAL SYMPOSIUM

The 2015 Euthanasia Symposium is at the Best Western - Ville Marie Hotel and Suites in Montréal, QC on Saturday, October 31 from 9 am - 5 pm. Book your room by calling: 1-800-361-7791.

We have organized the Euthanasia Symposium in collaboration with the Physicians Alliance Against Euthanasia and Living with Dignity Québec.

Registration is \$50. Simultaneous translation is available.

Speakers include: Margaret Sommerville, Professor of Law at McGill University, Dr Margaret Cottle, Palliative Care Physician and VP of EPC, Dr Patrick Vinay, Former Dean, Faculty of Medicine, University of Montréal, Dr Catherine Ferrier, Geriatrician and President, Physicians Alliance Against Euthanasia, Amy Hasbrouck, Director, Toujours Vivant - Not Dead Yet Canada, Dr Will Johnston,

Family Physician and Chair of EPC - BC, Nic Steenhout, Former Director, Living with Dignity Québec, Jen Romnes, shares her story about caring for her mother, Albertos Polizogopoulos as a speaker on conscience rights, and Alex Schadenberg.



The 2015 Euthanasia Symposium will be an excellent, upbeat and educational experience. Interested individuals, leaders and academics will all gain pertinent information.

To register contact Euthanasia Prevention Coalition at 1-877-439-3348 or info@epcc.ca