

MANY U.S. VICTORIES IN 2017

The legislative sessions in many U.S. states have been completed in 2017 and even though assisted suicide bills were introduced in 25 states, at this point, every assisted suicide bill has been defeated.

In some states the vote was too close for comfort, but in others the debate was turned in our direction by key people who convinced members of the legislature to oppose the bill.

In Maine, [Governor LePage stated in the media](#) that he did not support assisted suicide and if passed in the legislature, the bill would be vetoed.

In New Mexico, the assisted suicide bill had significant support. Local organizers worked hard to convince

their elected representatives to read it and [the bill was defeated by a vote of 22 to 20](#).

[In Hawaii](#), it appeared that the legislature was poised to legalize assisted suicide. Margaret Dore, working with local leaders, spoke to key people about how the assisted suicide bill was fatally flawed. Dore found that by getting legislators to read the bill, they were able to understand how the language was flawed and needed to be defeated.

All of the assisted suicide bills are designed to cause the death of people at the most vulnerable time of their lives, while protecting physicians from scrutiny. They are all flawed.

The message is clear.

The assisted suicide lobby geared up for 2017. They hired professional lobbyists and spent significant resources on their campaigns and they have failed. By recognizing the inherent problems with assisted suicide legislation and pointing out the fatal flaws, these bills are being defeated.

[P.S. EPC successfully defeated Bill C-384 in Canada in April, 2010](#) by a vote of 228 to 59 by using this same formula. Our recent problem was that the Supreme Court of Canada made a terrible decision in [Carter v. Canada](#).

ONTARIO DOCTORS SHOULD NOT BE FORCED TO REFER THEIR PATIENTS FOR EUTHANASIA

The Ontario Standing Committee on Finance and Economic Affairs did a clause-by-clause consideration of [euthanasia Bill 84](#), “An Act to amend various Acts with respect to medical assistance in dying” on April 10. The Committee rejected every amendment, including those to protect conscience rights for medical professionals. Bill 84 will regulate euthanasia in Ontario.

On April 10, a group of doctors held a press conference urging the Ontario government to protect conscience rights for medical professionals by amending Bill 84. [CHCH News reported](#):

Doctors speaking out say they shouldn't be forced to refer their patients to another doctor who is willing to help them die if they disagree with the practice.

“None of us ever envisioned whether we took our Hippocratic oath 40 years ago or 4 years ago that we would one day be legislated to cooperate in the death of our patients.”

Doctors who will not kill their patients by lethal injection also oppose sending them to a doctor who will. An “effective referral” is similar to killing the patient yourself.

Since Ontario has a Liberal majority government it is time for the Liberal caucus to wake up and buck the unpopular policies of their own government. Protecting conscience rights for medical professionals is a good place to start.



SUICIDE IS A SYMPTOM OF MENTAL ILLNESS, NOT A CURE FOR IT

On April 21, radio personality Andrew Lawton responded to Adam Maier-Clayton's death based on his own experience with depression and suicide. Lawton said, as published by *Global News*:

This idea that suicide is dignified and painless is a dangerous one. Take it from someone who tried and failed.

Nearly seven years ago I overdosed on dozens of pills—causing multiple cardiac arrests and weeks in hospital on life support.

I survived, but only narrowly so.

Everything from the method to the date and time was meticulously thought out.

I picked the day because I didn't have any other appointments scheduled—as though missing a meeting would have been the only problem with my plan any other day.

Suicidal people are irrational. This is true even when decisions appear to be made through logic and reason.

I saw suicide as the answer to pain I was convinced wouldn't abate.

It wasn't just about picking the easy way out of an unpleasant situation—it was the only way. I saw no way my life would improve.

Spoiler alert: it did.

Lawton then explains that his life soon changed:

Like Maier-Clayton, I had tried myriad therapies, medications, and treatment throughout my years-long battle with depression. By the time I tried to pull the plug on my own existence, none had made an impact.

But after the attempt, that changed. Healing didn't happen overnight, but things that hadn't worked previously showed positive results.

My circumstances didn't change, but my outlook did.

When discussing assisted suicide, mental and physical illness can't be lumped into one category.

Assisted suicide activists say those with mental illness are being denied the right to die with dignity just as elderly ALS patients were before the [Supreme Court struck down the ban on physician-assisted death in 2015](#).

Exit International founder Dr. Philip Nitschke, who worked with Maier-Clayton in the lead-up to his suicide, maintains the young man was of completely sound mind to make the literal life and death decision.

"Yes he was suffering. Yes he had a mental illness.



Andrew Lawton

But did he have rational decision-making abilities? Absolutely," Nitschke told me. "And I would challenge anyone to have been able to find any flaws in his thinking."

Being a pretty good debater, I'm sure I could have sold my own suicide given how convinced I was that it was the right call. That wouldn't have made it any less flawed a conclusion.

Despite my illness, I functioned in the world in such a way that most people didn't even realize there was a problem. I worked, engaged and had relationships with others. I appeared normal, despite not thinking normally.

When illness is in the mind, rather than the body, it calls any decision into question — an irreversible one all the more so.

Maier-Clayton's family experienced a powerlessness that most could never imagine, seeing such suffering in a loved one and not being able to fix it.

The role of health-care practitioners is to try—not to enable one's disordered thinking by killing them. State-sanctioned death doesn't help the mentally ill—it robs them of a chance for healing.

In 2010, no one could have told me happiness was possible. Today, I am married to the love of my life, working in a successful career, and able to look forward each day—all just a few years after I signed my own death warrant.

Suicide is a symptom of mental illness—not a cure for it.

If you or someone you know is in crisis and needs help, resources are available. In case of an emergency, please call 911 for immediate help.

NETHERLANDS EUTHANASIA DEATHS INCREASE AGAIN IN 2016

The *Dutch News* reported that the number of euthanasia and assisted suicide deaths in 2016 increased by 10% to 6091 (5875 euthanasia deaths and 216 assisted suicide deaths), representing 4% of all deaths in the Netherlands. There were 5561 reported assisted deaths in 2015.

Since 2006, there has been a 317% increase in assisted deaths in the Netherlands.

There were increases in euthanasia deaths based on dementia or psychiatric reasons. There were 141 people who died by euthanasia based on dementia in 2016, up from 109 in 2015. There were 60 people who died by euthanasia for psychiatric reasons in 2016, up from 56 in 2015. There were also 244 people who died by euthanasia based on “advanced age.”

In 2016, there were 10 cases referred by a Regional Euthanasia Control and Evaluation Commission for investigation.

Every five years the Netherlands conducts a major study on euthanasia. The 2010 study that was published in *The Lancet* (July 2012) indicated that 23% of all assisted deaths were unreported in the Netherlands. If this trend continued, that may have been 1400 unreported assisted deaths in 2016.

Netherlands euthanasia news stories in 2016:

In January, 2016, the Netherlands decided to extend euthanasia to people with severe dementia.

A study published in February, 2016 in *The Journal of the American Medical Association (JAMA) Psychiatry* concerning euthanasia for psychiatric reasons in the Netherlands uncovered significant concerns. Researcher Scott Kim found:

in one EAS case, a woman who died by euthanasia was in her 70s without health problems had decided, with her husband, that they would not live without each other. After her husband died, she lived a life described as a “living hell” that was “meaningless.”

A consultant reported that this woman “did not feel depressed at all. She ate, drank and slept well. She followed the news and undertook activities.”

In April, 2016, a dentist admitted to assisting the suicide of his wife.

In May, a Netherlands euthanasia

clinic lethally injected a woman who was sexually abused as a child.

In October, the Netherlands government stated that it planned to extend euthanasia to people who are not sick or dying but claim to have a “completed life.” Recently, the Dutch Medical Association opposed changing the euthanasia law.

In November, a Dutch journalist reported that he was writing a book about his brother who died by euthanasia based on chronic alcoholism.

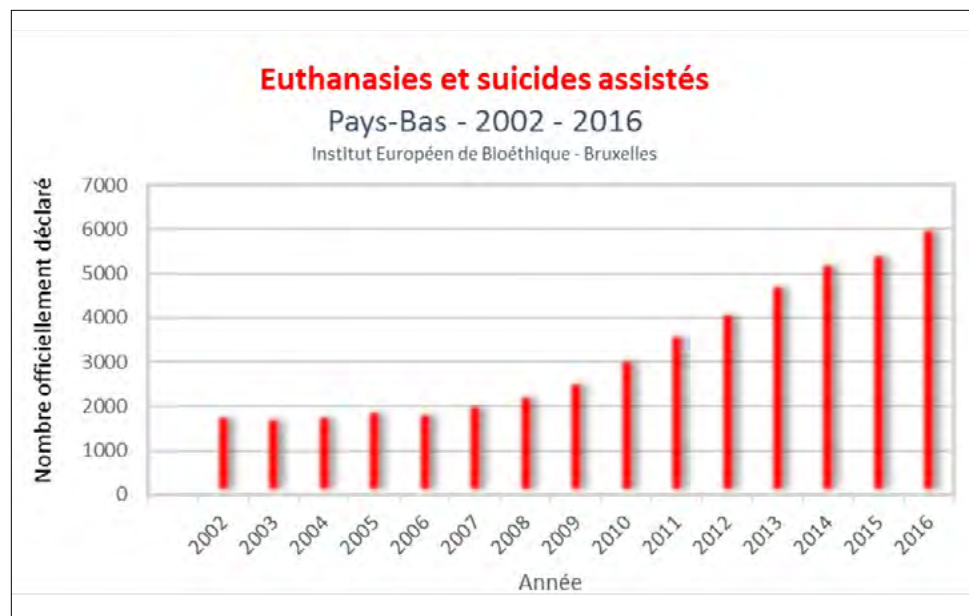
In January 2017, a regional euthanasia review committee decided that a forced euthanasia on a woman with dementia, where the doctor sedated the woman by secretly putting the drugs in her coffee and then had the family hold her down to enable the lethal injection, did not follow the rules but found that it was done in “good faith.”

The Netherlands euthanasia law continues to expand. Once the law allows one person to kill another person, then the line has been crossed and the only remaining question is who can be killed?

2017 NATIONAL EUTHANASIA SYMPOSIUM

SAVE THE DATE:

Saturday October 28, 2017
Toronto, Ontario



MORE THAN 1324 EUTHANASIA DEATHS IN CANADA

CBC News reported on April 20 that there have been more than 1324 euthanasia deaths in Canada. The *CBC* article (that promotes euthanasia) states:

More than 1,300 people in Canada have died with medical assistance since the option became law. For most of the country, that's been less than a year, as Bill C-14 governing medical assistance in dying passed on June 17, 2016. Quebec legalized medical assistance in dying six months before that, on Dec. 10, 2015.

Although CBC News has counted 1,324 medically assisted deaths in Canada through data requested from health ministries and coroners' offices in each province and territory, the actual number is likely higher, as some provinces were unable to provide up-to-date information.

According to the *CBC* data, there were more than 1324 euthanasia deaths,

since the data from Québec, British Columbia and New Brunswick is not up-to-date.

The article also quotes Amy Hasbrouck, President of the Euthanasia Prevention Coalition speaking on behalf of the disability rights group, Not Dead Yet:

"This is very personal for me," says Amy Hasbrouck, who is legally blind and speaks for Not Dead Yet Canada. "These are public policy decisions that end up sacrificing the lives of old, ill and disabled people."

Normalizing medically assisted death, these advocates say, sends a message that the life of a person who is ill, disabled or elderly is not worth living. The government should instead be investing in improving the quality of their life, they argue, by investing in better supports for people with disabilities, as well as better palliative care.

Medically assisted deaths in Canada

TOTAL	1,324	
QUEBEC	469	DEC. 10, 2015 - DEC. 9, 2016
ONTARIO	365	JUNE 17, 2016 - MARCH 31, 2017
B.C.	285	JUNE 17, 2016 - FEB. 28, 2017
ALBERTA	100	JUNE 17, 2016 - MARCH 31, 2017
MANITOBA	37	JUNE 17, 2016 - MARCH 31, 2017
N.S.	31	JUNE 17, 2016 - MARCH 31, 2017
SASK.	21	JUNE 17, 2016 - MARCH 31, 2017
N.B.	9	JUNE 17, 2016 - DEC. 31, 2016
N.L.	7	JUNE 17, 2016 - MARCH 31, 2017
P.E.I.	0	JUNE 17, 2016 - MARCH 31, 2017
N.W.T.	0	-
NUNAVUT	0	-
YUKON	*	Would not divulge, saying small population raises confidentiality concerns

It is concerning that the euthanasia lobby are pressuring to have euthanasia extended to [people with mental illness](#), people under 18 and [people who are incompetent](#) but request death by lethal injection in their power of attorney document.

MAINE GOVERNOR LEPAGE SAYS HE WILL VETO ASSISTED SUICIDE BILL

According to an April 18 [article in the Portland Press Herald](#), Governor Paul LePage told a local radio show that he is against assisted suicide:

"I'm against it," he said Monday during a radio interview on WVOM's "George Hale and Ric Tyler Show." Asked if the bill is destined for a veto, LePage said, "Yes. Here we are talking about death with dignity and we're sitting there, human beings, passing judgment on who can live and who can die. No, I don't believe in it."

The *Portland Press Herald* reported:

The primary bill, "An Act to Support Death with Dignity," is scheduled to be discussed by the members of the Health and Human Services Committee Wednesday. A second...bill, "An Act to Promote Life with Dignity," also will be discussed Wednesday. The two bills are similar and will likely be combined before the committee votes to send its recommendation to the full Legislature. The outlook for passage has been uncertain. A similar proposal failed in 2015 by a single vote in the Maine Senate. However, LePage's promise of a veto means the proposal now needs the support of two-thirds of the House and Senate, and it would require Republican supporters who vote for the bill to also vote to override a LePage veto.

Legalizing assisted suicide gives physicians the right in law to be directly involved with ending a patient. We believe in caring, not killing people.

