

REJECT THE "I-1000" ASSISTED SUICIDE INITIATIVE

By Taryn Clark

Consider these scenarios:

Scenario one: Your grandfather is diagnosed with terminal cancer – he is told he has less than six months to live. He becomes depressed initially, but, taking advantage of the US's excellent end of life care and effective pain medication, he is able to spend his last precious months with his children and grandchildren.

Scenario two: Your grandfather is diagnosed with terminal cancer – he is told he has less than six months to live. He becomes depressed initially, asks his doctor for a lethal prescription, and, two weeks later, ends his life.

Unfortunately, scenario two could become reality if Washington State passes Initiative 1000 this November.

I-1000, also known as Physician Assisted Suicide (PAS), would allow patients diagnosed with less than six months to live to request a lethal prescription after a fifteen-day waiting period.

My name is Taryn Clark. I'm a 21-year old pre-medical student at Whitworth University, and, as a future physician, I'm alarmed by this initiative for 12 reasons.

1) Doctors are not God. There is no medical or scientific method to determine how long someone has left to live. End of life estimates are merely educated guesses that are often wildly inaccurate [*Oncology* and *New England Journal of Medicine*.]

2) Choice becomes duty. Because PAS is a cheaper alternative than good palliative (end of life) care, some terminal patients are pressured into ending their lives minimize the financial burden of a terminal illness. Unfortunately, this has occurred in Oregon. [*The Oregonian*.]

3) Patients are vulnerable. There is no requirement for a mental health evaluation [I-1000, section 6], meaning that mentally ill patients could request and be given a lethal prescription. This has happened in Oregon [*The Weekly Standard*.]

4) I-1000 sets a dangerous precedent. In Holland, legalization of PAS led to legalization of informed euthanasia –the doctor administers the fatal drug - and from there, uninformed euthanasia – doctors may kill patients without their knowledge or consent.

5) No family notification. Under I-1000, neither spouses nor family members need to be told of the patient's intent to die [I-1000, section 8.] The death certificate is falsified, as the doctor must record the terminal disease as cause of death, not the fatal drug overdose. Families will never know the truth

6) There is minimal protection for minorities, seniors, and low income people. Because PAS is a cheap alternative to palliative care, it provides incentive for insurance companies to steer their patients on low or fixed incomes towards suicide.

7) Pain and quality of life are not reasons to commit suicide. Pain control has never been better in medical history and palliative care has never had more options available to patients.

8) PAS actually harms end of life care. One study in Oregon found that after their PAS bill was passed, terminally ill patients suffered more during their last week of life. PAS removes the pressure to improve palliative care.

9) The patient doctor relationship would be damaged. Since Hippocrates' time, doctors have sworn an oath to do no harm. There is no greater harm than taking a life.

10) It's unnecessary. Suicide is currently legal in Washington. In addition, patients and their families can deny life-sustaining treatments at any time.

11) There is no post-death peer review. Peer review is meant to ensure that doctors are providing the best possible care to their patients; I-1000 does not allow peer review following the suicide.

12) Special Interest groups. Most of the funding supporting I-1000 has come from out-of-state special interest groups whose stated goal is to allow assisted suicide for all people – not just terminally ill patients [*The New York Times*.]

Physician assisted suicide will not be about patient choice. PAS will be the decision of our broken health care system, profit-driven insurance companies and, perhaps, even greedy family members.

This November, you'll get to make a life or death decision. Don't fall for the 'yes' rhetoric and choose death.

Taryn Clark is a senior majoring in chemistry.

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