

# Dilemmas of Physician Assisted Suicide An International Perspective

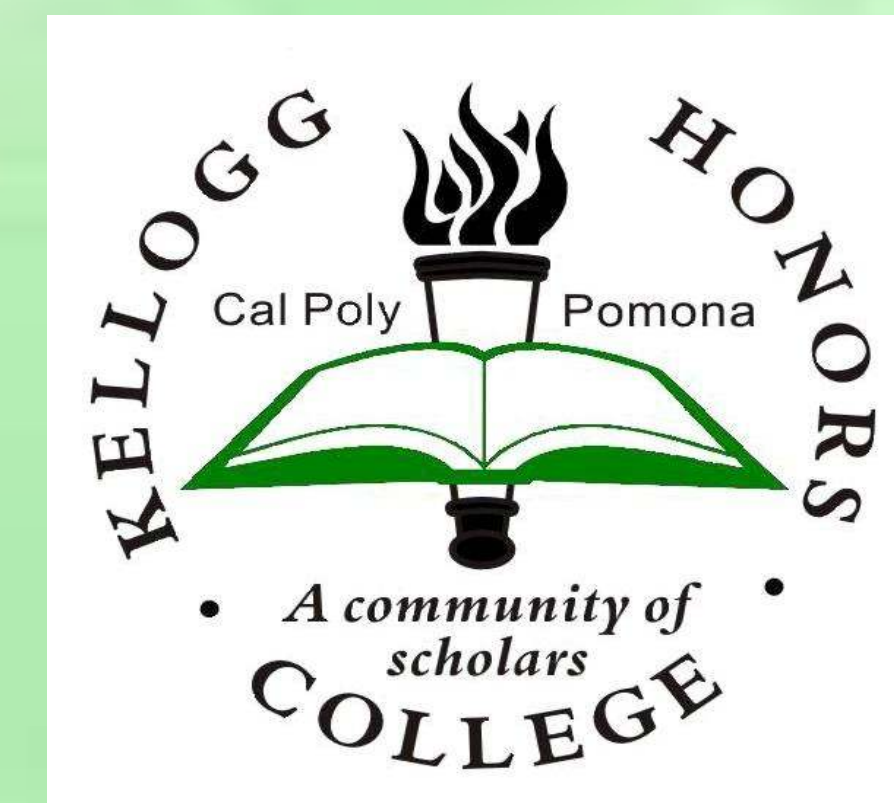
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## Abstract

The topic of the permissibility of physician assisted suicide (PAS) has always been a highly debated topic, socially, morally, and politically, because it raises many issues. These include the sanctity of life and the goals of medicine. Some worry that legalizing physician assisted suicide will desensitize physicians to human suffering and lead down a slippery slope to killing of the ill, weak, and disabled, among others.

Legally, physician assisted suicide is currently allowed in five states: Oregon, Montana, Washington, New Mexico, and Vermont. Assisted suicide has been legalized in the Netherlands and in Switzerland. Since Oregon was the first state where PAS was legalized, I will discuss Oregon's requirement for PAS and compare it with the current standard of assisted suicide in other countries. The paper will also highlight the problems of allowing organizations like Exit and Dignitas who allow non-physician to administer the assisted death.

Under the current law in Oregon, physician assisted suicide is only allowed for terminally ill patients who will die within the 6 month period. My paper will argue that physician assisted suicide should be extended to non-terminal, but chronically ill patients who will not die within the six month period. I believe this is an important issue because it questions the rationale that underlies current physician assisted suicide law. The Death with Dignity Act only enables people who will die within six months to die better by allowing them to die sooner. However, my proposal is important because it will enable chronically ill patients with unbearable suffering to die sooner, when death is not imminent, when they feel that the quality of life has significantly diminished.

## The Price to Die

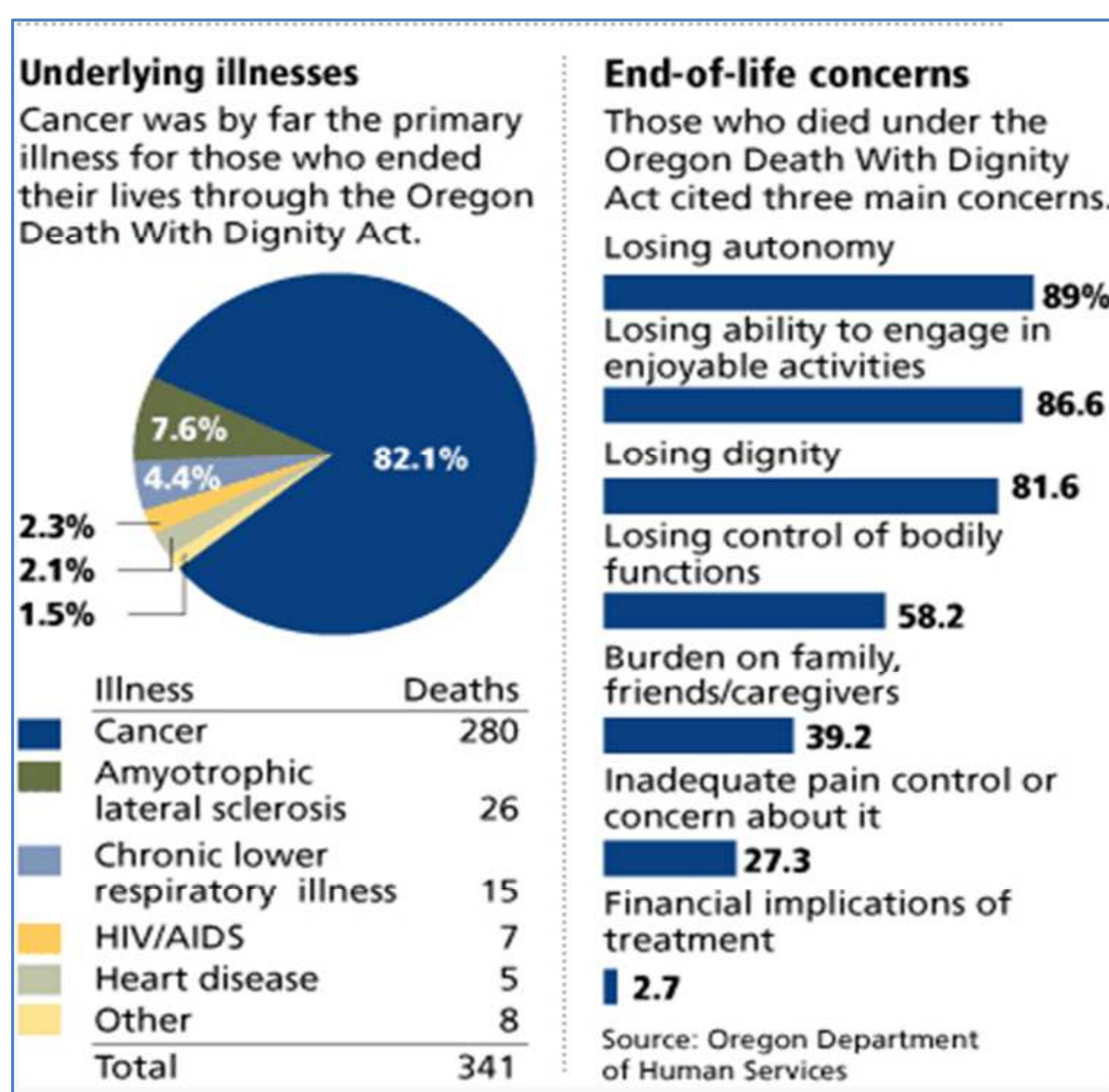
| Services                                   | USD  |
|--|--|
| One-off Joining Fee                        | \$ 240                                       |
| Annual Member Fee                          | \$ 95  |
| Preparation of an Accompanied Suicide      | \$ 3,600                                     |
| Doctor's Consultation                      | \$ 1,200                                     |
| Cost for Completion of Accompanied Suicide | \$ 3,600                                     |
| Funeral and Registry Office Expense        | \$ 2,400                                     |
| Official Procedures (optional)             | \$ 1,800                                     |
| <b>Total :</b>                             | <b>Range from \$11,135-\$12,935 or above</b> |

## Switzerland

PAS: Legal since Jan. 1, 1942

**“Whoever, from selfish motives, induces another to commit suicide or assists him therein shall be punished, if the suicide was successful or attempted, by confinement in a penitentiary for not more than five years or by imprisonment.”**

Source: Article 115 of the Penal Code of Switzerland.



## Netherland

PAS: Legal since Feb. 19, 2008

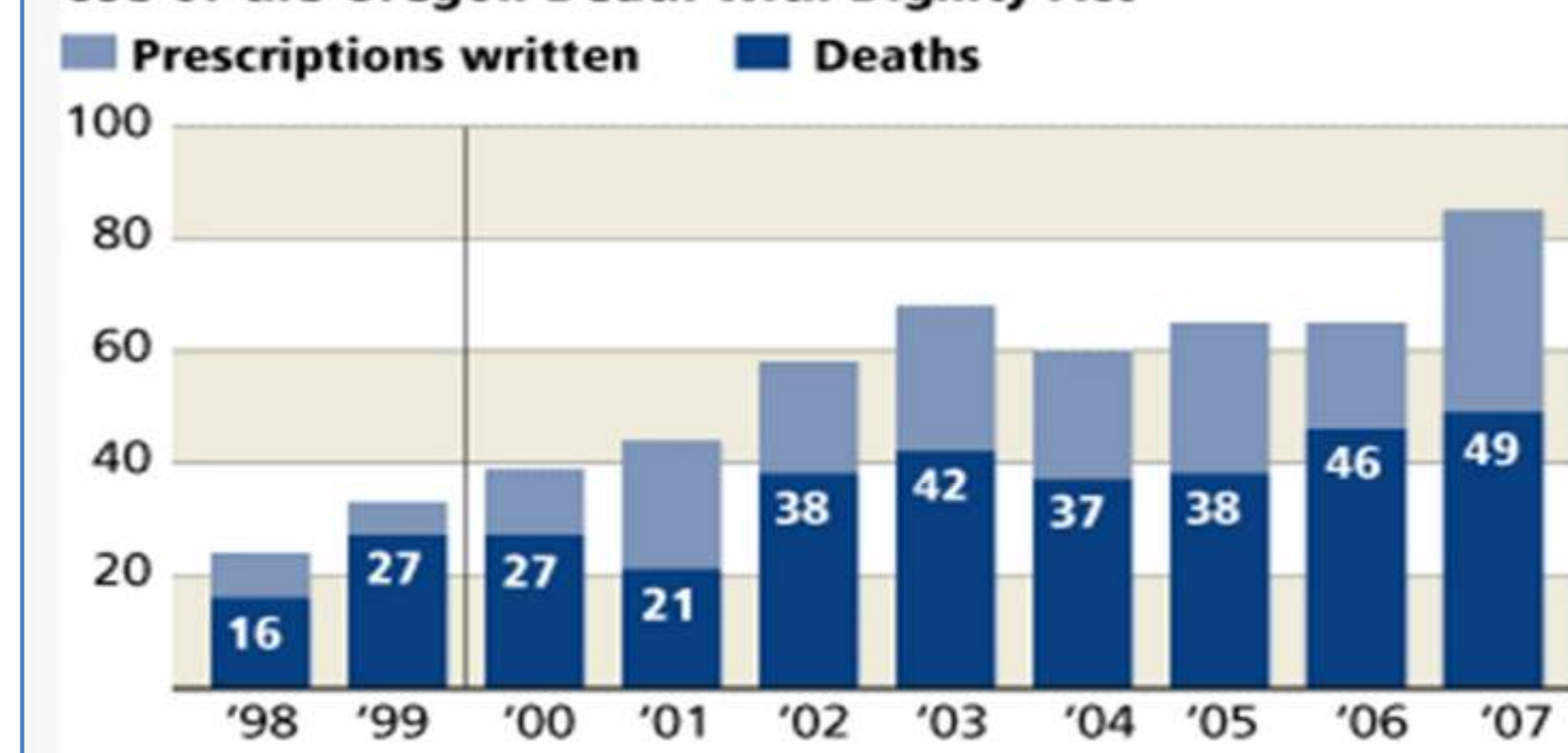
**Criteria for Physician Assisted Suicide**

- ❖ Unbearable Suffering
- ❖ Both the suffering and the desire to die were enduring
- ❖ The decision to die was voluntary
- ❖ The person was aware and had considered valuable alternatives
- ❖ No alternative to improve the situation were available
- ❖ The person's death did not cause unnecessary suffering to others

### DEATH WITH DIGNITY ACT

In the first decade of legal aid in dying in Oregon, 341 people died after ingesting a lethal dose of medication. Two hundred more patients received prescriptions but did not take the medication.

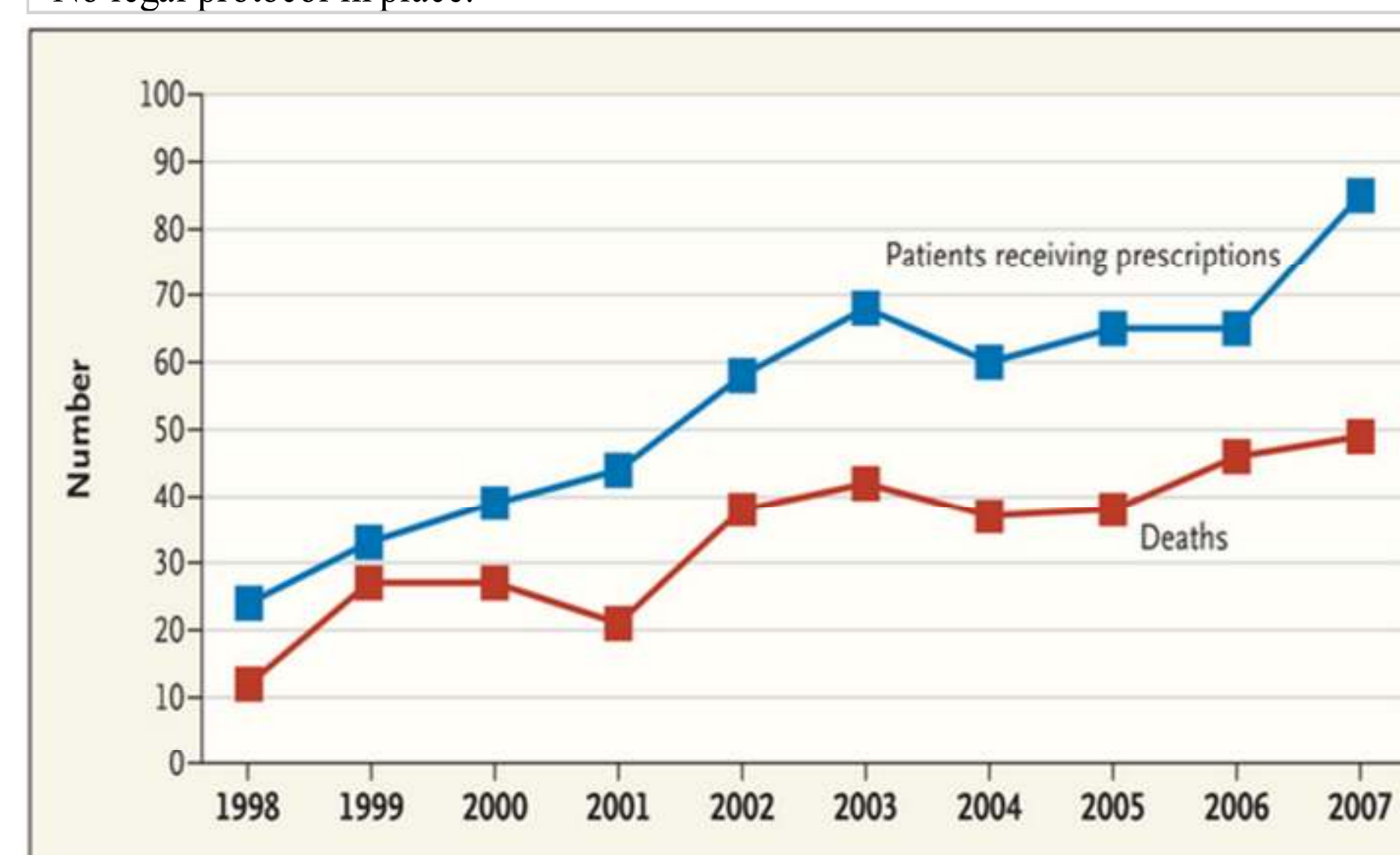
**Use of the Oregon Death With Dignity Act**



## United States

| States     | Date Passed | How Passed (Yes Vote)                                   | Residency Required | Minimum Age | # of Months Until Expected Death | # of Requests to Physician                        |
|------------|-------------|---|--------------------|-------------|----------------------------------|---|
| Montana    | 12/31/2009  | Montana Supreme Court in <i>Baxter v. Montana</i> (5-4) | Yes                | *           | *                                | *   |
| New Mexico | 1/30/2014   | Ruling on <i>Morris v. State of New Mexico</i>          | Yes                | *           | *                                | *   |
| Oregon     | 11/8/1994   | Ballot Measure 16 (51%)                                 | Yes                | 18          | Six or less                      | Two oral (at least 15 days apart) and one written |
| Vermont    | 5/20/2013   | Act 39 Bill S. 77 "End of Life Choices"                 | Yes                | 18          | Six or less                      | Two oral (at least 15 days apart) and one written |
| Washington | 11/4/2008   | Initiatives 1000 (58%)                                  | Yes                | 18          | Six or less                      | Two oral (at least 15 days apart) and one written |

\*No legal protocol in place.



Number of Patients Receiving Prescriptions for Drugs for Use in Assisted Death and Number of Assisted Deaths under the Oregon Death with Dignity Act, 1998 to 2007.

## New Criteria

These two criteria are necessary and sufficient conditions to qualify for PAS for non-terminal patients.

- (1) incurable and treatment is futile
- (2) prevented from enjoying or doing activities that make life worth living.