

8 dangers of legal Euthanasia

1. 'Safeguards' don't prevent abuse of euthanasia laws.

Belgium and the Netherlands pride themselves on their 'safeguards'. Yet the number of people illegally euthanized each year without request is far higher than the number killed by 'legal' methods. Most are not officially reported. These governments do not protect unsuspecting citizens.

2. Doctors killing people becomes normalised.

The Netherlands is approaching the position where doctor-initiated dying accounts for one out of every two deaths. The reasons for this are increasing numbers of applications, increasing rates of approval and an increasing array of conditions deemed suitable for euthanasia. The latter now include psychiatric disorders, terminal disease, personality disorders, birth defects and social problems.

3. It compromises palliative and hospice care.

The European Association for Palliative Care has recently condemned the model of palliative care used in Belgium and the Netherlands that turns to euthanasia as a last resort. The most experienced palliative care doctors insist that they can control the suffering of their patients without euthanasia.

4. Euthanasia sends a mixed message about suicide.

Despite concern about N.Z.'s high suicide rate, pro-euthanasia advocates are campaigning for a law change that would allow depressed or lonely people to kill themselves with government help. That would seriously erode the valuable work of suicide prevention.

5. People will die because of mistaken diagnosis or prognosis.

Even with modern technology, doctors cannot accurately diagnose terminal illness or estimate the time to death in every case. Countless people given only a short time to live have recovered and survived long-term. But with euthanasia the result is always final – there is no second chance.

6. Euthanasia and assisted suicide don't guarantee a dignified death.

Research from the Netherlands reveals that about 10% of euthanasia episodes and 30% of assisted suicides have unforeseen complications such as fits, vomiting and waking up not dead!

7. Euthanasia and assisted suicide are the ultimate tools for elder abuse.

In Oregon USA, requests for assisted suicide because of physical pain are rare. Cited much more commonly as reasons are 'loss of personal autonomy' and not wanting to 'be a burden'. These are both related to issues of abuse in the family which may otherwise be hidden from outsiders.

8. Euthanasia gives doctors unprecedented power.

Dr. Patrick Wyfells, a Belgian GP describing assisting people to decide for or against euthanasia, has stated: "I am afraid of the power I have at that moment." So much for patient choice.



www.euthanasia-free.org.nz



Euthanasia-Free NZ, PO Box 47773, Ponsonby, Auckland 1144. For reference to our quoted statistics, visit our website.

Frequently Asked Questions about Euthanasia and P.A.S.

What is 'euthanasia'?

The word comes from Greek meaning 'a good death.' In recent times it has come to mean the deliberate killing of people – most commonly the seriously ill or disabled – who are judged, either by themselves or others, to have such a poor quality of life, that they would be better off dead.

What is physician-assisted suicide (PAS)?

This is where a medical doctor prescribes lethal drugs for a patient desirous of committing suicide. The patient is expected to self-administer the drugs. In practice, sometimes relatives or members of voluntary euthanasia societies may be in attendance to assist.

Isn't euthanasia already occurring in New Zealand hospitals?

Many people are confused as to what euthanasia is and is not. Patients who die whilst taking large doses of drugs prescribed for the relief of symptoms have not been euthanased. It is ethically and legally acceptable to use high doses of drugs with the intent to relieve symptoms. It is not ethical or legal to administer medication with the intention of killing the patient. The doctor's intention is key.

Should not a person have the right to request euthanasia if their life is unbearable?

Everyone has the right to request euthanasia. But society has the right to deny the request because experience elsewhere shows that it will result in euthanasia on demand through:

- The criteria for it becoming increasingly wide so as to include social deprivations such as loneliness,
- Some doctors developing a tolerance for euthanasing people who have not requested it,
- Frail, elderly people feeling pressure to request it so as not to be a 'burden'.

In addition it compromises efforts to reduce the high suicide rates in our community. All these trends are noted in countries where euthanasia is legal.

Surely people should be able to control when and how they should die? It's a private matter after all.

It is a self-evident myth that people are able to have control of their lives and destinies. Changing fortune has a habit of arriving 'out of the blue.' Personal autonomy is not an absolute right: for the sake of harmony in society everyone has to modify their behaviour and personal desires. What might be thought desirable for a tiny minority of people has the potential to put the lives of hundreds of thousands of others at risk.

What is palliative care?

Palliative care is designed to improve the quality of life of patients with life-threatening illness by concentrating on the total relief of suffering whether physical, psychological or spiritual, without either hastening or postponing death.