End of Life Assistance (Scotland) Bill

Dr Nick Dunn

I would like this submission to contribute to the consultation process on the above bill, proposed by MSP Margo MacDonald.

As a practising General Practitioner I have grave concerns about this bill, and believe it should not be allowed to proceed beyond its current stage in the legislative process. Whilst having sympathy with anyone in suffering or in a terminal condition, and having the privilege to care for dying patients in my job, I believe it fundamentally wrong for another person to deliberately "help" another to die.

I believe this is tantamount to murder and should remain illegal. Whilst the bill is titled the "End of Life Assistance Bill" this is defined as "assistance, including the provision or administration of appropriate means, to enable a person to die with dignity and a minimum of distress". Whilst not using the terms, this would appear to encompass voluntary euthanasia in addition to physician assisted suicide. In addition to my moral objections, I am also concerned that, if adopted, this practice could lead to a drain of resources and attention away from the developing field of palliative care. This needs to be continually nurtured and supported, in order to allow training of palliative care consultants, who can maintain and develop the current palliative care networks and hospices across the country.

I believe that most people fear the suffering associated with terminal illness. With the appropriate care and support most people can have a dignified death, in their own home, with their family around them if suffering from a terminal illness. Finally, as a General Practitioner, and in keeping with the BMA Scotland statement issued by Dr Brian Keighley, I am concerned about the active role which doctors are expected to play in the description laid out by this bill. Intentional killing is completely at odds with the role which doctors have been entrusted to perform by society - ie that of providing care and promoting health and treating illness.

I worry that blurring these roles with that of someone deliberately ending life would damage the trust which forms an essential ingredient of the environment in which we practice, and may alter the characteristics of those attracted to a career in medicine, and particularly General Practice. I realise the "thin end of the wedge" argument is frequently over-used, but observing the arguments played out during the Abortion Act 1967 and the reality of the fast-track process of pregnancy terminations nowadays, I believe that this could have far-reaching and damaging effects on the provision of healthcare if adopted into law.

Dr Nick Dunn
GP Helensburgh Medical Centre
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