End of Life Assistance (Scotland) Bill

K Dobrzycka

1. Do you agree a person should be able to request end of life assistance from a registered medical practitioner?

NO

2. Are you satisfied with the requirements for age and connection with Scotland as set out in the Bill?

NO

3. Are you satisfied with the two categories of people who would qualify to be assisted under the terms of the Bill?

NO

4. The Bill outlines a several stage consent and verification process that would be required to be followed for an eligible person to receive end of life assistance. Are you satisfied with this process?

NO

5. Do you consider the level and nature of safeguards as set out in the Bill to be appropriate?

NO

6. Do you have any other considerations on the Bill not included in answers to the above questions?

As a final year medical student (University of Aberdeen) and a future doctor I ask you NOT to pass the Bill on End of Life Assistance. The doctors have the duty to respect and preserve human lives, to support patients in their difficulties. From ancient times, Hippocratic Oath states that physicians should not administer (or help with) a drug which will cause the death of a person asking for it. More money should be directed toward widening availability and patients’ access to the palliative medicine programmes which aim at supporting patients and managing the distressing symptoms at the end of their lives, until the natural death occurs. Every single person has a value, which would be denied to many people if the Bill is passed. Many of these people would be the most vulnerable: the handicapped, the elderly, people struggling financially, people who do not want to be a “burden” to others, etc. There is a real danger of “slippery slope” that with time more and more would be accepted, and what seems like an exception at first, will become a norm (the same what has happened with abortion, which unfortunately for many is a “normal” thing to do). In addition, it is impossible to be 100% sure that a
person’s decision is free from coercion or even a “well meant” intentions (for example a person may want to die in order to decrease the burden to the family). Another problem is that people who consider life “intolerable” might not think so few months down the line, having found a new purpose in life, or having inspired or helped someone else in a similar situation. Even “intolerable” situation can bring positive effects and be of great value to the person affected as well as others.

In summary, I ask you **NOT** to pass the Bill because every human being has a value, and should be supported in their difficulties. The doctors’ duty is to respect and preserve life, not helping people to kill themselves.

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