I am writing out of deep concern regarding the above bill.

As a recently retired GP, I have had many years experience and the privilege of caring for patients throughout life and in dying.

The whole ethos of good medicine is to relieve suffering, treat illness and preserve life. To legalise assisted dying is to legalise killing. For the first time killing will be seen as potentially good treatment rather than harm. The bill would put doctors under pressure legally to go against good medical practice and their own conscience. We wish to give people dignity both in living and in dying. This bill changes the role of doctors and will destroy good doctor-patient relationships which are based on trust not fear.

All human beings are worthy of dignity and respect and should be cared for throughout their lives. People nearing the end of their lives need to know that we, as doctors and as a society, are committed to their well-being.

Although the bill aims to give patients’ autonomy to the right to die, in reality it also will become the right to be killed, making doctors less accountable and more powerful.

The terminally ill, elderly, confused, and mentally unstable are amongst the most vulnerable in our society. Though the bill is intended only for those requesting assisted suicide, it is very likely many will feel pressurised (real or otherwise) to ask for assisted death, feeling they are a burden. This decision may be more likely if they stressed, depressed, confused, or suffering from dementia. Depression, common in terminally ill, is treatable, which often relieves any suicidal thoughts and restores a reasonable quality to the end of their life. The fear that the doctor may decide to end their life is going to seriously and understandably add to their stress and depression.

It is impossible to ensure that all acts of euthanasia are truly voluntary and it is likely to become abused.

People expressing a desire to end their life if they became seriously ill in the future often take the opposite view when that situation arises.

Dying with dignity

We made enormous progress in Scotland in caring for terminally ill when hospices were introduced for which we are the envy of other countries. Hospices give terminally ill patients a caring and compassionate environment where they can be given the best possible quality to the remainder of their life. This may mean giving medication at doses which though it might shorten life, are given to relieve pain and suffering. This is
completely different from giving a lethal dose to end life. There is nothing
dignified in killing someone even when done to relieve suffering. Destroying
life is not dignified or compassionate and demeans the killer. Compassion
means getting along side someone in their suffering. Killing is not
compassion.

The hospice movement would, I believe, cease to exist in its present form with
this bill and would loose many good caring doctors and nurses unable to work
within the law for conscientious reasons. This has happened in Gynaecology
units where doctors who find abortion unacceptable are unable to work . It
would be a very sad day indeed if our excellent hospice care was lost.

No one can live life in total isolation from others and we are here to care for
and be cared for by others in varying extents at different stages in our lives.

Rather than be a country known for its good caring palliative care, we could
instead be a country people travel to for assisted suicide.

The Netherlands was the first country in the world to legalize euthanasia. In
2008, Dutch doctors reported 2,331 cases of euthanasia, 400 cases of
assisted suicide, and 550 deaths without request. Originally intended for
terminally ill, it is now allowed for newborns and mentally ill.The Royal Dutch
Medical Association and Dutch Commission for the Acceptability of Life
Terminating Action have recommended that active termination of the lives of
patients suffering from dementia is morally acceptable under certain
conditions.Estimates suggests more than 6,700 deaths due to “Ending Life
Without Explicit Request”, since 1990.

They now recognise they should have aimed instead to provide good
palliative care.

Involuntary euthanasia will happen, regardless of the intentions of the
legislatorsThe slippery slope is real and it is better not to start on it.

An illustration of this slope in our own land is the legalisation of 1967abortion
law . It has now changed out of recognition from original law, now abortion on
demand, sometimes for the most trivial of reasons such as inconvenience.The
law should be protecting the most vulnerable in society and unborn children
are the most vulnerable and dependant members of society and are denied
the right to live when aborted.

Dying is often an important time for family to spend with their loved ones. From
personal experience the last days spent with a loved one, though sad, can be
a very rich and important time.

Though usually misplaced, guilt is a common emotion for bereaved, but could
be very real and deep if involved in a decision to end the life of their loved
one.

In conclusion my answers to the following are:
Do you agree a person should be able to request end of life assistance from a registered medical practitioner?

*No, there should be no laws allowing one person to kill another.*

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

*No, there should be no laws allowing one person to kill another.*

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

*No, there should be no laws allowing one person to kill another.*

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, there should be no laws allowing one person to kill another.*

Do you consider the level & nature of safeguards in the Bill to be appropriate?

*No. Legislation, no matter how detailed, cannot protect vulnerable members of society.*

Any other considerations on the Bill not included in answers to the above

*Legalising assisted suicide or euthanasia is not only immoral, but also in practice would be dangerous and unnecessary.*

I conclude from the above that:

Doctor assisted dying and euthanasia should not be legalised
The proposed bill is fundamentally flawed and would substantially change the way medicine is practised in this country

No bill should be taken forward.

Sheila Harrison
10 May 2010