I am a Scottish doctor (consultant psychiatrist) and strongly support this bill.

I have seen innumerable patients (and three members of my family) suffering terribly at the end of their lives, some suffering dreadfully for 2 – 3 years or longer. This suffering has not been reduced by medical intervention or palliative care and the suffering has continued to destroy any quality of life or human dignity.

The types of illnesses in which I have seen this terrible suffering, include late dementia, terminal breast cancer, multiple sclerosis, or the tortured agitation and anguish of severe treatment-resistant depression, severe treatment-resistant psychotic illnesses and severe treatment-resistant bipolar disorder. In many cases I have seen, no amount of palliative care would resolve the loss of peace of mind, dignity, hope and humanity that some of these poor people already experience.

Palliative care can often greatly help pain relief, but there are many other forms of terrible suffering that are unrelated to pain and that cannot be relieved medically or by any form of social support or service. For example, my aunt’s multiple sclerosis resulted in her losing all power to all muscles for many months so that she was immobile and could not raise her head to watch TV, eat or make eye contact with others, and her head dangled onto her chest at all times. She died of pressure sores in this desperate condition.

It would be a sign of a civilised society to allow such patients to die by physician-assisted suicide, and I would be privileged to be involved in legally ending the life of those tortured souls where that was their request either at the time (if they have capacity) or in a witnessed advance statement (where they do not have capacity) and where suitable and effective stringent controls and safeguards are in place.

Dr Kenneth Mitchell
3 May 2010