End of Life Assistance (Scotland) Bill

Douglas Robertson

I am not a regular follower of Scottish Parliament business and only today became aware of the closing date (12/5/10) for comments on the End of Life Bill which is at present before the Parliament.

I qualified from Glasgow University in 1977 as a doctor and have worked for the greater part of my life as General Practitioner here in Glasgow. I suppose that more than most people the General Practitioner is engaged with the issues surrounding end of life care and decisions more than most. We are certainly the only group who are usually involved with the care of people as they pass from good health to serious disability and eventual death. Many ministers of religion will also be involved in such a journey with their church members or adherents but they rarely understand the full implications of a diagnosis as the GP does.

I have been concerned by the general change / deterioration I have observed in attitudes and manner of so many who profess to provide "health care". So often the provision is reduced to a mere box ticking exercise or a "protocol of excellence" where simple humanity and warmth have been abandoned and replaced by some arbitrary standard of good clinical care. I have observed that this "good clinical care" is often simply the opinion of a less well qualified professional or group of professionals who have perhaps attended a course on terminal care. So often these well meaning but ill-informed people manipulate patients or the family of a patient into all kinds of ghastly programmes and quite often introduce inappropriate treatment. Sadly today, the role of the family doctor and the nursing care of the district nurse is superceded by these specialists. They undoubtedly have a supportive role to play but more often are incapable of performing this role in their zeal to control or manipulate the agenda.

I am therefore not surprised by the growth of the lobby which promotes the End of Life Bill. As a population we have to a great degree abandoned the kindly and considerate care provided in a loving and safe family setting or local hospice. Many patients today are more afraid of the ranks of specialists who descend on the terminally ill than they are of spending their remaining days in the refuge of their home with an array of considerate well known professionals around them.

The Bill is I think an admission of the end of hollistic medical care in Scotland. No longer is a patient allowed to be kept comfortable as the illness progresses and to die with dignity at home without yet another inappropriate medical intervention.

Far from bringing peace of mind and a sense of protection however the Bill is a poisoned chalice. It introduces an arithmetical evaluation of a person's life
worth. Once the boxes are ticked by the professionals, the patient has no recourse to safety.

Of course it will not be used in this way initially. It is simply the foundation legislation in a disintegrating social process. With time its strictly controlled limits will soften or be disregarded. We shall enter a new era of disposable persons - those who have had their life and have no longer any economic value to society.

I would urge you then to consider your actions and decisions. Where there is fear of personal weakness or of failing capacity let us strive to protect and not to simply dispose of. Let us as a nation endeavour to place such a value on our citizens that we baulk at taking their lives when they are at their weakest and most vulnerable.

I do hope that you will not pass this Bill into law and so continue to protect the most vulnerable people in Scotland.

Douglas Robertson
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