1 May 2010

The End of Life Assistance Bill Committee
The Scottish Parliament,
Edinburgh
EH99 1SP

Dear Sirs

I have read this Bill and as a lay person a number of issues concern me.

There is no guidance as to how the end of life is to be achieved, but it is presumably by assisted suicide or euthanasia, down-played by the use of the term "end of life assistance". Does this mean that any method, by either doctor or patient, will be within the law?

Having worked with doctors for a number of years I know that many will not wish to be faced with this dreadful responsibility. The Bill would place an enormous strain on the doctor/patient relationship and there does not seem to be any provision in the Bill which will allow doctors to refuse to participate in such acts.

It is common knowledge that in countries which have already implemented such laws there have been cases of abuse: it is frightening to think that elderly or disabled people might find themselves in a position where they feel pressurised to ask for, or to accept an offer of, suicide; and frightening that someone as young as sixteen should be able to make such a momentous decision.

Terminally ill is defined as: "if the person suffers from a progressive condition and if death within six months in consequence of that condition can reasonably be expected." In connection with the Lockerbie bomber, a leader cancer specialist warned: "Studies show experts are very poor at trying to predict how long an individual patient will live for" (Telegraph 20/2/10). We all know of patients who have been given very little time to live and have gone on to enjoy useful and happy lives for many years.

Is there a definition of what makes "life intolerable"? Who decides? [name redacted] is physically disabled and could not "live independently" without the care of family and friends. And it is compassionate and loving care that people in either of the Bill's categories need - not a fear that they may be offered assisted suicide.

Our Hospices are the envy of many countries. Dame Cicely Saunders, who set up St. Christopher's Hospice in 1967 said: 'Anything which says to the ill that they are a burden to their family and that they are better off dead is unacceptable. What sort of society could let its old folk die because they are in the way?'

Margo MacDonald's Bill says its purpose is "to allow a person to die with dignity and with a minimum of distress".

The hospice movement believes that the patient is still living and should be encouraged to have a life while they are dying. Today it is thought it is not necessary for terminally ill patients to die in pain. Hospices specialise in pain control, and staff believe all pain, however severe, can be brought under control and patients can die with dignity.

I hope you will consider this Bill very carefully and I ask that you will not allow the wishes of a minority to over-ride and disregard the concerns of the majority (including the British Medical Association) who have no desire to see such a Bill become law in Scotland.

Yours sincerely