

Dying with Dignity Bill 2020 Second Stage Debate

Additional Briefing Notes



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Promoting positive care pathways at end of life

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Further to the briefing document sent to all parliamentarians earlier in September, this brief note offers some additional comments on Gino Kenny TD's *Dying with Dignity* Bill.

1) Palliative care doctors are overwhelmingly opposed to the introduction of euthanasia/assisted suicide

- No professional medical body in Ireland supports a change to the law in this area. In fact, the Royal College of Physicians in Ireland working group has said that *“the potential harms outweigh the arguments in favour of legislation for assisted suicide.”*¹
- Acting chair of the Irish Palliative Medicine Consultants' Association, Prof Feargal Twomey, outlined his organisation's opposition in a recent interview with RTE's Mary Wilson.²
- Consultant in Palliative Medicine, Dr Regina McQuillan, testified before the Oireachtas Joint Committee on Justice and Equality in 2017 outlining 5 reasons why in her professional opinion, Irish law should not change in this area. She said:

1. *A change in the law would put vulnerable people at risk.*
2. *It is not possible to put adequate safeguards in place.*
3. *The drive to improve the care of people with life-limiting illnesses by education, service development and research may be compromised.*
4. *Personal autonomy is not absolute and we are part of a society.*
5. *Allowing assisted suicide or euthanasia for some populations for example the terminally ill or the disabled, devalues the lives of those compared to those targeted in suicide prevention campaigns.*³

2) In every single country in which euthanasia/assisted suicide has been introduced, the numbers dying in this way have increased exponentially.⁴

In countries which have legalised euthanasia/assisted suicide for 10 years or more, the number of people ending their lives in this way has increased by an average of 661%

Country/State	Numbers dying in year introduced	Numbers dying in most recent year on record	Percentage increase in deaths by euthanasia
Oregon (USA)	16 (1998)	188 (2019)	1075%
Netherlands	1626 (2002)	6361 (2019)	291%
Belgium	259 (2002/3)	2655 (2019)	925%
Washington (USA)	36 (2009)	238 (2018)	561%
Canada	1015 (2016)	5631 (2019)	455%

¹<https://www.medicalindependent.ie/potential-harms-outweigh-benefits-of-assisted-suicide-law-rpci-group/>

²<https://www.rte.ie/radio/radioplayer/html5/#/radio1/21834876>.

³https://data.oireachtas.ie/ie/oireachtas/committee/dail/32/joint_committee_on_justice_and_equality/reports/2018/2018-06-25_report-on-the-right-to-die-with-dignity_en.pdf

⁴ Belgium - Commission Fédérale de Contrôle et d'Évaluation de l'Euthanasie Bi-annual Reports (<https://overlegorganen.gezondheid.belgie.be/nl/documenten/euthanasie-cijfers-voor-het-jaar-2019>)

Oregon - <https://www.oregon.gov/oha/PH/PROVIDERPARTNERRESOURCES/EVALUATIONRESEARCH/DEATHWITHDIGNITYACT/Documents/year22.pdf>

Netherlands - <https://carealliance.org.nz/https-www-bioedge-org-bioethics-dutch-euthanasia-doctor-agrees-that-there-is-a-slippery-slope-13534/>

Washington - <https://www.doh.wa.gov/YouandYourFamily/illnessandDisease/DeathwithDignityAct/DeathwithDignityData>

3) There are very few safeguards in this Bill which will protect vulnerable people

Unlike euthanasia/assisted laws in other jurisdictions (such as Oregon, or Victoria) some very basic protections are totally absent from this Bill:

- 'Terminal illness' is so vague and broadly defined in the Bill that it could easily include conditions such as early stage dementia, heart disease, lung disease and motor neurone disease.
- A terminally ill person is defined as someone who is 'likely to die' following the diagnosis of a terminal condition.⁵ 'Likely to die' does not mean a person must be near the end of their life to avail of euthanasia/assisted suicide.
- This stands in contrast with both Oregon (USA) and Victoria (Australia) where a patient must be likely to die within 6 months.⁶
- A patient merely has to request euthanasia once, before being granted access to the lethal drugs after 14 days. In contrast to Victoria, Australia, a person there must make three clear requests before being granted permission.

4) This Bill normalises suicide at a particularly vulnerable time

We have made great strides in recent years in progressing the national conversation around mental health issues. We have directly addressed our worryingly high rate of suicide.

- The *Dying with Dignity* Bill will undermine all suicide prevention principles and efforts.

Conclusion

Please oppose this bill because:

- 1) Palliative care doctors are overwhelmingly opposed to the introduction of euthanasia/assisted suicide
- 2) The number of people dying by euthanasia in every country in which it has been introduced has increased exponentially
- 3) There are very few safeguards in this Bill which will protect vulnerable people
- 4) This Bill normalises suicide at a particularly vulnerable time

⁵<https://www.oireachtas.ie/en/bills/bill/2020/24/>

⁶<https://www.oregon.gov/oha/PH/PROVIDERPARTNERRESOURCES/EVALUATIONRESEARCH/DEATHWITHDIGNITYACT/Pages/ors.aspx>;
<https://content.legislation.vic.gov.au/sites/default/files/2020-06/17-61aa004%20authorised.pdf>



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