

In states and countries that have legalized assisted suicide...



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...Patients who are not dying have been prescribed lethal drugs. Assisted suicide laws often require a patient have a “terminal disease” to receive lethal drugs. Yet the term “terminal” could broadly apply to a patient who refuses treatment (such as a patient with anorexia) and thus become “terminal” and eligible for lethal drugs.

In Colorado, at least two patients in their early 30s with anorexia received lethal assisted suicide drugs.[†] In Oregon, at least one patient with anorexia received the drugs.[†]

...Insurance companies have favored cheap life-ending drugs over continued care. With the option for assisted suicide, profit-driven health insurance companies will be given the opportunity to cut costs by denying payment for ongoing expensive treatments while approving payment for cheaper assisted suicide deaths.

There are multiple instances of this happening to patients in California and Oregon. One doctor who had patients in both states said they were denied coverage for life-saving treatment and instead offered lethal drugs, even though the patients had not requested them.[†]

...People suffering from mental illness are offered death rather than care and treatment. Those suffering from depression or similar conditions and request assisted suicide are not required to be evaluated, treated, or provided counseling. Just 3% of the more than 2,000 patients who have died by assisted suicide in Oregon since its legalization were referred for psychiatric evaluation.[†] This is despite a 2006 study conducted in Oregon that found that 25% of patients who requested assisted suicide were clinically depressed. Several of those patients received the lethal drugs anyway.[†]

...Questionable practices and misuse have occurred. Proponents of assisted suicide claim there has been no misuse of assisted suicide. Yet there is no shortage of documented instances of coercion, including a relative who appeared to engage in doctor-shopping to get approval for the death of her mother.[†] In another situation, a man with Lou Gehrig’s disease who died by assisted suicide was first convinced to entrust his estate and home to a woman, who immediately sold the home and transferred tens of thousands of dollars from the sale into her account after his death.[†]

Assisted suicide laws often permit people who could benefit financially from a patient’s death to be one of the required witnesses to the request for lethal drugs. Assisted suicide laws also generally do not require a doctor-patient relationship for a physician to write a prescription for lethal drugs.

...Safeguards implemented for assisted suicide are later called barriers and overturned. States that have legalized assisted suicide have later expanded the practice by removing regulations that were initially described as “safeguards.” For instance, California and Oregon reduced waiting periods, and New Mexico now allows nurse practitioners and physician assistants to prescribe lethal drugs.

...People in need of help and care are instead approved to end their lives. In Canada, where assisted suicide is legal across the country, one veteran was told he was eligible for assisted suicide after he asked the government for assistance for his PTSD.[†] Another veteran and former Paralympian was offered assisted suicide after requesting assistance to have a wheelchair ramp installed at her home.[†]

There are numerous stories of Canadians who chose assisted suicide after they didn’t receive assistance, including one woman who could not find housing compatible with her environmental allergies,[†] and another woman who did not find adequate treatment for her rare and painful condition.[†] ■



[†]For a complete list of citations and to read and share a digital version of the Michigan Catholic Conference’s latest *Focus* publication “I Am With You Always”, visit micatholic.org/AssistedSuicide