

Assisted Suicide

I was more than a bit shocked last month when Judge Dorothy McCarter ruled that mentally “competent, terminally ill patients” should have a constitutional “right” to self-administer life ending medications. She also ruled that physicians who prescribe the medications need not fear criminal prosecution. With that ruling, Montana became the third state to legalize physician-assisted suicide. Fortunately, the decision is being appealed by the State Attorney General asking that the State Supreme Court make a final ruling on her decision.

The decision ought to be a particularly distressing one for Montanans. Recent studies have shown Montana leads the nation in suicide based on per capita averages. It is a trend so disturbing that the Montana legislature established a “Suicide Prevention Officer” (53-21-1101) as well as a “Suicide Prevention Plan” (53-21-1102) to deal with this finding. This ruling works against this trend saying, without words, that suicide is legitimate. While affirming the value of human life at any stage, we should be attentive to the needs of family members suffering from the loss of loved ones.

I was called by one of the TV stations the day after the decision and asked to make a comment. I noted that human life by nature is sacred and that this decision was one more way by which human life is devalued in our society. As we state among a list of priorities for the Montana Catholic Conference, “We affirm policies which respect the life and dignity of those who are dying. We reject the sanctioning of suicide or assisted suicide. We support basic care for mentally or physically disabled patients, and we encourage the support of families with members needing long-term care.”

There are good reasons for opposing the assisted-suicide ruling. First, the ruling refers to the role that physicians would need to play in prescribing drugs for the purpose of doing great harm, i.e., killing the patient. I suspect that most physicians simply would not participate in this practice. Enough would, however. As such, it is important to draw attention to the Hippocratic Oath. That Oath seems to have taken a beating over the past several decades. Instead of “doing no harm” a physician who prescribes drugs for assisted-suicide would become an active participant in the process of killing. It is one more step in a series of steps that drastically change the role of some physicians in society. Legally permissible acts that once were considered impossible just a few decades ago, are now commonplace occurrences: abortion on demand through nine months of pregnancy, including the procedure known as partial-birth abortion; allowing disabled children to die following pre-term delivery; “hastening” a patient’s death through dehydration and starvation as opposed to allowing a natural death; and now assisted suicide. These procedures are difficult to square with an aspiring doctor’s pledge: “I will prescribe regimen for the good of my patients according to my ability and my judgment and *never do harm to anyone.*” In addition to the actual harm being done, the question remains, “What next?!”

Second, assisting in the suicide of a patient undermines confidence in physicians. As medical care moves in this direction, the more likely it is that other death

dealing procedures will become acceptable. As I noted earlier, procedures such as partial-birth abortion were only a couple of decades ago considered unthinkable. Now it is acceptable among a significant section of medical practitioners. When assisted-suicide becomes as acceptable, patients may very well wonder which physicians they can trust when they are in the midst of a serious illness and experiencing suffering.

Third, a person does not really own him/herself. The concept of having respect for all human life is based on an appreciation that life is a gift from God. Because life comes from God, it is essentially sacred, even when it outwardly appears ugly, deranged or seriously impaired. We do not own ourselves. God does! While it certainly is understandable why an individual would want to end suffering, palliative care and the support and concern of family and friends does much to ease what might otherwise be unbearable suffering. To take one's life (or assist someone in taking another's life) is to play the role of God.

Some would say that an individual has a "right" to take his or her own life. A "right" is that which is due to a person based on one's nature. It is human nature to live and to avoid death. While death is paradoxically a part of life, the "right" which people have is the right to life. Death is a privation of life and not a good. It is why Christ came to die on a cross and then rise from the tomb. He embraced death, not to remain dead, but to overcome it once and for all.

Fourth, legally assisted-suicide could easily be misused by unscrupulous people to take advantage of a person who is ill and/or suffering from physical illness or emotional distress. A person who is ill could easily be manipulated into making a terrible decision to end his or her life, for instance, for someone to inherit the estate. It might be misused in order to eliminate a family member who is considered a burden. Finally, it could be the case a particular physician could judge him/herself that a patient would be better off dead because of their present illness, and then talk the patient into it.

Allowing assisted-suicide to become legal is simply a bad ruling, one that harms not only particular individuals but also the common good. It misunderstands the notion of an individual right. It devalues human life in society. It is one more slip down what has already been an all too slippery slope!