



Australian CareAlliance

“Care and Compassion: Opposing Assisted Suicide.”

Dear Member of Parliament

Speaking, on Tuesday 7 May, to a group of Western Australian MPs and later that week at the Victorian Voluntary Assisted Dying Implementation Conference, Dr James Downar, a leading proponent of euthanasia and the first doctor to carry out euthanasia in Ontario, made it crystal clear that euthanasia was primarily carried out for what he called "existential suffering" and not because palliative care could not adequately treat pain and other physical symptoms.



Dr Downar, who on his own admission has intentionally ended the lives of over 40 people by administering a lethal injection, describes the typical case of euthanasia as involving a "captain of industry, self-willed, a giver not a taker" - or at least, he adds, seeing himself that way - who simply wants to exercise control over the timing and manner of his exit rather than to die in an (ordinary) haphazard manner.

He also stressed that the eligibility criteria for access to euthanasia were all subjective and that "there are no absolute gold standards for identifying coercion."

One key "existential" grounds for requesting assisted suicide identified in the 2018 data from Oregon is a concern about being a "*Burden on family, friends/caregivers*". More than half (54.2%) of those who died from prescribed lethal drugs cited such a concern as a reason for the request. For a further 14.9% of cases (nearly one in seven cases) the attending physician reported not knowing if the person who requested lethal medication and subsequently died after ingesting had a concern about physical or emotional burden on family, friends or caregivers. (This means the doctor didn't even bother exploring this question with the person and may have missed signs of coercion by not asking relevant questions.)

In the mandatory training which doctors in Victoria must undertake before assessing people for assisted suicide or euthanasia they are being told that if a patient indicates that "*becoming a burden on family, friends and caregivers*" is their reason for seeking assisted dying this could be the "*patient's expression of suffering experienced from the loss of autonomy*".

A recent [opinion poll](#) carried out in New Zealand found that when asked "Would you like New Zealand to have a law that would allow a terminally ill person to receive a lethal injection because they feel they are a burden?" only 25% said YES and 63% said NO.

Please consider this aspect of euthanasia and assisted suicide as it is actually practiced before changing the law in your State to allow it.

Read more on this issue [here](#).

Regards,

A handwritten signature in cursive script that reads "John Buchanan".

Dr John Buchanan
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