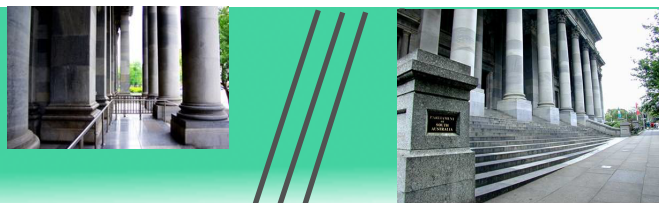


# End of Life Choice



Newsletter on current debates

## The case for AMA Neutrality on Assisted Dying

**Dr Brian Owler, a neurosurgeon, and former head of the Australian Medical Association (2014-2016) is currently chairing the Victorian Government's Ministerial Advisory Panel on Voluntary Assisted Dying. Two prominent South Australian Palliative Care Physicians have also been appointed to the Panel: Em Prof Ian Maddocks, AM, and Dr Roger Hunt. The Panel will advise the Victorian Government on a compassionate and safe legislative framework for assisted dying. The seven member Panel meets fortnightly and is due to report to the Victorian Government in July.**

The Panel was established in response to the 2015 report of the Legal and Social Issues Committee's *Inquiry into End of Life Choices* which recommended an assisted dying framework 'to allow adults with decision-making capacity who are suffering from a serious and incurable condition and who are at the end of life to be given assistance to die in certain circumstances'.

Dr Owler stated that it was hearing the stories of other people having terrible deaths that led him to believe that there is a role for assisted dying and that medical professionals have to examine their appropriate role within that. This has been a recurring theme in the quest for voluntary euthanasia law reform; reflected in the changing views of MPs whose personal lives have been blighted by the suffering of loved ones. In the Guardian newspaper (June 28) Dr Owler said "My knowledge of the AMA, of how medicine works, can be an advantage in making sure the legislation can be as good as it can be, in terms of not only supporting patients but also supporting medical practitioners as well."

The Inquiry Report made clear that the assisted dying framework is intended to allow an option which can limit the extent of suffering at the end of life, but is not a way to end life for people who are not dying. Under this framework no doctor, other health practitioner or health service will be forced to

participate in assisted dying. The basis of deliberations is that any law would apply only to adults with decision-making capacity, suffering a serious and incurable condition, and who are at the end of life. In most cases, doctors would prescribe lethal drugs to an eligible patient who would take them independently. Dr Owler said that the legislation would be very 'narrow' and 'conservative' and not apply to people with dementia, depression or psychiatric illness.



**Dr Brian Owler, neurosurgeon and former AMA President**

In South Australia, a similar 'narrow' and 'conservative' Bill, the *Death with Dignity Bill* 2016, was narrowly lost on the vote of the Speaker in November 2016. Draft legislation had faced opposition from the AMA and religious bodies. The AMA traditionally takes a conservative stance on health policy, and actively campaigns against assisted dying legislation. However, in reflecting on the way that public issues are inevitably influenced by private concerns, Dr Owler stated that it was his father's 'terrible death' from dementia which convinced him to support assisted dying legislation.

In 2016 the AMA surveyed its 30,000 members and found that 49.8% of respondents agreed with the policy that doctors should not be involved in interventions to end a patient's life, while a significant minority, 38.1%, took the view that doctors should be involved; with the rest undecided.

**Dr Owler said that if views of AMA members on such an issue as assisted dying are polarised, the association which represents approximately 30% of doctors, should consider adopting a neutral position, instead of one of opposition. The Victorian branch of the AMA is not actively campaigning against the proposal for law reform. While remaining opposed to voluntary euthanasia and assisted dying the association states that it 'wants a say' if such legislation is to be introduced.**

The AMA revised position statement on Euthanasia and Physician Assisted Suicide (PAD) in 2016 –

revised following its member consultation - states that "there are some instances where it is difficult to achieve satisfactory relief of suffering," and that "doctors have a responsibility to provide care which strives to ensure that a dying patient is free from pain and suffering".

**The statement continues "A patient's request to deliberately hasten their death by providing either euthanasia or PAD should be fully explored by their doctor ... Understanding and addressing the reasons for such a request will allow the doctor to adjust the patient's clinical management accordingly or seek specialist assistance." This policy exactly mirrors the principle behind the criteria of "unbearable and hopeless suffering" central to the Voluntary Euthanasia Bill 2016 tabled by Hon Steph Key MP.**

The Bill proposed that when a patient found their suffering no longer bearable, they could request euthanasia; the doctor would take this as a signal to explore further treatments to make the suffering bearable; this two way process would continue until the doctor could identify no further treatments acceptable to the patient which could make their suffering bearable; at this point their situation would be defined as hopeless; only then would the person meet the criteria for euthanasia or PAD.

The Medical Board of Australia's Code of Conduct states, in part, 'Good medical practice is patient-centered. It involves doctors understanding that each patient is unique, and working in partnership with their patients, adapting what they do to address the needs and reasonable expectations of each patient'. The well-established expectation of Australians is the need for an assisted dying framework such as that under consideration in Victoria. The AMA is well placed to take the opportunity to 'have a say' while being 'part of the solution'. Doctors Owler, Maddocks and Hunt are modelling such behaviour and providing their considerable expertise to ensure that the best compassionate and safe legislation is presented to the Victorian Parliament.

### References

Davey, M & Alcorn, G 'Former AMA head says father's 'terrible death' led him to support assisted dying' [https://www.theguardian.com/society/2017/jun/28/former-ama-head-says-his-fathers-terrible-death-convicted-him-about-assisted-dying?CMP=share\\_btn\\_link](https://www.theguardian.com/society/2017/jun/28/former-ama-head-says-his-fathers-terrible-death-convicted-him-about-assisted-dying?CMP=share_btn_link)

Medical Board of Australia 'Good Medical Practice: A Code of Conduct for Doctors in Australia' <http://www.medicalboard.gov.au/Codes-Guidelines-Policies/Code-of-conduct.aspx>

# SAVES

South Australian Voluntary Euthanasia Society

*saves.asn.au*

Compassion for suffering  
The freedom to choose  
Add your voice to the call

SAVES was established in 1983 to campaign for legal, medically assisted choice in end-of-life arrangements. The aim is to relieve suffering by providing choice for people at the end of their life. SAVES works in the community and with Members of Parliament to achieve law reform.

## In NSW

About 60 per cent of doctors in NSW support the draft Voluntary Assisted Dying Bill and fewer than 30 per cent oppose it, according to a survey by market research company Ekas emailed to a database of 4000 NSW doctors it deemed "opinion leaders" and returned by about 500.

A smaller sample of about 100 nurses had support running at 80 per cent in favour of the law reform and opposition at fewer than 10 per cent.

A crowd-funding campaign for **Annie Gabrielides, a motor neurone disease sufferer** who has progressively lost her ability to speak and is a euthanasia advocate, paid for the research.

"I'm consistently hearing from doctors and medical experts expressing their sincere support of my campaign, but they're reluctant to speak out," she said.

(SMH, June 24, 2017)

## In Victoria

Anti assisted dying campaigner Dr William Toffler, a member of the Catholic Medicine Association in the USA, and invited to Australia by Right to Life, met with Members of Parliament in Victoria last week. His advice was

"If Australia wants to embrace this, I want you to know - I would not be in favour of it - but I want it not to be in the House of Medicine. Perhaps you should have veterinarians, who have training and skill in giving overdoses to living things, living animals. I'm not recommending this, don't misquote me, but at least you'd keep the House of Medicine from an apparent conflict of interest and you'd have trust in your doctors."

(The Age, July 2, 2017)

## Voluntary Euthanasia Advocacy Groups

Christians Supporting Choice for Voluntary Euthanasia  
[christiansforve.org.au](http://christiansforve.org.au)

Doctors for Assisted Dying Choice  
[drs4assisteddyingchoice.org](http://drs4assisteddyingchoice.org)

South Australian Nurses Supporting Choices in Dying  
facebook: [SA Nurses Supporting Choices in Dying](https://www.facebook.com/SA-Nurses-Supporting-Choices-in-Dying)  
My Body My Choice

facebook: [facebook.com/pages/MY-BODY-MY-Choice-VE](https://www.facebook.com/pages/MY-BODY-MY-Choice-VE)

Voluntary Euthanasia Youth Advocates  
facebook: [Support SAVE-YA Law Reform](https://www.facebook.com/Support-SAVE-YA-Law-Reform)

Lawyers for Death with Dignity  
[saves.asn.au/lawyers](http://saves.asn.au/lawyers)

## Resources

Andrew Denton's GoGentleAustralia website  
<http://gogentleaustralia.org.au>

SAVES End of Life Choice Newsletters  
<http://www.saves.asn.au/newsletters.php>

The Wheeler Centre podcasts Better Off Dead  
<http://www.wheelercentre.com/broadcasts/podcasts/better-off-dead>

The Voluntary Euthanasia Story: the epic journey to make it legal - Adelaide forum, June 2015  
<http://www.saves.asn.au/resources.php>

