AGAINST HB 1135 Physician assisted suicide

2 February 2015

Letter to our Legislators:

I am a long time practicing physician in Pueblo, CO, and the president of the Sangre de Cristo Guild of the Catholic Medical Association.

I am writing to ask you to discard HB 1135 dealing with physician-assisted suicides. The reason I am requesting that you NOT pass any legislation in this regard is that to sanction the taking of innocent human life is to contradict a primary purpose of law in an ordered society. A law allowing assisted suicide would demean the lives of vulnerable patients, exposing them to exploitation by those who feel those patients are better off dead. Such a policy would corrupt the medical profession, whose ethical code calls on physicians to serve life and never to kill. The voiceless or marginalized in our society -- the poor, the frail elderly, racial minorities, millions of people who lack health insurance -- would be the first to feel pressure to die.

Furthermore, suicidal wishes among the terminally ill are no less due to treatable depression than the same wishes among the able-bodied. When their pain, depression and other problems are addressed, there is generally no more talk of suicide. If we respond to a death wish in one group of people with counseling and suicide prevention, and respond to the same wish in another group by offering them lethal drugs, we have made our own tragic choice as a society that some people's lives are objectively not worth protecting.

In an era of utilitarian thinking and concerns over cost control and managed care, patients with lingering illnesses may be branded an economic liability, and decisions to encourage death can be driven by cost. Former U.S. Solicitor General Walter Dellinger warned in urging the Supreme Court to uphold laws against assisted suicide: "The least costly treatment for any illness is lethal medication."

Additionally, many people with disabilities have long experience of prejudicial attitudes on the part of able-bodied people, including physicians, who assume they would "rather be dead than disabled." Such prejudices could easily lead families, physicians and society to encourage death for people who are depressed and emotionally vulnerable as they adjust to life with a serious illness or disability. To speak here of a "free choice" for suicide is a dangerously misguided abstraction.

Finally, the American Medical Association holds that "physician-assisted suicide is fundamentally incompatible with the physician's role as healer." The AMA, along with the American Nurses Association, American Psychiatric Association and dozens of other medical groups, urged the Supreme Court in 1997 to uphold laws against assisted suicide, arguing that the power to assist in taking patients' lives is "a power that most health care professionals do not want and could not control."

Thank you,

Kenneth D. Dernovsek, MD, President of the Sangre de Cristo Guild of the Catholic Medical Association