

LEAVE OREGON'S DEATH WITH DIGNITY ACT ALONE

House Bill 2217 seeks to recklessly expand an already dangerous public policy.

In 1994, the citizens of Oregon voted to allow terminally ill patients to shorten their lives within a certain framework. One of the physicians in our practice, Dr. Peter Rasmussen, was a strong advocate for the Oregon Death with Dignity Act.

Under the current Death with Dignity Act, if the patient obtains the lethal prescription, the patient alone must voluntarily and without assistance, consume the prescribed medication. House Bill 2217 is one of four bills to expand assisted suicide in Oregon. This bill would allow the patient to "self-administer" lethal medication other than by swallowing the medication. Most patients would require a great deal of direct medical assistance to be able to take medication other than by swallowing, thereby requiring direct medical assistance to end their lives through assisted suicide.

As a practicing oncologist, my observation, which is confirmed in the medical literature, is that many who have chosen death with dignity are well educated and successful. They chose to shorten their lives due to fears of loss of autonomy, loss in the enjoyment of life, and loss of dignity which occurs with a gradual dying process. Few choose death with dignity due to uncontrolled pain.

The American Medical Association and many other medical organizations have stated unequivocally that it is unethical for physicians to select injection sites, start intravenous lines, and supervise administration of lethal drugs in prisoner executions. These acts would violate a doctor's Hippocratic Oath to do no harm. The same moral concerns would be present should a physician use their medical skills to purposely shorten a terminally ill patient's life.

House Bill 2217 will ask medical professionals to actively assist terminally ill patients in the shortening of their lives. It is extraordinarily evil to ask medical professionals, who have dedicated their lives to prolonging human life and to relieving pain and suffering, to purposely shorten their patient's lives. For all of these reasons, House Bill 2217 should not become law in Oregon. Leave Oregon's Death with Dignity Act alone.

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