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On Behalf Of:

Committee: Senate Committee On Judiciary

Measure, Appointment or Topic: SB1003

As an Oregon voter, I urge legislators to oppose SB 1003. One of the proposed Bill's features of particular concern is that it decreases the current 15-day waiting period to a mere 48 hours. I think we all can think of decisions we've initially made, and then wisely changed our minds to take a different action -- and been glad we did! With a decision as deeply critical as assisted suicide, it simply does not make sense that we would reduce the waiting period in this way.

This is particularly true because the 48-hour waiting period gives medical professionals and family little time to offer alternatives to a patient considering assisted suicide. Consider the following statement and the referenced supporting studies (cited at the close of this text):

"Regarding emotional pain and depression, most cases of depression can be therapeutically resolved with appropriate medication. [Ref.1] Since 90-99% of pain can be adequately treated, and since much of the depression associated with a terminal illness can be reversed through therapy, love of family and friends, and the understanding of physicians [Ref.2], the vast majority of suicide requests are reversed when these conditions are met. [Ref.3]"

Just a note about my background -- I worked with seniors in independent and assisted living, as well as skilled nursing, for many years -- work that I truly enjoyed. I know that seniors can be deeply concerned about being a burden to others. If SB 1003 is enacted, families have little time to reassure a senior family member of their worth and value.

For these reasons, I urge legislators to oppose SB 1003.

References:

- 1- Hendin, MD, H. (2004, February 1). Commentary: The Case Against Physician-Assisted Suicide: For the Right to End-of-Life Care. Psychiatric Times, 21(2).
- 2- Foley, K.M., & Hendin, H (Eds.). (2004). The Case Against Assisted Suicide: For the Right to End-of-Life Care. John Hopkins University Press.
- 3- Foley, K.M. (1991, July). The relationship of pain and symptom management to patient requests for physician-assisted suicide. Journal of Pain and Symptom Management, 6(5), 289-297. National Library of Medicine.

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