Oregon SB 1003

I am writing to you in opposition of SB 1003. Although I am not a resident of Oregon, I am a practicing physician from Wisconsin with 37 years experience, as well as a Master's degree in Bioethics. What SB 1003 is dangerous not only for Oregon, but for the rest of the country as well. Assisted suicide has been shown repeatedly to be very difficult to police and invariably fraught with abuses. Experience in the Netherlands and Canada have underscored this. Expansion of this misquided practice is does no favors to your state or mine. Many advocacy groups representing the mentally handicapped, disabled, and minorities have grave concerns about the potential misapplication of this approach and it's likelihood of opening yet another chapter of under treatment and injustice in what has already been a long sad history. When did the promotion of patient suicide become enough of a priority to require it being posted in every hospital, shortening wait times, allowing non-physicians who are less qualified to assess a critical patient and have no ongoing relationship with them, now offered to out of state residents? Studies have repeatedly shown that pain and suffering are virtually NEVER the reason patients seek out this option. The number one issue is a fear of loss of autonomy, being a burden, and the risk of financial loss. Think of the potential for coercion and manipulation not only in your own state, but now promoted to those outside. Is this really the best option for those dealing with the crisis of severe illness? Compassionate care addresses the fears, practices true presence, and upholds the patient throughout all the phases of their life, including dying. You in the great state of Oregon can and should do better.