SENATE JUDICIARY
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Bill No. SB202

Physician Assisted Suicide (PAS) – Dangers to Society: Being on the Right Side of Science, History, and Truth – Against SB 202

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Dr. John Hardwig, a Bioethicist at Eastern Tennessee Medical School said:

> *"The whole family is affected when a member's care must be paid. Society must abandon patient centered bioethics and do what is best for all concerned. It's wrong for a family member to choose what is best for themselves. There are burdens that are too great to legitimately ask others to bear. Therefore the patient has a duty to reject life-prolonging medical care and to* ***take their life even in the absence of a terminal illness****."*

Nearly a decade ago, former Governor Richard Lamm of Colorado said: *"Older groups in our society have a duty to die to* ***get out of the way*** *for the younger generation."*

In Holland two thirds of the doctors think PAS is acceptable for those who have **no physical illness** even if they're just depressed. In Oregon's Medicaid system they have a list of diseases they will treat. If you have less than a 5% chance of survival in five years they will not pay for the treatment, but they will pay for your PAS. There is no machine that measures whether you have only six months to live. Forty percent of cancer patients who are told they have six months live, live longer.

Ideas have consequences, they also have histories… and agendas. Once you decide there are **lives not worthy to be lived, where do you draw the line?** Somebody gets to decide who they are. Will it be you in this chamber? Remember, ***Policy Promotes Practice*** !

"Compassion and Choice" or "Death with Dignity" – verbal engineering always precedes social engineering and the well-funded *LEFT* are experts at it. I spend most of my time dialoging about conflicting worldviews. What we are seeing here is evidence of an ever-widening schism between an Orthodox Christian worldview – shared, by the way, in this issue by Judaism and Islam – and *Secular Humanists* broadly known as *Progressives*.

My specific concern is that this is Dangerous for Society - It is a very slippery slope. This bill would damage the moral-ethical base of medicine and of our culture. A question of interest here is who is on the wrong side of history and science – and more importantly on the right side of truth? Over and over we see Humanists trot out their *ad hominem arguments* that "you're **ignorant… out** of **step with science…. hateful**… **insensitive… bigoted** if you believe in creation, oppose abortion or same-sex marriage. And now you're insensitive and on the wrong side of history and science if you don't allow doctors to help people committee suicide.

Senators, it's the same group almost to the person making their case to transform the ETHICS of America. Their contention that this will end here and not evolve is in conflict with **their stated goals** and with **what we see happening** where this immoral idea has been adopted.

History - like most other dangerous ideas, this one is not new. Before Hippocrates, doctors both killed and cured. This oath was written B.C. It contained the ideas ***"I will do no harm"*** and ***"I will comport myself and use my knowledge in a godly manner."*** There was a time when you could not enter into medical training until you had taken this oath.

In 1948, in the ***Declaration of Geneva*** the World Medical Association (WMA) updated this oath and called for its restoration. After World War II the WMA showed concern over the state of medical ethics in general. They called for ethical guidelines for the world physicians and noted that in those years the custom of medical schools to administer an oath to its doctors upon graduation had fallen into disuse – just as it has today. In Germany during the **Third Reich** medical students did not take the Hippocratic Oath. It would have been inconsistent with the **ethic of Hitler and his tutor Margaret Sanger**.

Increasingly since the 1960's this oath has been radically revised and secularized. This coincides with the dramatic theological shifts as liberal segments of the church have embraced Secular Humanism's influence in many professions. **Historically speaking, Western medicine prospered because it was built on <u>trust</u> and promoted safe culture**. It has only been in places where the ethics of western culture have been abandoned that this evil has become accepted. What you are seeing is more historical revisionism.

The science is easy - if you give someone a lethal injection they will probably die. But what about the alternative scientific methods? The most common reason people take this step is depression and yet it is the easiest to treat. Ninety five percent of those who commit suicide have a major psychiatric disease, but few ever have a physiological exam before taking their lives. **Depression in the terminally ill can be treated. But it takes six weeks** for an antidepressant to take effect and we can get a PAS done in two weeks. Pain from illness is indeed an issue, but many things can be done to manage pain. Are we focusing on this or on the easy answer? In the states where this is happening, surveys show that **<u>only</u> 27% of those choosing PAS list pain as their primary concern.**

Europeans that have adopted this practice have seen a consistent progression. They have progressed from physician-assisted suicide to voluntary euthanasia, then <u>in</u>voluntary euthanasia. The right was given to the terminally ill, then the chronically ill, the mentally ill, the disabled and finally those not ill at all.

A huge cultural issue is the elderly. In Holland where PSA has been practiced since the 1970's, 60% of the elderly are fearful that their lives will be ended against their will and 93% of patients living in nursing homes are opposed to PSA. We hear many testimonies of elderly who have been made to feel guilty for living on and being a burden.

There are almost **no standards for Doctors** – as long as they *meant to do the right thing*, they are off the hook. Finally, we see **a cloak of secrecy** around this. The State cannot let anyone know who the patient or doctor were and they have to destroy the form after it is recorded. So we have no data base to see how this is working. The cause of death on the death certificate does not show anything about suicide. **So remember, Policy Promotes Practice!**