

# Dutch group launch mobile mercy killing teams

February 29 2012, by Jan Hennop

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Six specialised teams, each with a doctor, will criss-cross the Netherlands as of Thursday to carry out euthanasia on patients at home whose own doctors refused to do so, a pro-mercy killing group said.

But the plan by the Right-to-die NL (NVVE) has raised eyebrows by one of the Netherlands' largest lobby groups for doctors, who questioned whether "Life-end clinic" doctors would be able to form a close-enough relationship with a patient to correctly assess if their life should be ended.

The Netherlands became the first country in the world to legalise euthanasia in April 2002 and yearly some 3,100 mercy killings are carried out, NVVE spokeswoman Walburg de Jong told AFP.

"From Thursday, the Levensindekliniek (Life-end clinic) will have mobile teams where people who think they comply to the criteria for euthanasia can register," she said.

"If they comply, the teams will carry out the euthanasia at patients' homes should their normal doctors be unable or refuse to help them."

Made up of a specially-trained doctor and nurse who will work part time for the Life-end clinic initiative, teams will be able to visit patients all over the Netherlands, De Jong said, adding the procedure would be done free of charge.

The NVVE said the teams were expected to receive around 1,000 assisted suicide requests per year and have already been phoned by 70 potential patients since the plan was announced in early February.

Strict criteria exist in Dutch law for patients who request mercy killings.

These include that patients must be fully mentally alert when making the request to die. Families, for instance, cannot request a mercy killing for relatives.

Patients also have to face a future of "unbearable, interminable suffering" and both the patient and the doctor -- who also has to get a second opinion from another doctor -- before euthanasia is carried out, must be in agreement there was no other cure.

The assisted suicide is then performed by infusion or injection of a sleep-inducing drug, followed by a barbiturate to stop a patient's heart and breathing, De Jong said.

Each euthanasia case is reported to one of five special commissions, each made up of a doctor, a jurist and an ethical expert charged with verifying that all required criteria had been respected.

The plan received the thumbs-up from Dutch Health Minister Edith Schippers who told the Dutch parliament she would not oppose it as it fell within current Dutch legislation.

"Right-to-Die NL, the organisation behind the clinic and the teams has stressed it will comply with the criteria set out in the Act," her spokesman Ole Heil told AFP.

But the Royal Dutch Society of Doctors (KNMG), which represents 53,000 doctors and medical students in the Netherlands, said it was

sceptical whether Life-end clinic doctors could form a close-enough relationship with a patient to decide whether an assisted suicide should be done.

"We are not against euthanasia if there is no other alternative," KNMG policy advisor Eric van Wijlick told AFP.

"But euthanasia is a complicated process. It comes from the long-time treatment of a patient based on a relationship of trust."

"A holistic view of the patient's treatment needs to be taken, including whether another alternative to euthanasia exists," he said.

"We have serious doubts whether this can be done by a doctor who is only focused on performing euthanasia," he said.

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