

Colorado right-to-die bill gets first public hearing

February 6 2015, byIvan Moreno

(AP)—Dozens of people with serious illnesses and others who have seen relatives suffer packed a Colorado legislative hearing Friday to testify on a proposal that would give dying patients the option to seek help ending their lives.

The pending legislation puts Colorado among a handful of U.S. states currently considering laws to allow the terminally ill to get doctor-prescribed medication to die.

Several hours of testimony are expected before a House committee decides whether to advance the proposal, and its chances of passing are unclear. It's an issue that crosses party lines, and Colorado has a libertarian streak evident among Republicans and Democrats.

Some doctors and religious organizations oppose the measure, saying it facilitates suicide and takes away a patient's hope of a possible recovery. But supporters argue that <u>terminally ill patients</u> should control when they die.

Five states allow patients to seek aid in dying: Oregon, Washington, Montana, Vermont and New Mexico. Pennsylvania, Wyoming and California have pending proposals. Colorado's hearing came on the same day that Canada's highest court struck down a ban on doctor-assisted suicide for mentally competent patients with terminal illnesses.

The story of Brittany Maynard last year spotlighted the debate over



whether doctors should be able to prescribe life-ending medication to patients. Maynard, 29, moved from California to Oregon after being diagnosed with terminal brain cancer so she could use that state's law. She died Nov. 1.

Colorado's bill is modeled after Oregon's. It would require dying patients to get two doctors to sign off on their verbal and written requests to end their lives. Patients must also be found to be mentally competent, and they have to be able to administer the life-ending medication themselves.

One of the opponents to the bill is Carrie Ann Lucas, who spoke on behalf of Not Dead Yet, a New-York based disability rights group.

Lucas uses a wheelchair and ventilator because of a neuromuscular disease. She told lawmakers that she worries the proposal would make it easy for a disabled person who is depressed to get medication from a doctor. Without her ventilator, Lucas told lawmakers, she would have only hours to life. And, she said, if she were to get depressed, she thinks she could go to a doctor who doesn't know her well to get the drugs.

"And they probably would give me that lethal prescription instead of referring me to mental-health treatment that I would so desperately need," said Lucas, 43.

David Hibbard, 77, told lawmakers that as a hospice physician for the past 15 years, he knows what to expect once his Parkinson's disease and leukemia advance.

"I will be hunched over, either bed-bound or in a wheelchair," he said. He would be unable to talk and feed himself, Hibbard told <u>lawmakers</u>.

"I don't want to endure this scenario, and I certainly don't want to have my family, my wife and my three children, have to endure watching me



go through this rapid deterioration," he said.

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