

# Case for assisted dying 'stronger than ever' says The BMJ

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A series of articles published by *The BMJ* today, explore the debate around assisted dying, in which, subject to safeguards, terminally ill people who are near to death, suffering, and of sound mind, could ask for drugs that they would take to end their lives.

They include a call for the BMA to poll its members or stop opposing [assisted dying](#), personal accounts by a Dutch doctor who has helped terminally ill patients to die and a British patient who wants assisted dying, and a debate on the question: should doctor assisted dying be legal?

Jacky Davis, Consultant Radiologist at the Whittington Hospital in London, points to a recent survey showing that most UK doctors support legislation for assisted dying, while a 2015 poll showed that about 80% of the UK public support a change in the law. Yet the BMA, which represents UK doctors, has long been opposed to assisted dying, despite calls for it to adopt a neutral stance.

Davis, who is also a member of BMA Council, a board member of Dignity in Dying, and chair of Healthcare Professionals for Assisted Dying, argues that the current disconnect between BMA policy and the views of doctors and patients "undermines the BMA's credibility, and its continuing opposition excludes it from the [public debate](#)."

Assisted dying does not represent a leap into a dangerous unknown, she explains. Other jurisdictions, such as the US state of Oregon, have

proved that it is possible to change the law, and doctors have shown that such laws can work hand in hand with excellent palliative care.

"Ultimately legalisation for assisted dying will be a decision for UK society," she writes.

In a linked commentary, Bobbie Farsides, Professor of Clinical and Biomedical Ethics at the University of Sussex, argues that palliative care and assisted dying are not mutually exclusive.

An important debate is happening in wider society, she says. "Patients are more aware than ever of what is, and is not, possible for them as they approach the end of their lives, and practitioners need to be prepared and able to respond compassionately."

Rather than fighting against a possible future in which dying people could get medical help to die, she urges health professionals "to think about how they would negotiate such a future in the the best interests of their patients."

More than a quarter of Americans and Canadians now have the legal option of choosing a medically assisted death, since California and Canada legalised the procedure in 2016, explains journalist Bob Roehr.

While rhetoric from opponents of assisted dying "creates the impression among the public that most doctors are opposed to assisted dying," he writes, data suggest otherwise - and once adopted, controversy tends to subside.

Sabine Netters, a consultant in medical oncology in The Netherlands, reflects on how it feels to help a terminally ill patient to die a dignified death. "The debate about assisted dying tends to focus on medical and legal aspects," she writes, "but little is said about the emotional impact on the professionals involved."

Sarah Jessiman, a patient living with terminal cancer, explains why she thinks doctors should support the campaign to legalise assisted dying in the UK. "I'm terrified of the sort of death I may have to face," she writes. "I would draw huge comfort from knowing that I could say "enough" when I can no longer endure my illness, so I can die at home, supported by the people I love most."

She adds: "I don't want to go to Switzerland, and I don't want to attempt suicide. Why can't I die as I live—in an open and honest way?"

Finally, two senior doctors debate the question: should doctor assisted dying be legal? Bernard Ribeiro, a retired surgeon and life peer, argues that assisting suicide would damage trust between [doctors](#) and patients and "is a matter for the courts, not for the consulting room."

But Terence English, a retired cardiac surgeon, says claims that assisted dying would undermine [palliative care](#), or put society's most vulnerable people at increased risk of abuse, are not borne out by the evidence. He argues that safeguards in the proposed legislation "provide both safety for the majority and an option for that relatively small number of people who would wish for this degree of control over their final days."

"*The BMJ* supports the legalisation of assisted dying," says Dr Fiona Godlee, Editor in Chief. "The great majority of the British public are in favour and there is now good evidence that it works well in other parts of the world, as a continuation of care for [patients](#) who request it and are in sound mind. We believe that this should be a decision for Society and Parliament, and that medical organisations should adopt at least a neutral position to allow an open and informed public debate."

**More information:** Personal View (Jacky Davis):  
[www.bmj.com/content/360/bmj.k301](http://www.bmj.com/content/360/bmj.k301)

Commentary (Bobby Farsides): [www.bmj.com/content/360/bmj.k544](http://www.bmj.com/content/360/bmj.k544)

Feature (Bob Roehr): [www.bmj.com/content/360/bmj.k503](http://www.bmj.com/content/360/bmj.k503)

Essay (Sabine Netters): [www.bmj.com/content/360/bmj.k116](http://www.bmj.com/content/360/bmj.k116)

Patient Commentary (Sarah Jessiman):

[www.bmj.com/content/360/bmj.k542](http://www.bmj.com/content/360/bmj.k542)

Head to Head (Terence English/Bernard Ribeiro):

[www.bmj.com/content/360/bmj.k562](http://www.bmj.com/content/360/bmj.k562)

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