

March 1, 2015

(For forwarding to MPs drafting bill on MAID)

Re. Update of my first input about MAID *

1. "Consent" or "Choice"

In my February submission I recommended that the word "consent" be avoided, since it has overtones of paternalism and may even suggest to some people that a type of cull will occur. The phrase "informed consent" is used in the PDAM committee's report (e.g. pages 15-18) but I think that "informed choice" would be better.

Right-to-die supporters often speak of choice; at least two Canadian groups use or have used the word in their name (Choice In Dying Ottawa, and Choices in Dying Victoria).

The "choice" idea also ties in better with the "informed" idea. In my first message I suggested that a menu situation would be the norm: "When matters have reached a certain stage, the doctor will present the patient with a list of possible next steps, one of them being assisted dying. After outlining the advantages and disadvantages of each option, he or she will give the patient some time to think, and perhaps to consult with significant others."

In the Belgian booklet for which I served as editor of the English translation there is a sample request-for-MAID note:

"I am completely aware of my health situation and life expectancy. I suffer from continuing physical and psychological pain which can no longer be relieved. Since pharmaceutical treatment is now futile, I wish to discontinue it. I consider euthanasia to be my **best option.**" (emphasis added)

I believe that wordings involving choice among options would be good expressions of the way many patients see things. My original suggestions ("clearly desires death" or "clearly wants to stop being alive") are a little stark, and may only apply infrequently – it is quite common for someone to say "I don't actually want to die, I want to live, but I want to live in a way which apparently is no longer possible for me."

The phrasing in a bill could incorporate some of the necessary qualifiers – e.g. (MAID would be available to people who) "after receiving full information about all the possibilities in their case, and reflecting adequately, have freely decided that euthanasia or assisted suicide is their best option."

2. Some dated terminology

I was showing my age when I wrote "written or videotaped advance directives" (third line in third paragraph under (1) on first page). Of course tape is no longer involved. I should have said "paper or video advance directives".

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* http://www.parl.gc.ca/Content/HOC/Committee/421/PDAM/Brief/BR8092319/br-external/2016-02-08_brief_Ruth_von_Fuchs_e-e.pdf