



PATIENTS RIGHTS ACTION FUND

Opposing the Legalization of Assisted Suicide

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Tragedy upon tragedy

Brittany Maynard's story prompts empathy and heartbreak. But what implications for future patient diagnosis and care are we missing? Inside, a response to Brittany's death, and why we need to pay attention to the consequences.

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Tragedy upon tragedy

A RESPONSE TO BRITTANY MAYNARD



The Brittany Maynard story is tragic: 29 years old, newly-married, hoping for children, and her whole life ahead of her. All her hopes are dashed with a terminal cancer diagnosis. Every heart who hears the story goes out to her.

Another tragedy in this story is that Compassion & Choices, formerly the Hemlock Society, is using Brittany's personal anguish to push their political agenda for the legalization of assisted suicide, as she used her last weeks before her chosen suicide day of November 1 to advocate for all states to legalize assisted suicide. This tragedy comes in tens of thousands of misdiagnoses or misprognoses. It comes in pressure from a faceless healthcare system or an individual's potential heirs.

The tragedy comes as a desperate decision by illness-induced clinical depression. The greater tragedy is in making assisted suicide a medical public policy that lends itself to the

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abuse of less fortunate patients, elderly, and disabled. If assisted suicide is made into just another medical 'treatment option', the less fortunate may be given no other option by their HMO or the budget-starved government bureaucracies providing health coverage for most poor and elderly Americans.

Do you know Barbara Wagner? In 2008, the Oregon state-run Health Plan refused to pay for her cancer treatment, but offered to front the cost of suicide pills. Does that sound like Compassionate care? Barbara Wagner didn't have a Choice because of someone's bottom line. Legal assisted suicide made Barbara an expensive liability on the balance sheet.

As Oliver W. Holmes stated: "Great cases like hard cases make bad law. For great cases are called great, not by reason of their importance... but because of some accident of immediate overwhelming interest which appeals to the feelings and distorts the judgment." Only a heart of stone lacks pity for Brittany's plight, but we cannot, as a society, take the risk of a public policy based on the ideology of a few to their purported benefit that, although inadvertently, would further compromise the already-marginalized many.



"They would pay to kill me, but they would not give me the medication to stop the growth of my cancer."

 **MEET BARBARA WAGNER**

Barbara Wagner's health plan covered assisted suicide, but not treatment for her cancer. Watch Barbara tell her story in her own words at www.patientsrightsaction.com.

2014 Successes

VICTORIES OVER THE ASSISTED-SUICIDE LOBBY

NH

New Hampshire's legislature voted on assisted suicide bill, HB 1325, the first to define "terminal illness" to include people living with a disability. Disability Rights groups spearheaded efforts, with John Kelly of Not Dead Yet presenting testimony. When the bill went up for vote in March, it was resoundingly defeated in 219 to 66, shocking the pro-assisted suicide lobby.

MA

In **Massachusetts**, Patients Rights Action Fund assisted in-state allies against the third attempt since the 2012 ballot measure defeat. When the bill came before the Joint Committee on Public Health, powerful and convincing testimony led by Second Thoughts-MA moved legislators to send the bill to "study," effectively "killing it" for this legislative session.

CT

To fight HB 532 in **Connecticut**, PRAF Advisory Board Member *Peter Wolfgang* of CT Family Institute, hospice representatives, Second Thoughts-CT, medical professionals and faith-based organizations managed an effective broad-based coalition. The coalition gave moving testimony and pushed a successful patient-centered alternative MOLST bill.

VT

In **Vermont**, PRAF assisted with funding and research to help educate pharmacists about the new law. Under VT law, medical professionals are not immune from criminal or civil liability related to assisted suicide. After more than one year of being narrowly passed by the VT legislature, no one has committed an assisted suicide.

NJ

In the **New Jersey** Assembly, A2270 was stalled on June 26th due to lack of votes. Again, in-state opposition leaders came out in force to bring powerful testimony, raising serious concerns with many legislators over the bill.

NM

On January 13th, **New Mexico** unraveled some of the most basic protections patients have when a judge struck down the state's assisted suicide law. PRAF rallied and submitted Amicus Briefs in support of the Attorney General's challenge to the judge's ruling.



Barbiturates

A NOT-SO-PEACEFUL DEATH

Barbiturates are the most common substances used for assisted suicide in Oregon and Washington. Overdoses of barbiturates are known to cause distress and have associated issues:

- extreme gasping and muscle spasms
- while losing consciousness, a person can vomit and then inhale the vomit
- panic, feelings of terror, and assaultive behavior from the drug-induced confusion
- failure of drugs to induce unconsciousness
- a number of days elapsing before death occurs or death does not occur.

Sometimes, cases such as that of Patrick Menthany demonstrate that assisted suicide is not without frightening and painful complications. Such cases sometimes require an assistant to "help" the patient end their life. Because of this, the generally accepted practice in the Netherlands is active euthanasia where a doctor administers a lethal injection.



Data from the Netherlands shows that 18-25% of Dutch people who take the same dose of the same drug used in Oregon and Washington do not die.





our MOTIVATION

Marginalized people in our society are under attack. The rights of patients, the elderly, the disabled, and the poor are being compromised today in states and countries that have legalized assisted suicide. **The abuse must stop.**

our MISSION

To protect the rights of patients, people with disabilities, and others inadvertently targeted by pro-assisted suicide legislation and public sentiment. PRAF is the national coordinated movement to promote measures that protect patients' civil rights, to weaken the breadth and effectiveness of pro-assisted suicide laws and rulings, to work toward repeal of the same, and to oppose efforts to make suicide a legal medical treatment option.

how we WIN

- Track legalization efforts, build state coalitions of grassroots organizations that oppose assisted suicide.
- Launch lobbying efforts and campaign committees.
- Conduct in-state polling for constituency assessment and create effective research-based messaging.
- Organize allies in the submission of expert Amicus Briefs to courts making assisted suicide decisions.
- Initiate, draft, place, and fund earned and paid media: online, TV and radio.