

Killing the Suffering



By Father Gerald D. Coleman, S.S.

Patty Berg (D-Eureka), Lloyd Levine (D-Van Nuys), Fabian Nunez (D-Los Angeles and Assembly Speaker), and twenty-seven others have reintroduced Assembly Bill (AB) 374 which would permit a physician to kill a person who is close to death (a six-month prognosis), experiencing intolerable pain, and who asks to die.

The Bill is entitled "California Compassionate Choices Act" to avoid terms such as physician-assisted "suicide" or "murder." This language shift is clearly manipulative as *The Random House College Dictionary* and *Webster's New International Dictionary* describe euthanasia as "mercy killing," "putting to death a person suffering from an incurable and painful disease or condition," and "inducing death painlessly as a relief from pain."

In January 2006, Governor Schwarzenegger said, "Let the people of California make the decision. I don't think that ... 120 legislators and I should make the decision." Regarding AB 374, the Governor's spokesman says that the

Bill is "significant" but it is too early to know if Schwarzenegger would veto it if passed.

Pro-euthanasia societies go back to 1935 in London and 1938 in the United States. The Society for the Right to Die was reintroduced in the U.S. in 1975. Support for physician-assisted suicide grew enormously in the 1990s. From then until now, public opinion polls in the U.S., Britain and Canada have shown increasing willingness to sanction physician-assisted suicide. This fact represents a "sea change" in public opinion.

Supporters of physician-assisted suicide herald and manipulate the main forces driving this upsurge of public opinion: a growing fear of a long, lingering death; people living and dying longer than they desire; the HIV/AIDS pandemic, which often demonstrates miserable, noxious and degrading death; the advocacy of individual freedom; the judgment that one's life is no longer valuable; the necessity of others to respect this judgment out of a sense of "compassion"; the belief that pain is evil and is to be eliminated at all costs; pity at the sight of a patient's suffering; a host of books and articles setting forth the rationale underlying physician-assisted suicide and describing ways to commit suicide.

Advocates of AB 374 maintain that "the Catholic Church is the only identifiable group of people that strongly oppose the Bill" and "most of the money for the opposition campaign comes from the 'wealthy'

Catholic Church." This assertion is false and deliberately misleading in order to give the impression that the Bill is opposed only for religious reasons.

Marquette University's Dan Maguire calls himself a Catholic theologian. He is a strong advocate for physician-assisted suicide. His writings aim to create confusion among Catholics by causing a divided opposition. A divided opposition is a weak opposition.

As a matter of fact, physician-assisted suicide has long been opposed by the California Disability Alliance, California Medical Association, League of United Latin American Citizens, hospice organizations, California Foundations for Independent Living Centers, and more than twenty state and national disability rights organizations.

Opposition to AB 374 is not religion-based. Opposition rests on at least these factors:

- When a person decides to commit suicide with the assistance of a physician, the physician becomes complicit in the act of suicide. Although Bill 374 provides immunity for the physician from civil and criminal liability, it is the physician who supplies the patient with the medication.

- The Bill does not authorize "ending a patient's life by lethal injection, mercy killing, or active euthanasia." It does authorize physicians to give a requesting patient "medication ... to provide comfort with an assurance of

peaceful dying if suffering becomes unbearable." What is this medication? The patient consumes 50-100 pills such as vicodin, oxycontin (these are morphine derivatives), or fentanyl. Taken with alcohol, these pills work faster by putting a person to sleep and stopping the person's breathing. Medication must not be construed to mean that a patient merely takes a pill.

- Consuming these pills (or some combination thereof) can cause a patient to vomit. In this case the "medication" does not work and the patient becomes angry and depressed.

- Physician-assisted suicide is mercy killing. It denies a patient his or her dignity as a human being. Physician-assisted suicide alleviates pain by eliminating the patient. The inherent dignity of every person is the fundamental basis for morality. Mental or physical suffering does not eliminate or lessen one's human dignity. Our society overstresses "attributed dignity" which is based on one's value, worth, power, prestige, function, productivity, and self-control. Attributed dignity is not comparable to inherent dignity. No matter how sick or frail, a person must always be valued as a possessor of human dignity. This dignity is never forfeited. The "value of life" must never be substituted for "quality of life." This fundamental stance is far different from those who maintain that debilitating illnesses "depersonalize" an individual.

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