

Concentration of Oregon's Assisted Suicide Prescriptions & Deaths
from a Small Number of Prescribing Physicians
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Analysis and critique of article:
"The 10-Year Experience of Oregon's Death with Dignity Act: 1998-2007"
By Katrina Hedberg, David Hopkins, Richard Leman and Melvin Kohn
The Journal of Clinical Ethics 20 (Summer 2009): 124-132.

There is a concentration of Oregon's Assisted Suicide Prescriptions and deaths from a small number of prescribing physicians. The article published in *The Journal of Clinical Ethics* by Hedberg and colleagues in 2009 provides evidence of the concentration of Oregon's assisted suicide prescriptions and deaths from a small number of participating physicians. The Compassion & Choices assisted-suicide-proponent organization is the main player which controls the majority of assisted suicides in Oregon, and they control the information that is reported. They have reported that three-fourths of the assisted suicide deaths in Oregon have been their "clients".

There is missing information in a report published in *Journal of Clinical Ethics* by Hedberg and colleagues, who are officials from the Oregon Department of Human Services (DHS), regarding the numbers of physicians writing assisted suicide prescriptions for lethal doses of barbiturates.¹ In this article, Hedberg and colleagues report that from 2001 through 2007, 109 different physicians who wrote one or more prescriptions that resulted in a total of 271 assisted suicide deaths. "Of these physicians, 72 (66.1 percent) wrote one prescription; 17 (15.6 percent) wrote two; while three physicians (2.0 percent) wrote more than 10. These three physicians wrote 62 (22.8 percent) of 271 prescriptions written during 2001 through 2007"². The authors fail to mention an additional 17 physicians who each wrote between 3 and 10 prescriptions, for a total of 103 prescriptions. See Table 1.

Table 1
Number of Fatal Prescriptions Written by Number of Prescribing Physicians for 2001 to 2007

<u>Number of Prescribing Physicians</u>	<u>Number of Prescriptions Written / Physician</u>	<u>Total Number of of Fatal Prescriptions Written</u>
72	1	72
17	2	34
17	3 to 10	103
3	>10	62
<u>Total</u>	109	271

Thus, 61 percent (165 of 271) of the fatal barbiturate prescriptions in 2001 to 2007 were written by 18 percent (20 of 109) of the participating physicians, and 23 percent (62 of 271) were written by only 3 of the 109 physicians. Given the approximately 10,000 licensed physicians in Oregon, a large proportion of lethal prescriptions were written by a small number of physicians.

In the article in JCE, Hedberg and colleagues note that "three physicians (2 percent) wrote more than 10 prescriptions each, and wrote nearly one-fourth of all prescriptions written."³ They note that "patients may be referred to physicians within larger health systems who have more experience with DWDA, or physicians who are known to be advocates of the act. This may account for why half of patients knew the prescribing physician for three months or less."⁴

This article did not include information regarding the total number of lethal-dose prescriptions (fatal and non-fatal). At my request, Katrina Hedberg MD, provided the information that is presented in in Table 2.⁵ As depicted in the table, of all of the 445 prescriptions that were written, 185 were written by 10 physicians (42

percent), and 296 prescriptions (66 percent) were written by 29 physicians. That is a significant concentration of Oregon's assisted-suicide prescriptions from a small number of participating physicians.

As is shown in Table 2, two-thirds of physicians who had written a prescriptions for a lethal dose of barbiturates (101/154) during those seven years did not subsequently write a prescription for a lethal dose of barbiturates. It would be interesting to know why they did so once and did not repeat what they had initially done. Could it be because of the emotional impact on them.⁶ A report from the Oregon DHS, based on the first year's experience, found: "for some physicians, the process of participating in physician-assisted suicide had a great emotional impact."⁷

Table 2
All Assisted Suicide Barbiturate Prescriptions Written (Fatal and Non-fatal) by Number of Prescribing Physicians for 2001 to 2007⁵

<u>Number of Prescribing Physicians</u>	<u>Number of Prescriptions / Physician</u>	<u>Total Number of Prescriptions</u>
101	1	101
24	2	48
19	3 – 10	111
10	>10	185
Total 154		445

Source for Table 2: E-mail correspondence from Katrina Hedberg, MD, MPH, State Epidemiologist and Administrator, Office of Disease Prevention and Epidemiology, Oregon Health Authority, Public Health Division, to the author, 1 September 2010.⁵

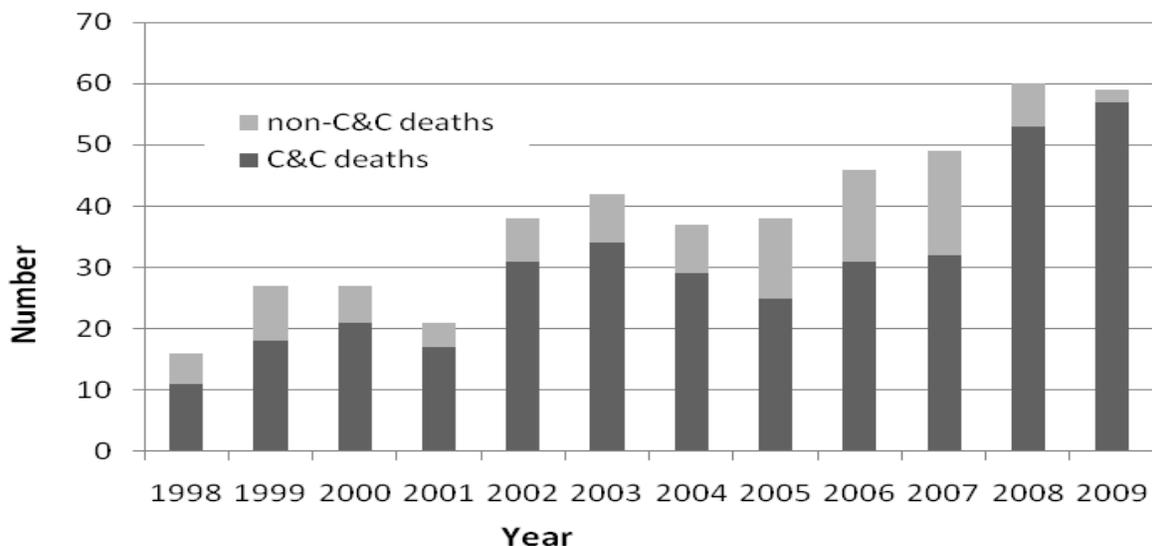
Oregon's Public Health Division reports that it accepts what assisted suicide information is sent to it, but does not actively solicit unreported cases, and prepares a sparse annual report. This "passive" surveillance system is exemplified by the following press release: "The Oregon Department of Human Services has no authority to investigate individual Death with Dignity cases, officials said Friday. The state law authorizing physician-assisted suicide neither requires nor authorizes investigations by DHS, said Barry S. Kast, DHS assistant director for health services."⁸

Officers of an assisted-suicide-proponent organization, Compassion & Choices of Oregon (C&C), have stated that they are the authors of Oregon's physician-assisted suicide law and describe themselves as the law's stewards.⁹ They report that they advocate & campaign for legalization of assisted suicide in other states.¹⁰ According to an article published in the *Journal of General Internal Medicine* authored by Ganzini, Goy, and Dobscha, C&C was associated with three-fourths of Oregon assisted suicide deaths.¹¹ According to an article in *The Oregonian*, in 2008 the proportion of C&C assisted suicide deaths increased to 88% (53/60) of all deaths reported to the DHS.¹² According to correspondence from a C&C board member, in 2009 the deaths assisted by C&C accounted for 97% (57 of 59) of the reported assisted suicide deaths.¹³ An article published in *The Oregonian* in March 2005 reported that Nancy Crumpacker, MD medical consultant for C&C, said she had directly or indirectly consulted on more than 100 doctor-assisted suicide deaths.¹⁴ In a 2006 article published in the *Journal of the Kentucky Medical Association*, Peter Goodwin, MD a physician/C&C board-member said he had been involved with more than forty such patients.¹⁵ George Eighmey, a non-physician attorney and Executive Director of C & C of Oregon, reported he had attended and participated in more than three dozen assisted suicide deaths as reported in September 2007.¹⁶

The article published in JCE in 2009 by Hedberg and colleagues provides evidence of the concentration of Oregon's assisted suicide prescriptions and deaths from a small number of participating physicians. The Compassion & Choices assisted-suicide-proponent organization is the main player which controls the majority of assisted suicides in Oregon, and they control the information that is reported. This was recognized when the editors of *The Oregonian*, the largest newspaper in Oregon, reported in 2008 that "essentially, a coterie of insiders run the program, with a handful of doctors and others deciding what the public may know."¹⁷

The extent of their involvement is illustrated in Figure 1 which shows the number of Compassion & Choices (C&C) client deaths, the non-C&C deaths and the total annual physician-assisted suicide deaths in Oregon for the twelve years 1998 to 2009.¹⁸ The number of non-C&C deaths for each year are calculated by subtracting the C&C deaths from the total assisted suicides reported from the published Oregon DHS annual reports.¹⁹

Figure 1
Numbers & Proportion of Oregon Assisted Suicide Deaths who were clients of Compassion & Choices (C&C) Organization



The data portrayed in Figure 1 are based on the following numerical information. Percentage of Assisted Suicide Deaths in Oregon who were clients of C & C of Oregon.^{18,19}

	Calendar Years											
	1998	1999	2000	2001	2002	2003	2004	2005	2006	2007	2008	2009
C&C deaths	11	18	21	17	31	34	29	25	31	32	53	57
non-C&C deaths	5	9	6	4	7	8	8	13	15	17	7	2
Total DHS deaths	16	27	27	21	38	42	37	38	46	49	60	59

What does this mean and why does this matter?

An analogous situation to the concentration of assisted suicide prescriptions among a few Oregon physicians would be a published medical report that a particular drug had many medical benefits with no risks; however the authors of the report failed to report their close connections to the drugs' manufacturer. Is it important to know that they had that close connection? In the same manner, it is important to bring to light that there is a concentration of assisted suicide prescriptions from a few doctors in Oregon, and that the majority of assisted suicide deaths are associated with the proponents of assisted suicide, C & C of Oregon (former Hemlock Society). Are physicians with connections to C & C going to provide unbiased information regarding their experiences with patients receiving prescriptions for lethal overdose drugs? This warrants further investigation.

As reported in The Oregonian newspaper in 2008, “The group promoting assisted suicide, so-called Compassion and Choices, are like the fox in the proverbial chicken coop; in this case the fox is reporting its version to the farmer regarding what is happening in the coop”.²⁰

There are serious ethical concerns and policy implications when a few doctors become a referral center for assisted suicides, and with the associated prominent role of the C&C organization in Oregon and in advocating legalization of assisted suicide in other states.

REFERENCES

1. K. Hedberg, D. Hopkins, R. Leman, and M. Kohn, “The 10-Year Experience of Oregon’s Death with Dignity Act: 1998-2007,” *The Journal of Clinical Ethics* 20, no. 2 (Summer 2009): 124-32.
2. Ibid., 127
3. Ibid., 131
4. Ibid., 131
5. Email correspondence from Katrina Hedberg, MD, MPH, State Epidemiologist and Administrator, Office of Disease Prevention and Epidemiology, Oregon Health Authority, Public Health Division, to the author, 1 September 2010.
6. K.R. Stevens, Jr., “Emotional and Psychological Effects of Physician-Assisted Suicide and Euthanasia on Participating Physicians,” *Issues in Law & Medicine* 21, no. 3 (Spring 2006): 187-200.
7. “Oregon’s Death with Dignity Act: The First Year’s Experience,” *Oregon Health Division Report*, Feb 18, 1999, page 7.
8. Oregon Department of Human Services Press Release, “No Authority to Investigate Death with Dignity Cases”, 4 March 2005, <http://www.oregon.gov/DHS/news/2005news/2005-0304a.shtml>, accessed 15 September 2011.
9. “In fulfilling our mission we complement the implementation of The Oregon Death with Dignity Act by ensuring all qualified Oregonians with safe and responsible access to use the Act.” <http://www.compassionoforegon.org/about-compassion>, accessed 15 September 2011
10. *Compassion and Choices of Oregon Newsletter*, December 2005, www.compassionoforegon.org/test/wp-content/uploads/2010/08/Winter-2005.pdf; accessed 15 September 2011; *Compassion and Choices of Oregon Newsletter*, December 2006, <http://www.compassionoforegon.org/test/wp-content/uploads/2010/08/Winter-2006.pdf>, accessed 15 September 2011.
11. L. Ganzini, E.R. Goy, and S.K. Dobscha, “Why Oregon Patients Request Assisted Death: Family Members’ Views,” *Journal General Internal Medicine* 23, no. 2, (Feb 2008): 154-7.
12. D. Colburn, “60 people died under Oregon law in ‘08”, *The Oregonian* newspaper, March 3, 2009.
13. Email correspondence from Sue D. Porter, MSB, Member of the Board of Directors of Compassion & Choices, to author, 14 February 2010.
14. D. Colburn, “Pharmacy Board will review failed assisted suicide”, *The Oregonian*, March 10, 2005.
15. P.A. Goodwin, “The Role of Psychiatrists and the Oregon Death with Dignity Act”, *Journal of the Kentucky Medical Association* 104, no. 4 (2006): 155-6, reprinted in *Compassion and Choices of Oregon Newsletter*, June 2006, 3.
16. D. Colburn, “She Chose it all on the day she died”, *The Oregonian* newspaper, September 30, 2007.
17. B. Caldwell, “Washington state’s assisted suicide measure: Don’t go there,” (editorial) *The Oregonian*, 20 September 2008, http://www.oregonlive.com/opinion/index.ssf/2008/09/washington_states_assistedsuic.html, accessed 15 September 2011.
18. C&C information for 1998-2007 years is from a printed report distributed by George Eighmey, executive Director of C & C of Oregon at a public forum in Vancouver, Washington on Sept. 25, 2008. C&C information for the 2008 year reported by George Eighmey to The Oregonian reporter Don Colburn, D. Colburn “60 people died under Oregon law in ‘08”, *The Oregonian* newspaper, March 3, 2009. C&C information for 2009 year deaths by Sue Porter, a C&C officer, in her Feb.14, 2010 email correspondence to the author.
19. Oregon Department of Human Services Annual DWDA reports. <https://public.health.oregon.gov/ProviderPartnerResources/EvaluationResearch/DeathwithDignityAct/Pages/ar-index.aspx>
20. KR Stevens Jr and WL Toffler, “Assisted Suicide: Conspiracy & Control”, *The Oregonian* newspaper, September 24, 2008.