

FANTASTIC NEWS - AMA votes to uphold opposition to assisted suicide & euthanasia

The American Medical Association on June 10, 2019, voted overwhelmingly, 65% to 35%, to accept the AMA's Council on Ethical and Judicial Affairs' (CEJA) report affirming the AMA's ethical opposition to assisted suicide and euthanasia (below). Immediately following the vote above, the AMA House of Delegates by a vote of 71% to 29% reaffirmed its formal policy to the same effect. This latest fight to maintain historical medical ethics at the AMA has been going on for 3 years, and this is an outstanding result.

Testimony (online and in person) in the Reference Committee at the annual meeting in Chicago on June 9, 2019 was overwhelmingly in favor of accepting the CEJA recommendations. Among the many physicians testifying in support of the CEJA report were Dr. Lonnie Bristow, former AMA president, Dr. Daniel Sulmasy, esteemed bioethicist from Georgetown University, Dr. Frank Ulrich Montgomery, Chairman of the Council of the World Medical Association, Dr. Kenneth Stevens, president of PCCEF, numerous residents and medical students and many, many others from all over the United States.

This AMA vote reaffirming opposition physician-assisted suicide and euthanasia is critically important in maintaining the ethical position that **“physician-assisted suicide and euthanasia is fundamentally incompatible with the physician’s role as healer, would be difficult or impossible to control, and would pose serious societal risks.”** The AMA, the American College of Physicians and the World Medical Association all maintain strong opposition to these practices that harm patients, harm society and degrade the profession of medicine.

We should all take a moment to celebrate this important victory. However, we must continue to be vigilant. Oregon House Bill 2217, which would permit lethal injection, is still active. Likewise, Oregon Senate Bill 579 which would eliminate the 15-day and 24-hour waiting period is still active in the legislature.

Your continued support of PCCEF has been instrumental in making this outcome possible. Your support has enabled Drs. Bill Toffler and Kenneth Stevens to travel repeatedly to AMA meetings around the country over the last 3 years, giving powerful and persuasive testimony. Thank you, thank you for your continued support, which is so vital to the protection of our patients and our beloved profession.

Kenneth Stevens, MD
President, Physicians for Compassionate Care Education Foundation

AMA Code of Medical Ethics Opinion 5.7 (PAS)

Physician-assisted suicide occurs when a physician facilitates a patient's death by providing the necessary means and/or information to enable the patient to perform the life-ending act (e.g., the physician provides sleeping

pills and information about the lethal dose, while aware that the patient may commit suicide).

It is understandable, though tragic, that some patients in extreme duress—such as those suffering from a terminal, painful, debilitating illness—may come to decide that death is preferable to life. However, permitting physicians to engage in assisted suicide would ultimately cause more harm than good.

Physician-assisted suicide is fundamentally incompatible with the physician's role as healer, would be difficult or impossible to control, and would pose serious societal risks.

Instead of engaging in assisted suicide, physicians must aggressively respond to the needs of patients at the end of life. Physicians:

- (a) Should not abandon a patient once it is determined that cure is impossible.
- (b) Must respect patient autonomy.
- (c) Must provide good communication and emotional support.
- (d) Must provide appropriate comfort care and adequate pain control.