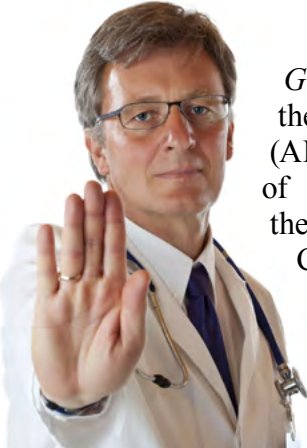




The American Medical Association Overwhelmingly Upholds its Opposition to Assisted Suicide



Great news! After years of debate the American Medical Association (AMA) delegates, at their House of delegates meeting, supported the assisted suicide report of the Council on Ethical and Judicial Affairs (CEJA) by a vote of 360 to 190 and re-affirmed their position opposing assisted suicide by an overwhelming vote of 392 to 162.

Joyce Frieden, reporting for *Medscape* on the debate, stated that the delegates supported two opinions:

...[Code of Medical Ethics Opinion 5.7](#), which states that “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.”

...[E-1.1.7](#) of the AMA’s Principles of Medical Ethics, states that “Physicians are expected to uphold the ethical norms of their profession, including fidelity to patients and respect for patient self-determination... Preserving opportunity for physicians to act (or to refrain from acting) in accordance with the dictates of conscience in their professional practice is important for preserving the integrity of the medical profession as well as the integrity of the individual physician, on which patients and the public rely. Thus physicians should have considerable latitude to practice in accord with well-considered, deeply held beliefs that are central to their self-identities.”

Frieden stated that Diane Gowski, MD, of Clearwater, Florida, an alternate delegate for the Society of Critical Care Medicine and speaking on behalf of the Chest

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Free Online Conference Celebrating 20 Years of Protecting People

Join the Euthanasia Prevention Coalition (EPC) on Saturday July 20th to celebrate the 20th anniversary for Alex Schadenberg as Executive Director of the EPC.

The EPC is celebrating the occasion with a free live online conference from **12:30 to 3:00 p.m. Eastern Time** featuring key presenters.

The conference will include:

Amy Hasbrouck, President, EPC, **Taylor Hyatt**, Researcher, **Toujours Vivant – Not Dead Yet**,

Maxime Huot Couture, Deputy Director, **Vivre dans la Dignité Québec**, **Catherine Glenn Foster**, President, **Americans United for Life (AUL)**, and **Alex Schadenberg**, Executive Director, EPC.

The EPC is focusing on the international campaign to prevent euthanasia and assisted suicide and Canada’s five year review of its euthanasia legislation that is scheduled for June 2020.

To participate, e-mail info@epcc.ca or call 1-877-439-3348.

Euthanasia Leader Sentenced to Three Years of House Arrest

Sean Davison is a euthanasia activist who was previously convicted in the death of his mother in New Zealand in 2010.

Davison, who was the president of the World Federation of Right to Die Societies and a leader of Dignity South Africa, was convicted in the deaths of Anrich Burger (in 2013), Justin Varian (in 2015), and Richard Holland (in 2015).

Shamiela Fisher, reporting for *Eyewitness News*, stated that Davidson was sentenced to three years correctional supervision in the deaths. Fisher stated:

The Western Cape High Court also sentenced him to eight years behind bars which has been wholly suspended for five years on condition he is not convicted of murder, attempted murder or conspiracy to commit murder over this period.

The first charge relates to the death of Anrich Burger in 2013. Burger was a quadriplegic following a car accident in 2005. Davison administered a lethal dose of drugs to Burger.

The two other murder charges, which Davison has also pleaded guilty to, relate to the deaths of Justin Varian and Richard Holland.

He entered into a plea and sentencing agreement in the High Court on Wednesday in connection with cases in which he helped three Cape Town patients take their own lives.

Fisher reported that:

Professor Davison has been placed under house arrest for the full duration of his correctional supervision. He may, however, go to work, to a place of worship or visit a doctor.

I understand that this is a plea bargain deal but Davison has essentially received no sentence in the deaths of three people.

Being sentenced to eight years behind bars but then being allowed to serve it as three years house arrest, but then be able to go to work, church and the doctor, is not a sentence at all.

Davison has shown the world how euthanasia activists become killers. He is known to have killed his mother and now three others.

Years ago, when I attended the World Federation of Right to Die Societies conference, I met a group of people who spent their time discussing over lunch the deaths that they had participated in. This is a death cult, not a human rights lobby.



Oregon Passes Bill to Expand Assisted Suicide Law

The Oregon House passed a bill ([Senate Bill 579](#)) on June 18, 2019, that expands the Oregon's assisted suicide law by essentially waving the requirement of a 15-day waiting period.

By waving the waiting period, a person who is approved for assisted suicide could die without an opportunity, if depressed, to change their mind.

The assisted suicide lobby argues that assisted suicide laws have not expanded in Oregon therefore there is no fear of expansion in other jurisdictions. Previous to this bill, [Oregon had expanded assisted suicide by re-interpreting the meaning of terminal illness](#). In January 2018, Fabian Stahle proved that the [Oregon Health Authority re-interpreted the meaning of terminal illness](#). Now Oregon has expanded the language of the legislation.

The Netherlands euthanasia law has expanded, not by changing the language of the law, but by changing the interpretation of the law. The [latest Netherlands euthanasia stats](#) suggest that the euthanasia law was re-interpreted to include euthanasia for "completed life."

Québec Man Sentenced to Two Years in the Death of His Wife

He claimed it was a “mercy killing”

Michel Cadotte, the Québec man who killed his wife, Jocelyne Lizette (60) by suffocation on February 20, 2017, was found guilty of manslaughter by a jury.

Cadotte claimed that his wife wouldn't have wanted to live this way. He had asked for euthanasia for her and was turned down since she was not capable of making the request herself as reported by *CTV News*.

Cadotte was sentenced to two years less a day and three years probation for killing his wife. Jesse Feith's article in the *Montreal Gazette* on May 29 stated:

...a Superior Court judge added while sentencing him to prison Tuesday, Cadotte also “committed the irreparable” by suffocating Jocelyne Lizotte to death, an act that can't be excused “even if it was done in the name of compassion.”

The article reported Justice Di Salvo stated:

“You cannot do this to someone who is ill, vulnerable, dependent and incapable of expressing their will,” she said. “Even if they've expressed a desire to die in the past.”

The [Canadian government is considering extending euthanasia to incompetent people](#) who made a previous request for euthanasia.

Feith reported that the Crown and the Defense are both examining the sentence. The article reported:

Prosecutor Geneviève Langlois told reporters the Crown will closely review the decision before deciding if it will appeal the sentence.

Defence lawyer Elfriede Duclervil said she was disappointed with the sentence. She then took the opportunity to reiterate how the case shed light on gaps in the health system—especially when it comes to helping caregivers—that pushed Cadotte to his breaking point.

The Justice system upheld the rule of law by convicting Cadotte but it remains confused when similar acts are done based on “Medical Aid in Dying.”



Three Euthanasia Deaths Being Investigated in the Netherlands

An article on June 23 by Senay Boztas for *The Guardian* outlines three euthanasia deaths that are being investigated in the Netherlands.

EPC supporters will [remember the case](#) from 2016 of the euthanasia death of a woman with dementia who resisted the lethal injection. Boztas explains:

...in August, a Dutch doctor will be the first prosecuted for failings, in a 2016 [case](#), in which sedatives were put in a dementia patient's coffee and her family asked to hold her down when she struggled against the euthanasia injection.

[According to Boztas](#), two other cases were investigated from 2017:

The two other cases, from 2017, involve a woman in her 60s with Alzheimer's whom an independent consultant did not judge to be suffering badly enough, and another in her 80s with osteoarthritis and other problems who refused other treatment.

Boztas reports about another case in 2018:

...prosecutors are investigating a doctor for failing to treat the case of a woman with “due diligence” last year. According to the report, a woman in her 70s with depression had been operated on for abdominal problems when surgeons found evidence of lung cancer. She approached her doctor, saying she was experiencing unbearable psychological suffering and wanted euthanasia. Her doctor's colleague took on the case, but, the review committee said, failed to obtain a second opinion from an independent psychiatrist, as is required.

EPC explained that in the [2018 Netherlands euthanasia statistics](#), the number of reported euthanasia deaths was down by 7%, likely related to the investigations by the Netherlands Prosecutor. We stated our concern that a new euthanasia category indicates that 205 people died by euthanasia based on *multiple problems derived from the aging process*. We fear that these deaths are based on “completed life.”

The Netherlands euthanasia controversy continues. In January 2018, we learned that Berna van Baarsen, who had been a euthanasia assessor for ten years, [resigned over cases of euthanasia for dementia](#). In the same month, [Aurelia Brouwers \(29\)](#) died by euthanasia for [psychiatric reasons](#) even though she was physically healthy.

Disabled Man Feels Pressured to “Ask” for Euthanasia

By Alex Schadenberg

I was contacted by a man with a disability, who told me how he felt pressured to ask for euthanasia. After explaining his concerns he sent me this e-mail:

I am living in the advanced stages of quadriplegia, now 33 years along. I am feeling the suggestive influence from my nursing care, regarding euthanasia. They use indirect pressure by speaking about other patients who have chosen the path of assisted death, unsolicited from me. I am worried about Canadian laws, so anti-life, and I don't ever want to end my life. I didn't choose when I was born, and I won't choose when I die. Another thing that concerns me is as these evil laws progress against the vulnerable like me, when will this newfound right to die become the duty or obligation to die? I can see it coming...

People talk about “freedom, choice and autonomy” without realizing how these concepts only apply to euthanasia in theory. In reality, it is the doctor or nurse practitioner who decides if you should die by euthanasia and many doctors and nurse practitioners judge the equality of people with significant disabilities.



Candice Lewis

Candice Lewis was also pressured to “ask” for assisted death and Roger Foley also experienced the not-so-subtle pressure to ask for an assisted death.

Euthanasia is sold to the public based on theory. The lives of people with disabilities are often judged based on “quality of life”

perceptions of the person who lives with disabilities. These perceptions of quality of life can be deadly.

This is why the Euthanasia Prevention Coalition (EPC) sells the *Life Protecting Power of Attorney for Personal Care* for \$10 + tax.

The *Life Protecting Power of Attorney* requires the person you appoint to make medical decisions on your behalf that uphold your values. It protects you from euthanasia and assisted suicide and it defines the treatment/care decisions that you would want, in the event that you are unable to make medical decisions yourself.

...[The AMA from page 1](#)

Caucus stated:

“We would not give our patients a gun or revolver... so we should not be supplying them with lethal drugs. Physician-assisted suicide violates natural moral law. We urge the AMA to stand firm, as any change from the current position will only confuse the public as to the intention and role of their physicians.”

According to Frieden, Shane Macaulay, MD, of Kirkland, Washington, speaking for the Washington delegation stated:

“Oregon legalized assisted suicide in 1997 with repeated assurances that it would stay contained and would not become euthanasia,” he said. “Just last month, the Oregon state House of Representatives approved a bill to allow patient death by lethal injection, showing the inevitable progression from assisted suicide to euthanasia once physicians have accepted the idea that taking a patient’s life is permissible.”

“In Canada, assisted suicide and euthanasia were legalized only 3 years ago, and in the 3 years we’ve debated this topic here, euthanasia has become a runaway contagion in Canada, with over 4,000 deaths last year.”

“These alarming developments show us that the wheels are coming off the bus on assisted suicide. We do not have the luxury of time to continue to fail to act on the CEJA report while the real-world situation deteriorates. Unless we’re willing to embrace widespread euthanasia, we must accept the CEJA report and reaffirm this policy now as a firewall against what is [happening in] Canada.”

At a 2016 meeting of the AMA, delegates voted to ask CEJA to review the AMA policy on assisted suicide. In May 2018, CEJA [upheld the AMA policy on assisted suicide](#), but in June 2018, AMA delegates asked CEJA to [continue reviewing its policy on assisted suicide](#). In October 2018, CEJA adjusted the language of its policy while [upholding that the AMA maintains its opposition to assisted suicide](#). In November 2018, AMA delegates once again decided to ask CEJA to [continue reviewing the AMA policy on assisted suicide](#).

After three years of intense review of its assisted suicide policy, AMA delegates overwhelmingly upheld that assisted suicide is incompatible with the physician’s role as healer.

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