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From: Paul Stark <pstark@mcl.org>
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To: JudTestimony
Subject: testimony regarding HB 7015

I submit the following testimony in opposition to HB 7015. By legalizing assisted suicide, this bill would open the door to new kinds of pressure and coercion. In Oregon, which pioneered physician-assisted suicide, 40 percent of assisted suicide victims have expressed concern about being a "burden" on family and friends, according to the Oregon Public Health Division. Prescribing physicians are generally not present when the lethal dose is administered, and no witnesses to the death are required. Moreover, after legalization, public and private insurers may have a financial incentive to steer patients toward suicide rather than life-extending treatment. This has already happened to some patients in Oregon.

Only a tiny fraction (5.5 percent in Oregon) of assisted suicide victims first receive psychiatric evaluation—some would want to live if properly treated for depression. Yet HB 7015 does not require such an evaluation. And terminal diagnoses are sometimes wrong. Legalizing assisted suicide encourages patients who would live for weeks, months, years or even decades to throw their lives away.

Advocacy groups claim that assisted suicide is necessary to prevent pain and suffering, but pain can be controlled, and concern about pain is not a significant reason cited by assisted suicide victims (the main concerns in Oregon include "losing autonomy" and "loss of dignity"). Certainly, disease and disability involve real difficulties and fears. But the solution to these problems is not killing. The solution is to provide the emotional support and medical care that patients need, including mental health care and quality palliative care.

The broad dangers of legalizing assisted suicide must not be ignored.

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