

In "Death With Dignity" Annie Wallentine provides an up-to-date report on the status of the Pennsylvania Physician Assisted Suicide bill. She contrasts the views of two state senators and offers an amendment of her own. Annie argues that requiring patients to be within six months of death should not apply to Alzheimer's patients.

Death With Dignity
Annie Wallentine
Germantown Academy. Grade 12

November 2, 2009

Daylin Leach, a state senator for the 17th district of Pennsylvania, believes in the right to "death with dignity." He has introduced a bill in the state legislature, similar to the bill that legalized physician-assisted suicide (PAS) in Oregon in 1997. In an email interview, he stated,

I believe giving a patient the option of PAS is ethically correct because I believe that in a free society, individuals and not the government should make these most personal of decisions. I believe there should be safeguards, which my bill contains. But at the end of the day, somebody with a terminal disease, who is dying and enduring unbearable pain should have some options as to how they want the end of their life to go. To deny them these options is, to me, unethical."

To address the valid concern that some people may want a patient to die for financial reasons (life insurance, high health care costs, inheritance), Senator Leach's bill contains safeguards and restrictions on how a patient may request PAS.

The patient (and only the patient) must make two separate requests, 15 days apart in front of 2 witnesses, at least one of which is not a family member and has nothing to gain in terms of being a beneficiary of an estate. There are strict criminal penalties for anyone who bears false witness. Then, two separate doctors, the patient's doctor and an independent doctor must certify that the patient has a terminal disease, that there is no realistic hope of recovery, and that the patient has less than 6 months to live. At that point, a doctor could write the prescription and the patient can choose if and when to take it.

Senator Leach did not distinguish between active and passive PAS, but allowed that indirect PAS (through the prescription of pills) would be the main goal. “My bill allows the patient, or his designee to administer the pills. The designee would only be relevant if the patient was physically unable to take them himself.”

Senator Leach’s proposal would also require patients to be tested to show that they are of sound mind and not depressed, and advised of alternatives to suicide, such as pain control and hospice care. The bill would also apply only to state residents, to prevent Pennsylvania from becoming a destination for terminally ill patients seeking PAS (Micek).

As for the status of the bill, introduced in March 2009, he says, “It is currently in the Senate Judiciary Committee, of which I am the minority chair. As for its chances of passage, I think that in the short term it is a tough fight, but in the long-term it is inevitable.”

What Senator Leach is referring to as a “tough fight” may be due to the opposition to the bill from the Senate Judiciary Committee’s majority chair, Senator Stewart Greenleaf of Pennsylvania’s 12th district. I asked Senator Greenleaf the same questions as Senator Leach, also via email. His response was, “I do not support assisted suicide in any form and would not support legislation to legalize it.”

I fully support Senator Leach’s bill. It contains safeguards in response to almost every practical objection to PAS. To address the argument that doctors are fallible, two must declare independently that the patient is terminal. To

remove people who may be interested in reaping financial benefits from PAS, the request must be made multiple times in front of at least one disconnected witness. To prevent depressed patients from requesting PAS, psychiatric evaluations are required, and patients are advised of alternatives so that they are not pushed into PAS.

I would suggest one change to Senator Leach's bill to alter the time limit for PAS requests for a particular disease. Alzheimer's is the only terminal disease for which I would suggest stretching the limits of euthanasia requests. Six months before death seems like a reasonable time for all other diseases, but Alzheimer's affects the brain and memory, creating a poor quality of life without the sufferer realizing it. Therefore, the sufferer cannot make a request for PAS while of sound mind within six months of death. Patients with Alzheimer's should be allowed to request PAS even though they have more than six months to live.

All people will die. And, thanks in part to modern medicine, people can now in some states choose how and when they die to preserve their dignity and minimize pain in the case of terminal illnesses. In the political jargon, people have a right to "death with dignity." The right to die is consistent with America's democracy, a "free society," as Senator Leach says. "Individuals and not the government should make these most personal of decisions," because the decision to die is an individual right.

Works Cited

Greenleaf, Stewart. E-mail interview. 29 Oct. 2009.

Leach, Daylin. E-mail interview. 28 Oct. 2009.

Micek, John L. "Pennsylvania Assisted Suicide Bill is Still Alive – For Now." *Right to Die*. World Right to Die Newslist, 11 Mar. 2009. Web. 1 Nov. 2009. <http://www.lists.opn.org/pipermail/right-to-die_lists.opn.org/2009-March/003280.html>.