



Andrews emotionally opens euthanasia debate

OPINION

Most vulnerable would be exposed by assisted dying, writes Mukesh Haikerwal

Mukesh Haikerwal, Herald Sun

October 17, 2017 9:46pm

 Subscriber only



THERE is no need for the passage of the Voluntary Assisted Dying Bill in Victoria. It would open a Pandora's box on death and dying.

[ASSISTED DYING CHANGES DEBATE IN PARLIAMENT](#)

[BILL PROPOSES FIVE YEARS JAIL FOR COAXING TERMINALLY ILL TO DIE](#)

As a caring society with high quality medical and social services in place, the confronting prospect of death is well managed with care, dignity, without suffering and without the prevailing concern of being a burden on society and family.

Australia has high-quality palliative services and high-quality palliative-care doctors and nurses who ensure that people have comfort and personalised support in their final months and days.

Those services must be nurtured by governments, and access to such services needs bolstering.

The use of an intervention, the purpose of which is to end a life, is not needed, even where standard palliation is not adequate.

The VAD Bill as it stands is flawed.

It only partially protects some vulnerable groups.

Euthanasia proponents argue that the Bill has more safeguards than any legislation of its type in the world. The reality is that there can never be enough safeguards should this Bill be passed.

It exposes patients to the slippery slope of endless alternative outcomes.

The most vulnerable and helpless would be at most risk.

Doctors, too, are exposed.

The Bill, with all its unclear, complex criteria, puts the very physicians that the law seeks to empower with this grim new responsibility at risk of being subject to new litigation and possible jail — for life.

The Bill will be debated from today in the Victorian parliament.

A Victorian medical expert group — including geriatricians, palliative-care physicians, general physicians, oncologists and GPs — will brief interested parliamentarians.

Those MPs are grassroots politicians who represent ordinary Australians who may be dying, have a family member who is dying, or know somebody from their local community who is dying — everyday people whose future would be



compromised should this Bill get through the parliament.

 Former AMA president Mukesh Haikerwal.

It is vital that these MPs are fully informed of the consequences of their actions before they vote.

They owe that to their constituents.

This week's vote — should it occur — is not journey's end.

We have seen that overseas.

The child in Holland stemmed a disaster with a finger in the hole in the dyke.

But the legislation in that country now covers physician assisted suicide and voluntary and non-voluntary euthanasia, which includes infants, and assisted suicide for patients who do not have a serious condition, but who have a “completed life”.

Suicide in society is a major separate issue, which occurs for a number of reasons.

We are addressing this in multiple ways across the nation.

Promoting a different form of suicide is illogical when we strive to prove that there are better solutions than to commit suicide.

Death confronts us all and we want the best for ourselves and our own throughout life, from cradle to grave.

Discussions around death and dying and planning for death are confronting, distasteful and painful — but necessary.

Writing wills or powers of attorney, agreeing to organ donation and designing a living will or advanced care directive are all important parts of life at any age and should be respected and acted upon.

Universal health access and care at all ages and stages is a key right of all Australians.

There should not be a class of Australians whose life is not worth living.

The World Medical Association Declaration on Euthanasia states: “Euthanasia, that is the act of deliberately ending the life of a patient, even at the patient's own request or at the request of close relatives, is unethical.

This does not prevent the physician from respecting the desire of a patient to allow the natural process of death to follow its course in the terminal phase of sickness.”

The Australian Medical Association's Position Statement on assisted dying states: “The AMA believes that doctors should not be involved in interventions that have as their

primary intention the ending of a person's life. This does not include the discontinuation of treatments that are of no medical benefit to a dying patient.”

I urge Victoria's parliamentarians to vote against this Bill. They must do the right thing by vulnerable people across the state and, ultimately, across the country.

Mukesh Haikerwal is a general practitioner and a former president of the Australian Medical Association

