

Parliament of Victoria
Spring Street
Melbourne Victoria 3000

3rd October 2017

Dear Victorian Parliamentary Representative,

We, the undersigned Victorian Geriatricians request that you vote AGAINST the proposed Victorian Assisted Dying Bill 2017.

As we deal with the frail, elderly and vulnerable in our community we feel our perspective on this issue should be heard.

We add our voices to the 100 Palliative Care Specialists and the 101 Oncologists who have already corresponded with you requesting that you oppose the passage of this bill.

We collectively represent a significant proportion of the Geriatric Medicine workforce in the state of Victoria. The position of the Victorian Branch of the Geriatric Medicine society is in accordance with the stated position of the Australia and New Zealand Society for Geriatric Medicine (ANZSGM) as laid out in the Position Statement on Euthanasia, Physician-Assisted Suicide and End of Life Care endorsed by the Society in 2015.

We do not believe that it is possible to draft assisted dying laws that have adequate safeguards to protect vulnerable populations, especially those with incurable cancer, progressive neurological illness, the aged and disabled. These groups of people experience high rates of depression and isolation. The risks that such legislation poses for the majority of these outweigh any benefits for the few in our opinion.

Physician assisted dying places people at risk of coercion that is both active and passive. As a consequence of assisted dying laws, society re-assesses the value of life; and the individual is taught to devalue their own life. Those with serious illness may perceive that they are a burden on society or their carers and come to feel that assisted dying is appropriate for them. We are also concerned about being placed in the position of having to assess the capacity of patients to make this decision.

Assisted dying laws can be challenged from a human rights and equality perspective. Indications over time will be extended beyond adults with terminal illness, to those with mental illness alone, dementia, disability, children and the healthy elderly who have "completed lives".

Physician assisted death is not part of palliative care practice. We as doctors and medical specialists do not want to intentionally end the lives of our patients, or provide them with the direct means to do so. Assisted suicide is in conflict with the basic ethical principles and integrity of medical practice and undermines trust in the medical profession.

Where curative treatment is not possible, we seek optimal palliative care services to support and care for patients and their families at the end of life. Without easy access to quality palliative care, some may request physician assisted dying as they feel they have no other choice. This is especially so for people who live in rural, regional and remote areas and for people from culturally and linguistically diverse communities who have less access to palliative care services.

We are very disappointed that discussion of the Voluntary Assisted Dying Bill has dominated the agenda to improve end of life care in Victoria. We are dismayed that the multiple recommendations made by the Victorian Parliamentary Inquiry into End of Life Choices (June 2016) to strengthen palliative care have not yet been actioned. Until this is addressed, discussing physician assisted dying is premature.

In June 2017 the NSW government allocated an extra \$100 million to fund palliative care services over 4 years, particularly to provide extra funds for community palliative care services and for rural and regional NSW. Need in these same areas has been identified by the Victorian End of Life Choices report. Palliative Care Victoria's figures demonstrate that an extra \$65 million per year is required to meet deficits and adequately cover future cost

projections in these areas. Such funding is essential if dying Victorians are to be adequately cared for in their homes with adequate supports for both them and their families.

We call for improved funding of palliative care services in Victoria, for the benefit of all Victorians. This will go some way to ensuring that fear of suffering does not dictate a person's final hours, nor the memories that their loved ones will carry throughout their own lives.

The United Kingdom parliament resoundingly rejected an Assisted Dying bill in 2015 as there is no "safe system" and we urge the Victorian Parliament to do the same.

Yours sincerely,

The undersigned Victorian Geriatric Medicine specialists.

The listed signatories support this statement as individual health professionals and not as representatives of any hospital or other organisation with which they are associated.

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