



new york state RIGHT TO LIFE COMMITTEE, INC.

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2015 Statement of Opposition “New York End of Life Options Act” Savino/Hoylman S3685

New York has been in the crosshairs of “Compassion and Choices” (formerly ‘The Hemlock Society’), with Senators Savino and Hoylman pushing a deadly agenda with a bill devoid of even a pretense of safeguards. Advocates of doctor-prescribed suicide use offensive terms such as “dignity” to define the act of a doctor prescribing deadly pills to a vulnerable and hurting patient. A doctor’s number one priority must be to save and support the life of his/her patient. Society suffers when doctors choose who should and should not be saved. An individual seeking suicide is in need of care and support. In all other instances, an attempt at suicide is recognized as the cry for help that it is. Patients facing daunting diagnoses should be treated no differently than other patients in need of help. They should be given appropriate care, not drugs to end their life.

Doctor-prescribed suicide targets vulnerable patients

Despite death advocates painting a picture of patients in unbearable pain, the reality is that data out of Oregon has shown that pain, or fear of future pain does not rank in the top five reasons that a suicide patient lists as to why they are asking their doctor to prescribe them deadly drugs. Vulnerable patients facing a challenging diagnosis feel, or fear feeling, that they are a burden on friends and family. In states with legal doctor-killing, patients feel a duty to relieve their family of the need to care for them. Patients suffering from mental illness, those with disabilities, and seniors at-risk for elder abuse may feel pressured by society, medical workers, their family, and their own fear, into taking their own lives. Those who are depressed or sick require support, not validation from their doctor and society at-large that their lives are not worth living.

Doctor-prescribed suicide doesn’t require a waiting period

S3685 doesn’t even require a waiting period for a patient requesting doctor-prescribed death. Patients feeling depressed, overwhelmed, or facing familial pressure would have no extra time to consider their options, turning physician’s offices into a one-stop death shop.

Doctor-prescribed suicide doesn’t allow for a diagnosis of depression

A doctor – not necessarily the patient’s primary physician- needs only a concurring opinion of another physician in order to prescribe deadly pills. Only if one of the death-prescribing doctors decide to direct the patient for psychiatric treatment does the individual- who is asking to be killed- need to be evaluated, and potentially assisted, by a doctor licensed to treat depression or other mental illnesses that may be a factor in the patient’s desire to die. In Oregon’s 10th year of legal killing, *not a single patient was referred for counseling*. Even if a patient were to be referred to a psychologist, which is a rare occurrence based on the data from Oregon, a diagnosis of depression or mental illness would not necessarily preclude the prescription of deadly drugs if the psychologist determines a patient can still make decisions.

Doctor-prescribed suicide in New York would create a haven for renegade doctors

There is specifically no residency requirement in S3685, meaning that any individual can come from anywhere to be killed by their physician. Instead of providing assistance and care for vulnerable patients facing daunting challenges, New York would instead become the death capital of the country, a haven for renegade doctors preying on depressed victims.

Doctor-prescribed suicide is impossible to contain

Once the deadly pills have been given to hurting individual, it is up to them to take it home and take it when they wish. There is no way to contain these pills once it leaves the hands of the pharmacist and there is no guarantee that another member of the household may take it, or, should the vulnerable patient decide not to take it immediately, slip it to the patient unbeknownst to them. There is no control, there is no safety for the vulnerable.

