



## **“Physician Assisted Suicide”** *Fatally Flawed, Dangerous for Maryland Patients*

The so-called “End of Life Option Bill” (SB0701/HB0643) has been introduced in the Maryland General Assembly. Reintroduced in 2020 for the fifth time this bill attempts to decriminalize Assisted Suicide and create a legal right for a physician to prescribe lethal drugs to an individual to self-administer for the purpose of bringing about the individual’s unnatural death.

### **Important Reasons to Oppose the “End of Life” Option Bill**

- Proponents of the bill want you to believe suicide is a personal choice, which is not true. This bill will change the way we all face death. **This bill protects doctors and allows insurance companies to ration healthcare, diminishing the medical standard of care for all of us.**
- **This bill puts Maryland’s most vulnerable populations at risk**-including individuals with disabilities, minorities, those experiencing poverty, those with mental illness, our veterans and those suffering from prescription or other drug addictions.
- **Lawmakers nationwide reject PAS.** The Maryland General Assembly has rejected some form of this bill at least five times. The Assembly reaffirmed its intent to classify Assisted Suicide as a criminal act by rejecting this bill in three previous legislative years.
- **This bill creates a financial incentive for insurance companies and state health plans who can save denying life saving care.** In Oregon and California – states which allow assisted suicide – patients have been denied payment for treatments to save their lives, but have been told that less-costly lethal drugs would be covered.
- **No trained medical personnel are required to be present at the time the lethal drugs are taken or at the time of death,** creating the opportunity for an heir or abusive caregiver to coerce the patient to take the deadly drugs. The physician is not required to respond to any complications.
- **People with terminal diagnoses often outlive a doctor's prediction and some diagnoses are just wrong.** The definition of “terminal illness” is arbitrary and could include patients who are not dying, as has happened in Oregon.
- **Modern medical science has the ability to control patient pain.** Inadequate pain control is NOT the primary reason why patients request lethal drugs.
- **Depression leads some to seek suicide, but depression is treatable.** Mental Health assessments and referrals in this bill are inadequate. There is no requirement for mental health screening or treatment.
- **People may feel they are a "burden" and be coerced into suicide.** An option to die can easily become a responsibility to die for the most vulnerable.
- **PAS laws make suicide socially acceptable.** States which have legalized PAS have experienced increased suicide rate.

To protect Maryland patients from the dangers of assisted suicide, visit [www.mdrtl.org](http://www.mdrtl.org) and select “TAKE ACTION” to contact your state legislators and urge him/her to Vote NO on the “End of Life Option Bill”.