

Legalizing Physician Assisted Suicide (PAS) Impacts Everybody – It's More Than A Personal Choice



Proponents of PAS claim that it is a matter of personal choice and autonomy. If you don't want to choose PAS for yourself, you don't have to. The reality is, because of the weakness of safeguards and loopholes in the law, just about everybody could be impacted by legalizing PAS.

PAS Loopholes and Weaknesses

Questions We Need to Ask

<p>The law enables people with a six month prognosis to obtain a prescription of drugs they can use to take their own life</p>	<ul style="list-style-type: none"> • Do you know somebody who had a six month prognosis and lived well past 6 months? • Do you know somebody whose cancer is in remission but was close to death at some point in their battle?
<p>The person, or a third party, then picks up the prescription for what is a Class 1 controlled substance and can store it at home for an undetermined amount of time. In Oregon, 40% of the prescriptions are never used and up to 20% of the prescriptions are unaccounted for after the person dies.</p>	<ul style="list-style-type: none"> • Do you know people who need to keep prescriptions under lock and key because they have family members who are suicidal? • Do you know people who worry about family members or friends stealing prescription drugs due to substance abuse problems?
<p>While a witness is required when the request for PAS is made (the witness may be an heir to the estate), no witness is required at the time of death, making it impossible to know if depression or coercion played a part in the person's decision to die.</p>	<ul style="list-style-type: none"> • Do you know somebody who has had fits of depression during an illness? • Do you know somebody that has manipulative family members? • Do you know somebody whose family doesn't want to be burdened by caring for their sick relatives?
<p>Studies have shown that legalizing PAS causes a rise in overall suicide rates. [1] In states where PAS is legal, "death parties" glorify the act of suicide as an antidote to pain or suffering. [2]</p>	<ul style="list-style-type: none"> • Do you know somebody who has been suicidal? • What makes on person eligible for suicide prevention and another person eligible for PAS? • How can you tell somebody with a chronic condition (including psychological) that it's okay for a terminal patient to end their life, but not for them?
<p>There is no requirement in the law for the person to notify their family of plans to use PAS</p>	<ul style="list-style-type: none"> • Do you know somebody that doesn't want to be a burden to their loved ones? • Do you know somebody who hides their illnesses from loved ones to keep them from worrying?
<p>Legalizing PAS as a "medical treatment" opens the door for insurance companies to further limit treatment options. [3] There are multiple cases in California where people were denied life prolonging treatment and offered PAS by insurance companies. [4] In Oregon in 2017, 68% of people applying for PAS were on Medicaid or Medicare. [5]</p>	<ul style="list-style-type: none"> • Do you know somebody with expensive medical treatments? • Do you know somebody who was cured using innovative, new medical procedures? • Do you know somebody who has to rely on fiscally constrained, state provided medical coverage?

In a just society, laws cannot be good for a small minority of people while putting the majority at risk.

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Sources

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