PROFESSION

Push for “death with dignity” in Massachusetts picks up steam

A ballot measure asks voters to follow Oregon and Washington in allowing physicians to prescribe lethal doses of medication to terminally ill patients.


The people behind an effort to make Massachusetts the third state to enact a law allowing physician-assisted suicide have secured enough signatures to put the issue on the ballot in November.

“We’re confident … that we’ll be successful in November,” said Stephen Crawford, communications director of the Dignity 2012 campaign, which is pushing the initiative. Among the measure’s original petitioners is Marcia Angell, MD, former editor-in-chief of The New England Journal of Medicine.

The campaign collected more than 21,000 signatures, and 16,000 were certified by local elections officials, Crawford said. In mid-July, the state attorney general approved the Dignity 2012 measure for inclusion on the November ballot. Proponents had to present at least 11,485 signatures from registered voters to get their initiative on the ballot. The initiative will need majority support for a proposal virtually identical to the death-with-dignity laws adopted in Oregon and Washington.

To be eligible for aid in dying, a patient would have to be a resident of Massachusetts and deemed by a physician to have less than six months to live. After making an oral and a written request, the patient seeking physician-aided death would be required to reiterate the request 15 days later, according to the language in the proposal.

The written request would need to be signed by two witnesses, at least one of whom is not related to the patient, has no financial stake in the patient’s estate and does not own or is not employed by a health care facility where the patient is being treated. After the final request, the prescription would not be dispensed for 48 hours. The attending physician would be required to refer the patient to a consulting physician to verify the terminal diagnosis and determine that the patient is mentally competent and is freely choosing doctor-hastened death.

Early polling results

Sixty percent of Massachusetts voters support “allowing people who are dying to legally obtain medication that they could use to end their lives,” according to a Western New England University Polling Institute survey of 504 voters conducted at the end of May. Twenty-nine percent said they opposed the idea, and 11% declined to answer the question.

The American Medical Association and the Massachusetts Medical Society oppose physician-assisted suicide. This year, the Dignity 2012 proposal was sent to the Massachusetts Legislature, where it has not yet received an up-or-down vote. In testimony before the Legislature’s Joint Committee on the Judiciary, Lynda Young, MD, then-president of the Massachusetts Medical Society, noted that the society’s house of delegates reaffirmed its opposition to doctor-assisted suicide by an “overwhelming” margin.

Dr. Young, a Worcester, Mass., pediatrician, quoted the AMA’s Code of Medical Ethics, which says: “Physician-assisted suicide is fundamentally incompatible with the physician’s role as healer. Instead of participating in assisted suicide, physicians must aggressively respond to the needs of patients at the end of life … in order that these patients continue to receive emotional support, comfort care, adequate pain control, respect for patient autonomy and good communication.”

Despite opposition from the medical society and the Roman Catholic Church, Crawford predicted that the presidential election and a hotly contested U.S. Senate race will bring out liberal voters likely to support the death-with-dignity measure. The Dignity 2012 campaign also will point to the 14 years of experience with similar laws in Oregon and Washington.

“This statute has worked as intended in both Oregon and Washington,” Crawford said. “The scare tactics the opposition uses simply haven’t come to life.”

The Montana Supreme Court ruled in December 2009 that physicians who prescribe life-ending medication to patients with terminal illnesses are not subject to state homicide statutes. Since then, state legislators have not acted to regulate doctor-assisted suicide or outlaw the practice, leaving Montana physicians in legal limbo. A few Hawaii physicians announced this year that they are offering to write lethal prescriptions for terminally ill patients in a bid to test whether doctor-assisted suicide is allowed under state law.

ADDITIONAL INFORMATION:

WEBLINK

Text of proposed Massachusetts Death With Dignity Act (www.dignity2012.org/?page_id=86)

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