

# Helping Patients Live vs. Helping Them Die

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## Cultural Suicide

On Sunday, 28 May 2017, *The Tennessean* published a full page set of articles on the problem of suicide amongst the armed forces in our nation. The year 2012 saw a peak of 22 U.S. veterans killing themselves per day (Jake Lowary, "['I can't do barbecues:' Veteran says](#)"). The Department of Veterans Affairs plans a 7.5 percent budget increase to \$186.1 million in 2018 — all to address suicide prevention, the department's "highest clinical priority" (Jake Lowary, "[Suicide rising in the military, but some programs give veterans hope](#)").

In light of these sobering statistics, it is ironic that the American Medical Association is considering changing its stance from "against" physician-assisted suicide to "neutral" toward that same entity, renamed "aid-in-dying." How can a culture embrace both suicide prevention and physician-assisted suicide? Obviously, both cannot — nor will they — be simultaneously embraced for long.



## Will the AMA change its stance on assisted suicide?

The continuous drumbeat by some for physicians to "help" patients kill themselves is obfuscated by language changes: the Hemlock Society morphed into "Compassion and Choices"; "physician-assisted suicide" is increasingly referred to as "aid-in-dying." The American Medical Association (AMA) has long been opposed to physicians helping their patients to die. The question on the near-horizon is, will the AMA continue to oppose physician-assisted suicide, or will the institution cave to the desires of the increasingly aggressive Compassion and Choices camp?

A 2016 resolution from the AMA's Oregon Delegation asked

That our American Medical Association (AMA) and its Council on Judicial and Ethical Affairs (CEJA), study the issue of medical aid-in-dying with consideration of (1) data collected from the states that currently authorize aid-in-dying, and (2) input from some of the physicians

who have provided medical aid-in-dying to qualified patients, and report back to the HOD at the 2017 Annual Meeting with recommendation regarding the AMA taking a neutral stance on physician "aid-in-dying."

(REPORT OF THE COUNCIL ON ETHICAL AND JUDICIAL AFFAIRS,  
CEJA Report 5-A-17)

Clues to where the June 10th meeting is likely to head are included in the resolution. CEJA is planning to study the literature on "aid-in-dying" — a term only recently invented. They are seeking input from physicians who have assisted in suicides. Another worrying factor is the way that physician-assisted suicide has often gained ground in various states: the medical societies in those states first became "neutral" on the matter. Perhaps this is not surprising in the legerdemain of physicians assisting in the deaths of their patients. It happened in [California \(legalized in September of that year\)](#), [Colorado \(legalized in November, 2016\)](#), and [Vermont \(legalized in May, 2013\)](#). It happened in [Oregon](#) two decades ago, and now there are [plans to expand](#) it.