

PRESS RELEASE - March 21, 2002

ASSISTED-SUICIDE HEARINGS SCHEDULED FOR FRIDAY

Friday morning, March 22, 2002, U.S. District Court Judge Jones will hear arguments in Oregon v. Ashcroft. The parties are expected to focus on legal issues of jurisdiction and authority.

Dr. Gregory Hamilton, spokesperson for Physicians for Compassionate Care, said, "It was inevitable that these issues would end up in federal court. The problem is that the Oregon vote took place in the wrong place. If Americans had wanted to change federal law to create an exemption in the Controlled Substances Act (CSA) allowing the use of federally controlled substances for assisted suicides, that vote would have had to have taken place in Washington, D.C., not in Oregon. Doctors in rare instances have already been denied federal licenses, because they prescribed controlled substances for such non-medical purposes. Federal authority already exists in this area. To remove it would take a vote by both chambers of the U.S. Congress and signature by the President of the United States, not a referendum in one state."

The Justice Department's nuanced and careful ruling gives direction to the Drug Enforcement Agency, which has authority to investigate misuses of federally controlled substances. It clarifies that aggressive pain management is legitimate medical care even if in rare instances it may increase the likelihood of a patient's death. Both the ruling and letters to doctors clearly state that doctors' prescribing practices will NOT be receiving increased scrutiny. Only the assisted-suicide reporting forms themselves will be needed. Dr. Hamilton is outraged at attempts by assisted-suicide advocates to frighten patients by misrepresenting the Justice Department ruling as creating new investigative authority when the ruling only adds protection to doctors and patients. "These misleading scare tactics by assisted-suicide proponents are irresponsible and unfounded." False claims about investigation of prescribing practices could themselves cause patients and physicians to be misled, thereby creating a danger to the public health. Since 1992, ten states have strengthened laws against assisted suicide and added reassurances like those in the DOJ ruling. In every case, per capita morphine use increased the following year. The average increase was more than 50%.

The most recent Oregon Health Division report demonstrates that there was not one case of assisted suicide in 2001 where uncontrollable pain was documented as the primary motive. Dr. Hamilton noted, "The reasons for overdoses were all psychological and social concerns, not pain." This is consistent with the Journal of the American Medical Association (12/13/00) finding that, "Among patients who were neither depressed nor hopeless, none had high desire for hastened death" (p.2910). "That's because we can treat pain," Hamilton said. "The problem is depression and feelings of hopelessness, feelings which can be made worse by the assisted-suicide proponents' exaggerated and grotesque portrayals of the normal dying process."

The Justice Department ruling protects both doctors and patients.

All statements may be quoted as from Dr. Gregory Hamilton, spokesperson for PCC, where he is co-founder and past-president.