Return to <a href="www.pccef.org">www.pccef.org</a>

### PHYSICIANS FOR COMPASSIONATE CARE NEWS

Affirming An Ethic That All Human Life is Inherently Valuable

Vol.1, No.1, Winter, 1997-1998

#### PCC OPPOSES ASSISTED SUICIDE

November 4, 1997, the minute the drop boxes closed on the vote-by-mail election, local TV broadcasting networks flashed computerized results that had been ready most of the day. Reporters told Oregonians that voters were rejecting Measure 51 by a 20 % spread. Measure 51 would have overturned Measure 16, a law that legalizes doctor-assisted suicide. The exact figures were released on the state's Internet web page, December 5th: Yes on 51 -- 445,830 votes; No on 51 -- 666,275.

Dr. William Toffler, Physicians for Compassionate Care (PCC) president, declared that the election sent "a profound shock wave over the entire state, the country and, indeed, the world." He said legalization of assisted suicide would undermine "the medical ethics that safeguard patients and assure that all human life is treated equally, and with dignity and respect."

PCC's formal efforts to oppose medical killing actually began in March of 1997, when the organization sent Dr. Gregory Hamilton to Washington, D.C., at the invitation of the U.S. House of Representatives Subcommittee on Health and Environment. Hamilton presented PCC's testimony against assisted suicide. In preparation for that testimony, the PCC Board compiled and refined medical data that would eventually lead to Oregon's repeal effort (Measure 51). PCC's testimony in Washington, D.C. contributed to passage of a federal law forbidding use of any United States funds for suicides.

In April of last year, PCC members from across the state used these same facts to inform the Oregon Medical Association House of Delegates about Measure 16's many medical flaws. This concerted educational effort by PCC members who were also OMA delegates resulted in enlisting the OMA's vital, if tentative, support of repealing Measure 16.

Armed with documents and new facts, PCC physicians, such as Drs. Miles Edwards, William Petty, Benneth Husted, Richard Thorne, Paul Stull, Don Shroeder, William Toffler, Gregory Hamilton, Kenneth Stevens, and many others, marched to Salem and testified before the Oregon legislature. Because of the work of PCC members and others who agree with our views, the Oregon legislature voted to send Measure 16 back to the voters, recommending repeal. Thus Measure 51 was created. The legislature chose this route rather than outright repeal, because that action would have faced the governor's certain veto.

During the summer of 1997, PCC officers met with organizers of the Yes on 51 campaign to discuss both message and strategy. Careful polling after the 1994 campaign led to the

conclusion that ethical issues, while central, would not succeed in this state at this time in its history. Therefore, physicians were asked to take the lead. The message would be a medical one: the risks of barbiturate overdose were dangerous to the public; doctors can't predict when patients will die; patients may be suffering from depression; patients may not be "terminal."

PCC members accepted the challenging request to take the lead. A PCC speakers bureau was formed with over fifty physicians from all geographical areas of the state. These dedicated doctors set aside their accustomed privacy, in the midst of already busy schedules, to educate the public whenever and wherever they were asked to do so. Our speakers delivered succinct and powerful, yet dignified talks to unprecedented numbers of Oregonians. To combat false claims that some of our data might be incorrect, PCC sent studies to every doctor, nurse, and pharmacist in the state. Our physician speakers handled personal and political attacks with firmness and composure. All our speakers should be heartened to hear that post-election polls indicate that wherever our doctors spoke the overwhelming majority of those voters listened and voted to repeal doctor-assisted suicide.

At a gathering at the Benson Hotel in Portland, November 4, as the votes rolled in, our physicians were sincerely grieved for the vulnerable patients who would no longer be protected against medical killings. Yet, all were proud. The message from the speakers bureau was loud and clear, "We have done everything possible to stop one of the worst social movements in the history of America. We will always be proud of what we have done." After the election, PCC doctors immediately began planning their future steps in improving and expanding this organization of dedicated, ethical, and compassionate physicians.

Now PCC is needed in Oregon more than ever.

#### STANDING FIRM

Physicians for Compassionate Care swung into action after Measure 51 went down. Within days, PCC issued recommendations to it's members on ways to uphold their principles. The PCC recommendations have been well received by members and were given front page coverage in The Oregonian. Standing firm in our principles is both more important and more difficult now that the state government approves assisted suicide and thus attempts to make it "an acceptable response" to serious illness.

Our past president, Dr. William Toffler, wrote to the U.S. President and Attorney General, as well as to key U.S. Senators supporting the DEA's position that prescribing controlled substances for assisted suicides is not a "medical purpose." PCC also opposed the Oregon Medical Association executive committee's decision to support Oregon doctors who write lethal prescription. We did this by making a clear statement of dissent, on behalf of our members, and delivered by our new President, Dr. Gregory Hamilton, at the Oregon Medical Association Interim House of Delegates Meeting in November.

The PCC president and numerous PCC members wrote letters of support to the pharmacists' association, when it took the laudable step of requiring the purpose of lethal prescriptions to be clearly marked. The pharmacists took this action was taken to allow principled pharmacists to refuse participation in medical killing.

We continue communicating with key attorneys in the state and nationally to look for judicial remedies to the discriminatory threat legalizing assisted suicide creates for patients.

PCC has met with organizational consultants to explore ways both to expand and strengthen Physicians for Compassionate Care. The Board of Directors met at a series of two evening

retreats to set goals for 1998 and begin their implementation. Clearly, Physicians for Compassionate Care is called upon to take an active role in Oregon medicine.

#### RIGHT-TO-DIE FEDERATION MOVES TO OREGON

Barbara Coombs Lee, executive director of Compassion in Dying Federation, has set up headquarters in Portland. Calling themselves "counselors," her group plans to have a networks of volunteers around the state, advising patients about how to commit assisted suicide. The federation touts a 10 page protocol telling doctors how to "help" them carry it out. Coombs Lee's organization says she won't release the protocol to just anyone. Only doctors who have a patient who wants to commit suicide under Measure 16, and presumably, those doctors who plan to participate in the suicide can see it. Doctor Greg Hamilton, PCC president, remarked that "What Coombs Lee's Federation is doing lends a stamp of approval to a new kind of suicide."

Lee has produced volumes of documents on assisted suicide for the state of Oregon, in preparation for this most recent move. Not only did she co-author Measure 16, she was appointed by the state to help write the ballot title and summary statement of Measure 51. Coombs Lee is also listed as a co-author of the State of Oregon's Health and Law Manual; Volume 2, Chapter 8, "Life and Death Decisions," which originally stated, with regard to assisted suicide, "The physician should counsel the patient that although most deaths occur within three hours, death may take longer in the patient's case and may not occur at all with oral medications." However, sources from the Oregon State Bar say they have now retracted this particular statement from Chapter 8.

The most recent right-to-die protocol coming form Coombs Lee's group is reported to include: do not resuscitate orders for the patients who overdose and detailed recipes for overdoses. Reportedly, some journalists have seen a copy of the protocol, while interested medical experts are being denied access to the document.

Hamilton says, "Legitimate medical protocols are always open to scientific scrutiny. The fact that a protocol to be used for lethal human experimentation is being held in such secrecy is unconscionable." He says that the secrecy exists because participating in suicides is the wrong thing to do: what patients need is good care. PCC stands firm in its ethical belief that all Human life is inherently valuable.

## PCC LAUNCHES NEWSLETTER

Now, more than ever, physicians who base their practice on honesty and the principle that all human life is inherently valuable need to communicate with and support one another. With assisted suicide legalized by the state, pressures are mounting that threaten to reshape how doctors think and practice. Such pressures jeopardize our patients and even our own right to practice conscientious medicine based on our ethical principles, and for many of us, our moral beliefs.

Along with the pressures created by the assisted suicide law will come opportunities to articulate, clarify, refine, and defend our principles and practices. This newsletter will provide a forum for your thoughts and comments. It will keep you informed of the latest developments at the local and the international level as physicians around the nation fight the movement that seeks to eliminate medicine's most profound dilemmas and duties by eliminating the patients who most call upon us for help, the chronically and seriously ill. PCC News will keep you apprised of the activities of the organization and will keep you in touch with your colleagues who oppose medical killing. This is a quarterly newsletter of

dedication, hope, and compassion. Articles or reviews for submission can be sent directly to PPC.

### **NEW OFFICERS ELECTED**

Doctor Gregory Hamilton was elected the new president of Physicians for Compassionate Care. His administrative, as well as public speaking and writing experience, will serve him well in helping PCC achieve its new goals. He expressed his gratitude to outgoing president, Dr. William Toffler, who has so energetically built our membership over three years and created opportunities for many of us to speak effectively about our approach to caring for patients and about the dangers of assisted suicide. Doctor Toffler will move into a new role -- PCC National Medical Director. He will respond to broad interest that our state activities have generated across the country.

Doctor William Petty has agreed to serve another term as vice-president. Doctor Mark Kummer will take over the task of treasurer, and Doctor Miles Edwards will begin as secretary. All of these roles promise to be demanding in the coming year.

#### GOALS FOR THE FUTURE

In a series of two winter retreats, PCC Board of Directors outlined plans to expand our efforts and our organization. Goals include regional organizational development within the state, collaborating with ethical palliative care programs, developing a patient advocacy and referral service, responding to national interest in PCC, holding an annual meeting at our next PCC Palliative Care Conference, and developing administrative support to enhance effectiveness and communication. A fund raising campaign has been initiated to help meet these goals.

Drs. William Petty and Pam Edwards will help other PCC members around the state begin to meet on a regular basis. This step will provide improved communication statewide and will allow PCC members to share information and support with one another and with PCC leadership.

Dr. Paul Stull from Astoria, with his long experience in hospice and palliative care, will work with other PCC members to explore collaboration with palliative care programs which share our values.

Development of our patient advocacy and referral service will be ongoing. It's purpose is to meet the needs of those Oregonians who face loss of health and need practical or emotional support. Legalized assisted suicide offers an early death, but care is what patients need. We will continue to refer patients, healthy or ill, who call us requesting a doctor who respects human life. This process of referral currently takes place informally by our volunteer physicians. We hope that soon this much requested service will be centralized and streamlined through the development of PCC administrative support.

Dr. William Toffler, who facilitated formation of the Washington state PCC chapter, will focus on the national level. His November and December trips to Colorado and California and his national contacts with like-minded colleagues will prove an invaluable asset in his new role as PCC National Director.

Dr. Chuck Bentz, who organized our overwhelmingly successful Palliative Care Conference, October 4, 1997, in collaboration with Providence Medical Center, will arrange our next conference.

Development of a fundraising program needed for administrative support will be directed by Dr. Gregory Hamilton. Funding and obtaining administrative help, improving telephone access for our members, patients, and the media, and facilitating correspondence with the many medical, educational, governmental, and patient advocacy organizations are all important steps in organizational development. It is time for PCC to take some giant steps in its growth.

Each of these goals contributes to our overall mission of promoting a practice of medicine based on honesty and the principle that all human beings are inherently valuable regardless of their health or life phase. The fact that key local medical organizations have passively relinquished this principle makes it imperative for PCC to continue developing a solid infrastructure and expanding its efforts to support our members.

## ADVOCACY REQUESTS WELCOME

If you or one of your patients believe that implementation of doctor-assisted suicide is infringing upon your rights or your patient's rights, call PCC vice-president, Dr. William Petty (503-292-2672).

#### CONTRIBUTIONS ARE WELCOME

Please make a contribution to PCC today. Unlike other medical organization you may belong to and which demand annual dues, PCC has been run for the past three years entirely as a volunteer effort with no dues collected and no paid staff. Many members have made generous financial contributions and many others plan to do so. You can write a tax deductible check to PCC Educational Foundation in an amount equivalent to what you may pay another medical organization. Contributions of \$50, \$100, \$500, or \$1,000 can be mailed to:

Physicians for Compassionate Care Educational Foundation P.O. Box 6042 Porland, Oregon 97228

PCC Officers
N. Gregory Hamilton, MD
President
William M. Petty, MD
Vice President
Mark Kummer, MD
Treasurer
Miles J. Edwards, MD
Secretary
William L. Toffler, MD
National Director

Board Members Pamela J. Edwards, MD Thomas Pitre, MD Kenneth R. Stevens, MD Paul D. Stull, MD Regional Directors
Gerald B. Ahmann, MD
Medford
Thomas Comerford, MD
Bend
Carl R. Jenson, MD
Coos Bay
Marvin M. John, MD
Hermiston
Robert DuPriest, MD
Eugene
Richard M. Thorne, MD
Salem
George Middlekauf, MD
Roseburg

# PCC ADDRESS:

P.O. Box 6042 Portland, Oregon 97228 503-533-8154 Phone 503-533-0429 Fax www.pccef.org

PCC News Editor: Catherine Hamilton

© Copyright 1997 Physicians for Compassionate Care Educational Foundation