



Letters to the Editor should be sent to
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Assisted suicide 'endangers the lives of us all'

Sir, The main objection to a change in the law is that it would compromise patient safety (letter, June 3). For example, in depression a patient may ask for their life to be terminated only to change their mind on a return to normal mood. Some might feel that they should seek death so as to relieve the burden they might impose on their relatives. The proponents of assisted suicide talk of "necessary safeguards" but exactly what these might be is not clear — and even they will admit that none would be foolproof.

Although the pleas of those who seek to have their lives terminated at a time of their own choosing are truly heartrending, the permissions they seek for themselves would potentially endanger the lives of us all. In any democratic society, where a perceived benefit to a few might endanger the safety of many, the law must side with the many. A change in the law would not be a slippery slope but a precipice over which we would jump, as a nation, into danger.

PROFESSOR PETER D O DAVIES
 Liverpool Heart and Chest Hospital

Sir, David Aaronovitch's arguments for changing the law seem to boil down to "make no mistake, it's coming" and "if you support other pieces of libertarian legislation, you should support this one" (Opinion, May 28). In this enlightened age we do not buy our views on social issues as a package: thinking people consider each issue carefully on its merits.

The Scottish parliament this week rejected legalisation of assisted suicide

after a committee examined the proposal in detail. This is a complex issue which must be considered calmly and with care. If parliament is to be persuaded to legalise assisted suicide, it needs to be shown clear evidence that the law requires change and, if that is the case, that what would be put in its place would be better. That has not happened.

LORD GOLD
 House of Lords

Sir, Talk of the "right to die" is misleading; David Aaronovitch wants death on demand. He proposes no safeguards; in his world we would abandon suicide prevention and accede to a request at face value.

The very doctors who campaigned for years to protect women and children from abuse, argued for equality, and have never opposed abortion are mostly the very ones who oppose physician suicide. Like the Scottish parliament, they are all too aware of the dangers. Doctors are already desperately busy — many are exhausted trying to provide good care. They cannot be asked to prevent suicide in some, yet be the gatekeepers and suppliers of lethal suicide drugs to others on request.

DR HELENA MCKEOWN, GP
 Salisbury

Sir, David Aaronovitch is right. There is fear over the consequences of an extension of our personal autonomy. My fear is of not being allowed to live when I am no longer considered useful to the state. Where is the limit to

doctors killing patients once it is legalised? I am equally frightened of the state or a committee of the great and good or an individual doctor setting that limit.

DR ROBERT LEFEVER
 London SW7

Sir, The tired old complaint about a slippery slope needs kicking into touch ("Why the right to kill must not be made legal", Opinion, June 1). Doctors have been hastening death for years. They are not doing this at the request either of cost-cutting bureaucrats or of greedy relatives. Their motive is, as Melanie Phillips wants it to be, compassion. There may now be too much emphasis, generally, on personal autonomy but no one is suggesting that doctors be required to kill people just because they decide, for whatever reason, that they would rather be dead.

CHRISTOPHER BELSHAW
 Department of philosophy, The Open University

Sir, When parliament in the Suicide Act 1961 decriminalised the act of taking one's own life, surely it should have either eliminated criminality for any aider or abettor, or at least have downgraded the culpability for assisting the suicide. Anomalously, or at least alien to the law, the draftsman laid down that any assistant to the suicide should be treated as criminally responsible and receive a burdensome maximum prison sentence of 14 years.

Was that then, and is it now, fair?
 SIR LOUIS BLOM-COOPER, QC
 London NI