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## Pressure to end lives

SIR – We are all doctors who work with people approaching the end of their lives. We are most concerned by the Bill before the House of Commons to legalise what is being called “assisted dying”.

We believe such proposals devalue the most vulnerable in society. We regularly come across patients who feel a burden to their relatives and to society because of their health and social care needs. These patients fit the criteria being proposed for being supplied with lethal drugs to end their lives.

They are mentally competent and are not, at least on the surface, being coerced by others to end their lives. But they may be under pressure from within to remove themselves as a burden on their hard-pressed families.

We fear that if Parliament were to legalise assisted suicide for terminally ill people, such pressures would be given free rein. Most families are loving and caring, but some are not.

The case for changing the law is being constructed on the basis that assisted suicide is needed to relieve the suffering of dying.

Dying is not an easy matter for anyone, but the advances that have been made in recent years in pain relief and the alleviation of distress have transformed the way in which the process of dying can be managed. “Hospice at home” is not yet as widely available as we would like. But it is undeniable that the incidence of “bad deaths” is much smaller today than was once the case.

Assisting suicide runs counter to our duty of care, is contrary to the “do no harm” principle and conflicts with policies for suicide prevention. As successive surveys and consultations show, the great majority of doctors are opposed to such legislation

**Dr Phil Williams**

**Dr Roger Boyle**

**Dr Anna Phelon**

**Dr Susan Marriott**

**Dr Simon Kaye**

**Dr Sarah Annetts**

*and 83 others; see [telegraph.co.uk](http://telegraph.co.uk)*