

We risk turning doctors into executioners

The Royal College of Physicians is stealthily promoting a change in the law on assisted suicide

Melanie Phillips



@MELANIELATEST

Later this week, the council of the Royal College of Physicians will be discussing assisted suicide amid a terrific row and threat of legal action by a group of doctors.

Back in 2014, the RCP asked its members what they thought of assisting someone to take their own life, which is currently illegal. A majority, 58 per cent, opposed any change in the law. A further 10 per cent opposed the involvement of doctors in administering a lethal dose of drugs but supported the idea of such a dose being administered by others. So only 32 per cent backed doctors assisting people to kill themselves.

Members were also asked what position the RCP should adopt. In response, 44 per cent said it should oppose assisted suicide (which the RCP calls assisted dying), 25 per cent wanted it to support it and 31 per cent favoured a neutral position. So the RCP decided to oppose it on the basis that this was the stance supported by the largest number of respondents.

In January, however, it suddenly changed its policy by retrospectively altering its attitude towards the 2014 poll. It decided that, as there had been no majority for either

opposition or support, it would now adopt a position of neutrality, regardless of the fact that this option had been chosen by only 31 per cent. It then decided to validate this by conducting another poll. Neutrality would remain its policy unless in this new survey a "supermajority" of members reaching a threshold of 60 per cent voted otherwise.

Since it's unlikely that any option could reach that threshold in such a three-way split, it seems more than probable that the RCP's new policy of neutrality would thus be deemed endorsed — even if more than half of those polled were against it.

This has so enraged four college members that they are seeking to quash this development through judicial review on the grounds that the procedure has been unfair and unreasonable. Whether or not they succeed, the RCP's behaviour is

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outrageous. It looks as if it has rigged an opinion poll of its members to support a highly dubious policy change that the majority oppose.

The dissenting quartet's solicitor, Paul Conrathe, says "neutrality" will be understood by the public as a green light for physician-assisted suicide. The RCP argues that it is nothing of the kind, merely a reflection of the fact that "there are strongly differing views in medicine, just as there are in society".

The lifting of opposition may not

be a green light as such, but it's certainly a big step towards endorsing physician-assisted suicide and the required change in the law. This would be a retrograde step and a moral blunder. For such a policy would turn doctors into potential executioners.

People have the right to kill themselves. Nobody, though, has the right to expect anyone else to kill them. And for doctors to help end lives in this way would transform their image from healers into something very much darker.

Canny euthanasia campaigners rebadged assisted suicide as assisted "dying" because they were well aware that the idea of killing, even killing yourself, causes a degree of revulsion, whereas dying is both passive and inevitable. Assisted suicide, however, is not helping someone to die. Administering a lethal dose of drugs is to help those who are not dying kill themselves.

Over the years, attempts to legalise assisted suicide have been strenuously promoted in parliament, most notably by the former lord chancellor, Lord Falconer. Legalisation has been defeated because of the strength of the arguments against it.

Those opposed to assisted suicide are routinely accused of lack of compassion. This is nothing other than emotional blackmail. No one denies that the situation of someone requesting help to end their life is often deeply distressing and deserves the utmost compassion.

And it's right that those who, from the highest of motives, defy the law to help someone to commit suicide

are generally not prosecuted.

The consequences of legalisation, however, go far beyond such suffering individuals. The law against intentional killing is there to protect people. Cross that line and you embark on a slippery slope which is not just hypothetical.

David Randall, a registrar in renal medicine and one of the four involved in the legal action, says there is no way of introducing doctor-assisted suicide while protecting the most vulnerable. People may feel pushed into requesting an end to their lives by real or perceived pressure from family or society.

In Oregon, evidence suggests that people suffering from depression are being helped to kill themselves without their depressive disorder being diagnosed or treated.

In the Netherlands, several reports have revealed that guidelines to regulate physician-assisted suicide and voluntary euthanasia are routinely ignored and that, in thousands of cases, doctors have intentionally administered lethal injections to patients without their own request or consent.

The RCP is considered a source of authoritative advice on medical policy. Its views therefore carry considerable weight.

Lord Falconer lost the argument in parliament over legalising assisted suicide. Now, it seems, extra-parliamentary ways are being employed instead to move the cultural dial towards changing the law through public pressure. The RCP is playing a dangerous, disturbing and disreputable game.

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