

# 'MEDICAL AID IN DYING' - WHERE 'HEALTHCARE' BECOMES DEADLY

New York State's Department of Mental Health offers many resources to help stop those considering suicide from carrying out that tragic action... yet...

**New York State legislature is discussing laws to ASSIST suicide!**

**WHEN A FELLOW HUMAN BEING SEEKS SUICIDE, THE HEALTHCARE SYSTEM AND THE COMMUNITY NEED TO OFFER PROPER CARE FOR THE PERSON'S PAIN (PHYSICAL AND MENTAL), NOT A PUSH INTO THE ABYSS.**

The New York Court of Appeals [Myers v. Schneiderman (2017 NY Slip Op 06412, September 7, 2017)] declared **long-standing state interests against assisted suicide** include:

- Preserving life and preventing suicide, which is “a serious public health problem;”
- Maintaining physicians' role as their patients' healers;
- Protecting vulnerable people from financial, psychological or other pressures to end their lives;
- Guarding against accidental and intentional misuse of medications; and
- Avoiding a slide toward euthanasia.

## **WHY SHOULD 'MEDICAL AID-IN-DYING' BE GOOD FOR SOME AND NOT FOR ALL?**

NYS's proposed MAID bills limit assisted suicide to those with a terminal illness and prognosis of 6 months or less to live. A physician must be included to allow this death.

*These limits are ARBITRARY and DISCRIMINATORY.*

- **WHY ONLY TERMINAL ILLNESS?** Who can judge someone else's physical, mental or emotional pain? Why should someone suffering through years of weekly kidney dialysis have to wait until (if) they're 6 months from a terminal illness death in order to get state-sanctioned aid to kill him/herself?
- **WHY A SIX-MONTH PROGNOSIS?** Why not 7 months or 1 year left to live? Some people with chronic conditions are in more pain more often than those terminally ill.
- **WHY 'PHYSICIAN' ASSISTED?** If a wheelchair bound patient asked her friend, a layperson, to wheel her to the top of a building so she could lean over and kill herself, is it acceptable for her friend to oblige? If she asked her physician to do the same, is that better? MAID legislation offers society an off-ramp to feel better about self-inflicted death when it's done under cover of physician's approval.

## **THE GRIM FUTURE OF ASSISTED SUICIDE**

Perhaps, NYS MAID bills' so-called 'safeguards' are used merely as the proverbial camel's nose in the tent. Experience from countries and states where assisted suicide is legal have taught us that such barriers don't satisfy advocates of 'death with dignity.'

- **Limitations are exposed for their discriminatory nature**
- **Limits belie proponents' stance that everyone has the right to control when & how they die**

**So, original laws are broadened over time to apply to nearly all people, all ages, all reasons.**

**Moreover,**

- **The innate value of each human person becomes distorted when killing is caring**
- **Society becomes desensitized to 'compassionate' self-destruction**
- **Suicide contagion is a real threat (acceptance of suicide increases suicides)**

**Medical Aid in Dying ~~ Death With Dignity ~~ Physician-Assisted Suicide**  
**By any other name - Assisted Suicide is Still Suicide**