Doctors backtrack on assisted suicide

Last year's decision by the BMA to adopt a neutral stance on the issue of physician assisted suicide lasted only 12 months. **Zosia Kmietowicz** looks at what changed doctors' minds

News that the BMA has reversed its stance on assisted suicide for the second time in two years, moving from the neutral view it adopted at last year's annual representatives' meeting to one of opposition this year will no doubt spark anger and relief in equal measure, if the debate leading up to this year's vote is anything to go by.

Representatives voted in Belfast by 65% (165 votes) to 35% (88) to oppose any change in the law on assisted suicide.

The turnaround is a victory for a campaign led by the group Care Not Killing, which is a coalition of more than 30 organisations opposed to physician assisted suicide. The group was launched in January this year, but doctors began work on setting it up in the immediate aftermath of last year's meeting.

According to the group, last year's vote supporting neutrality, which was won by 53% to 47%, took place when many representatives had gone home.

It was the result of an "extraordinary manoeuvre" by the chairman of the annual meeting and the chairman of the BMA's ethics committee, Michael Wilks, which relied on "procedural tactics," says the group.

"The timing of the vote [last year] and the irregular motion, both crafted by the agenda committee, were deliberately engineered to optimise the chances of a vote in favour of physician assisted suicide," said Kevin O'Kane, chairman of the regional consultants' committee for the North West Thames region, in a statement from Care Not Killing. "If this were a third world presidential election, I'm sure that the international observer would have one or two wry comments about the lack of a transparent democratic process."

But the BMA said at the time that there had been no procedural irregularities and that at least 175 representatives (out of 360 who registered) took part in

the vote—more than the 123 needed to make the vote valid.

Stephen Preston, from Buckingham division, argued that any form of physician assisted suicide is a "slippery slope" that can put pressure on people to end their life and lead to non-voluntary euthanasia of disabled people and children.

Dr Anne Turner travelled to Switzerland with her son and daughter in January 2006 so that she could end her life

"My terminally ill patients have a lot on their mind, especially the effect their illness is having on their family. My concern is that a right to die will become a duty to die, a duty to unburden their family," said Andrew Davies, a senior house officer in medical oncology in Cardiff.

Religious groups, and especially the Christian Medical Fellowship, which helps fund Care Not Killing, made concerted efforts to influence the vote of Lord Joffe's bill on assisted dying, which was defeated in its second reading through the House of Lords in May (*BMJ* 2006;332:1169, 20 May).

The views of Care Not Killing are strongly opposed by the group Dignity in Dying, formerly the Voluntary Euthanasia Society, which has been in existence for 71 years. "Terminally ill patients who have capacity and are suffering

unbearably should have the right to choose," said Isky Gordon, professor of paediatric imaging in London and a member of Dignity in Dying.

Professor Gordon claims that the Royal College of General Practitioners, which discussed the issue with its representative body last September and came out against a change in legislation, used a flawed statement in its debate, to which respondents had to agree or disagree. The same statement was also used by the Royal College of Physicians when it set out to gauge members' views on assisted dying.

The statement—"We believe that with improvements in palliative care, good clinical care can be provided within existing legislation and that patients can die with

the response was smaller (2000 replies compared with 5000 in the postal and email survey).

The chairman of the GPs' royal college, Professor Mayur Lakhani, is confident that its council correctly captured the feelings of its 25 000 members.

"I genuinely feel that as a GP a change in the legislation is not something that GPs support," he told the *BMJ*. The college argues that new legislation is not needed because improvements in palliative care mean that good clinical care can be provided: a contention that many in the debate endorsed—and others did not.

"People still die in undignified misery, despite good palliative care," said John Fitton, a general practitioner in Kettering. "There is a growing percentage of people who think there is no sort of divine entity and they prefer to have the possibility of ending their life. Progress is being held up by an unelected bunch of bishops."

Liberal Democrat MP and BMA representative Evan Harris said before the debate that "a tiny minority of religious activists" had sought to dictate policy on assisted dying in a covert way.

"If parliament were minded to back public opinion on this then the BMA should be actively engaged in ensuring there will be safeguards for patients [in legislation that allows assisted suicide]."

When people are dying they are able to refuse lifesaving treatment, and they will die from their own choice, and they do not have to explain their decision, argued Dr Harris. But people who want help to end their lives have to give a reason and go to great lengths to be able to express their choice.

In his summing up before the vote, Michael Wilks said that even with universally available optimal palliative care there will be people who would still like the option of ending their life earlier.

When pressed on whether the change in the BMA's view might be seen by some as a return to paternalism, Dr Peter Saunders, formerly a surgeon and now secretary of Care Not Killing, argued that there are limits to the freedoms permissible in a democratic society. "The key question is whether we should change the law for a very small number of people. For the common good we should not," he said.

Zosia Kmietowicz *London*