

Rebuttal: Is physician-assisted death in anyone's best interest?

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YES Dr St Godard argues¹ that physician-assisted suicide and voluntary euthanasia (PASVE; I will avoid any suggestion of a euphemism) are not in anyone's interest. Ultimately, his arguments rest on a subjective definition of *compassion*, and a personal view about the role of medicine and suffering. I respect his arguments, but I do not feel that any of them justify a societal ban on PASVE.

Compassion is a core virtue in medicine, but opponents of PASVE do not hold a monopoly on compassion, and proponents of legalization are not simply "too busy to care"¹ for patients. I would argue that the 84% of patients who support PASVE² do not lack compassion for themselves, and they do not want to make it easier for doctors to "abandon" them. They simply have a broader definition of *compassion*—one that respects their right to decide how much suffering they are willing to endure.

Like Dr St Godard, I, too, believe that end-of-life care has become too medicalized. But all therapies must be weighed against their alternatives. I do not like the idea of a patient receiving PASVE, but I like it more than the idea of unwanted, intolerable suffering.

I agree that we must talk more about end-of-life care, and we should not strive to achieve "artificial, sanitized"¹ death. I, too, have seen "boundless resilience"¹ and deep

reserves of "previously unknown inner strength,"¹ and while I admire these things, I do not demand or expect them from my patients. Some will find meaning in their suffering, but that does not mean that everybody should be forced to. And we have all seen deaths marked by suffering that would exceed any human tolerance. Thankfully, such deaths are rare, but we have no way of knowing in advance who will be affected.

I recognize that Dr St Godard and I have different views about the definition of *compassion*, and the role of medicine and suffering. Thanks to the Supreme Court of Canada,³ both of us can sleep easy knowing that our end-of-life care will reflect our own values, and not those imposed on us by others.

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Competing interests

Dr Downar is Co-Chair of the Physicians Advisory Council of Dying with Dignity Canada, a not-for-profit organization that advocates for improved end-of-life care and the right to an assisted death.

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References

1. St Godard E. Is physician-assisted death in anyone's best interest? No [Debates]. *Can Fam Physician* 2015;61:316-8 (Eng), 322-5 (Fr).
2. Ipsos Reid [news release]. *Most (84%) Canadians believe a doctor should be able to assist someone who is terminally ill and suffering unbearably to end their life*. Toronto, ON: Ipsos Reid; 2014. Available from: www.ipsos-na.com/news-polls/pressrelease.aspx?id=6626. Accessed 2015 Feb 25.
3. *Carter v. Canada (Attorney General)*. 2015. 5 S.C.C. 35591.

La traduction en français de cet article se trouve à www.cfp.ca dans la table des matières du numéro d'avril 2015 à la page e176.

These rebuttals are responses from the authors of the debates in the April issue (*Can Fam Physician* 2015;61:314-8 [Eng], 320-5 [Fr]).
