

Physicians Denounce Lack of Free Informed Consent & Safeguards of Euthanasia and Assisted Suicide Laws

10 Quebec doctors denounce the fact that the health care system is forcing people to accept “medical aid in dying” rather “than medical aid in living.”

MONTREAL, QUEBEC, CANADA, June 12, 2018 /EINPresswire.com/ -- 10 Quebec doctors

denounce the fact that the health care system is forcing people to accept “medical aid in dying” rather “than medical aid in living” in Canada. According to the doctors, patients end up wanting to die because they do not have access to proper medical care. Each physician demonstrated how the lack of access to proper care deprived patients of free and informed consent and adequate safeguards in the euthanasia and assisted suicide laws.

Lisa d’Amico lives in Montreal and is the President of the Medical Errors Victims Fund. She lives with cerebral palsy since birth. Lisa argues that euthanasia and assisted suicide laws are abusive and killing people against their will. According to Mme d’Amico « the lack of medical care and therapeutic incidents or accidents lead to unwarranted deaths. »

Dr. Colavincenzo described a patient with congestive heart failure with many quality years to live being euthanized without free and informed consent because of overly pessimistic predictions by the physician unduly influencing family members. According to Dr. Colavincenzo this clearly shows that the laws are not protecting patients.

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Many Quebec patients do not have access to quality palliative home care: the choice is either going to the hospital or ending their life quickly by a lethal injection”

Dr. Laurence Normand-Rivest



Physician Advocating for Medical Aid in Living

Dr Ron Olivenstein, former Director of the Montreal Chest Hospital, described how patients with severe lung disease can have many years to live, but whose lives are short-circuited because of lack of availability to pulmonary rehabilitation services. Without optimal care, some of these patients will decide to end their lives. For Dr. Olivenstein this is another example of lack of free and informed consent and inadequate safeguards.

Dr. Kass who is former Director of Surgery at Lachine Hospital and operates on woman with breast cancer, states that woman over 70 are not encouraged to have routine

mammograms which could result in missing some early cancers. Patients who do not undergo timely screening and treatment cannot give a free and informed consent because of inadequate safeguards. Dr Laliberté, former Director of Family Medicine at Lachine, considers that some patients may ask for assisted death without a free and informed consent. Lack of accessibility to adequate palliative care is a major issue, as recently reported by the Quebec College of Physicians. Consequently patients, in distress will be forced to ask for physician assisted death. This is not to be taken lightly as the decision is serious and has irretrievable consequences, namely death.

Dr. Thierry Toledano is an internal medicine specialist. He stated that it is impossible to give patients clear informed consent as to whether they are at the end of life. What does end of life mean : a few days; several months; less than 6 months; less than a year? The Canadian law is even less clear than the Quebec law since a prognosis does not need to be given to the patient. What does dying in the foreseeable future mean if prognosis is not to be included in the assessment? Does this mean the patient doesn't even have to be dying? Most chronic medical conditions that physicians treat (for example, diabetes, chronic heart and lung problems) are "incurable" and progressive. Which of these patients are eligible under the current law?

For Dr. Toledano, the consent cannot be free and informed if the eligibility conditions are vague.

Dr. Liette Pilon, a family physician, deplors the fact that access to important care like pain control is long and difficult. Access for mental health, geriatric, disability, home and palliative care is lacking.

Some patients end up asking for death because of inadequate care. « How can a patient have a free and informed choice when a lethal injection is more readily available than real care? » asks Dr. Pilon.

Dr. Sylvia Baribeau, a family physician described the pressures placed on patients who want home care but do not have access and are afraid to go to the hospital where the care often is suboptimal for basic hygiene. They talk about ending their lives rather than facing undignified living conditions at the hospital or nursing homes.

Dr. Peter Blusanovics is an AIDS hospice, palliative and geriatric physician. He decries the lack of access of quality health care, delays in diagnosis and treatment and lack of hygienic care in institutions which may cause patients to « rush into a hasty decision to end their lives by assisted suicide or euthanasia because of the fear of not receiving adequate medical care and fear of being alone or a burden to others. »

Dr Laurence Normand Rivest who works in palliative care described that many patients in Quebec do not have access to the quality home palliative care services they need. At the end of life the choice is either going to the hospital where they do not want to spend their last days or ending their life quickly by a lethal injection.

Recently, the Quebec College of Physicians which is mandated to ensure the quality of medical practice, issued a letter to the Quebec Government expressing their concerns that physician assisted death may be causing patients to turn to lethal injections because of the lack of palliative care.

In this letter, the President of the College of Physicians informed the Health Minister that there are « difficulties with the accessibility of palliative care for many end-of-life patients » denouncing that « in certain well-identified cases, patients, not benefiting from such care, could have had no choice but to request medical assistance in dying to end their days "in dignity »; The College of Physicians also advises that « end-of-life care can not be limited to access to medical assistance in dying. »

Dr. Paul Saba reminded us that the Quebec Commission in 2016 and 2017 reported many deaths that did not respect the law. For Dr. Saba, these findings confirm that the law is not being respected, that patients are not being properly informed and that the safeguards are inadequate.

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