

OPINION

Talking Point: End of life — too important to get wrong

Voluntary Assisted Dying Bill should be sent to a properly resourced inquiry, writes HELEN LORD

Helen Lord, Mercury

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 A peaceful, dignified and comfortable death is possible.

THE End of Life Choices (Voluntary Assisted Dying Bill) or VAD is to be introduced into Tasmania's Upper House by Mike Gaffney within the next month.

This Bill is in its third formal draft and has not been officially released. There has been no preamble released. So-called community consultation on previous drafts were simply education sessions on the proposed Bill, held during COVID-19 restrictions, and were conducted as if the legislation had already been passed.

Version 13 of the Bill is doing the rounds of a select few. It is not yet available for public comment. It allows for assisted death, by means of the use of lethal substances, for anyone with a serious illness who makes a request. The doctors do not have to have expertise in the illness, and they need have no particular expertise in end-of-life matters.

The second draft included consideration of assisted death for children in two years' time. This has been removed in version 13, yet I gather is still under consideration. It has been taken in and out of previous versions.

The second draft and version 13 both have the option of death being achieved by means of self-administered lethal substances kept in a locked box at the patient's home for up to 12 months. It is courting disaster to allow boxes of lethal substances to be stored in the community, to be stolen or inadvertently accessed by children or others.

This Bill is clearly about assisting suicide, and is not about assisting those who have pain and suffering at the end of life to achieve a better death. It is known there are problems with the lethal substances not working as intended and significant side effects do occur, so the promised peaceful death at a time of one's choosing with VAD may not in fact take place.

A peaceful, dignified and comfortable death is possible. The current health services which can provide this need to be adequately funded, resourced and co-ordinated. A peaceful, dignified and comfortable death is possible with guaranteed funding arrangements and access to good medical services including palliative medicine.

All this is occurring in a time of pandemic COVID-19 infection. Health professionals are preparing for a tsunami of death and disruption to medical services, whilst at the same time dealing with a tsunami of mental illness caused by uncertainty, unemployment and isolation.

As a doctor I am already seeing the additional anxiety being generated by the media discussions around VAD in those who are dying and in those with chronic illness.

In the COVID-19 landscape, allowing VAD will worsen mental health outcomes and divert acute medical resources. Overseas, VAD and associated processes have been shut or suspended during COVID-19 to redeploy staff. Clearly VAD is not a priority in a health crisis.

VAD legislation intersects with the two other key end-of-life matters: advanced care planning and medical decision making at the end of life. There has been no legislation enacted on these matters in Tasmania as has occurred in other Australian states before considering this.

VAD legislation does have an impact on other medical services and this needs to be considered.

I would therefore urge all politicians to support an appropriately resourced parliamentary inquiry into this Bill, and not just simply pass or continue to amend it. For the sake of all Tasmanians, this is too important to get wrong.

Dr Helen Lord is a Tasmanian GP and palliative medicine specialist.

Lifeline 13 11 14 has 24-hour support.