



Medical Aid In Dying

Expanding an End of Life Option in NC
Senior Education Conference
Chatham County Council on Aging
November 7, 2018

What Does MAID Do?

- ◆ Provides legal, civil and administrative immunity to anyone (e.g. doctor, pharmacist, relative, friend) assisting terminally-ill individual in taking MAID drug
- ◆ Declares cause of death to be underlying terminal illness, not act of taking MAID drug (i.e. not deemed suicide)
- ◆ Allows terminally-ill individual to control time & place of death in self-selected environment of choice

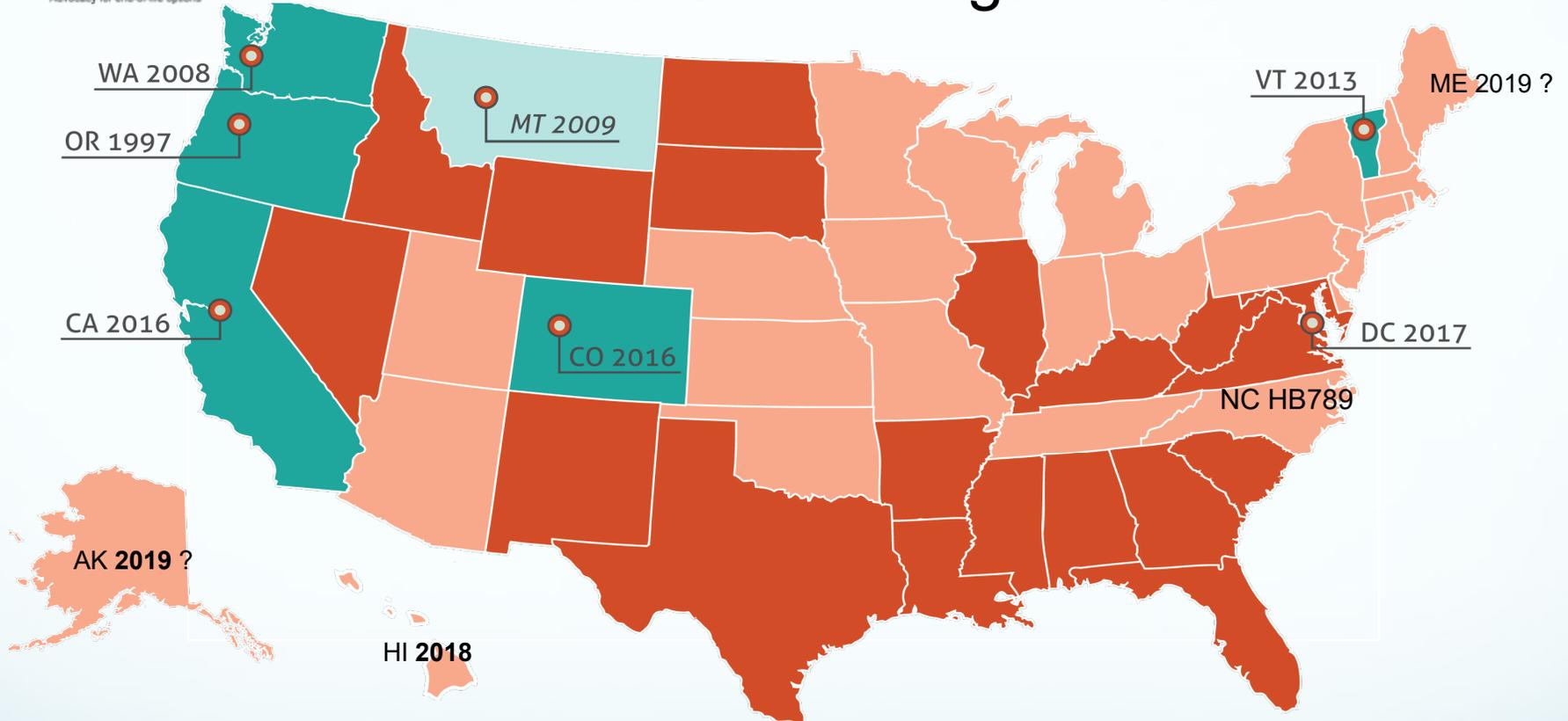
What Does MAID NOT Do?

- ◆ Alter legal status of suicide
- ◆ Sanction euthanasia– 3rd person (doctor, friend) directly applying/ injecting MAID drug can be prosecuted for murder/homicide
- ◆ Sanction prescription to non-terminal individual: neither advanced age, extreme pain/suffering, nor disability, in absence of terminal illness, qualifies under MAID laws
- ◆ Sanction MAID drug for someone with dementia, diminished mental capacity or suffering from depression or via proxy

What Are Legal Alternatives?

- ◆ Suffering until death
- ◆ Palliative care
- ◆ Hospice
- ◆ VSED (Voluntary Stopping of Eating & Drinking)
- ◆ Terminal Sedation
- ◆ Withdrawal of life support machines/medicine
- ◆ Self administration of alternative life-ending means
(inert gas, gunshot, overdose, etc.)
- ◆ Standard of Care (Montana only)

Where is MAID legal in US



THE MOVEMENT IN 2018

- States with a Death with Dignity statute
- States with Death with Dignity legal by court decision
- States considering Death with Dignity in 2018
- States with no legislative activity in 2018

EXISTING DEATH WITH DIGNITY STATUTES

- Oregon: passed in 1994, in effect since 1997
- Washington: 2008 (2009)
- Vermont: 2013
- California: 2015 (2016)
- Colorado: 2016
- Washington, D.C.: 2016 (2017)

Map courtesy of Death with Dignity National Center

Where is MAID legal (ROW)

- ◆ Europe: BeNeLux; Germany, Switzerland
- ◆ Americas: Canada, Colombia, Mexico
- ◆ Australia: Victoria State

What do MAID's opponents fear

- ◆ Slippery slope to discarding society's most vulnerable
- ◆ Violation of the doctor's Hippocratic oath: "Do No Harm"
- ◆ Promotion of culture of suicide which does not value life
- ◆ Incompatible with God's plan
- ◆ Camel's nose in the tent of euthanasia
- ◆ Will become preferred recourse for indigent/uninsured

How does MAID work?

- ◆ Terminal patient with less than 6 months makes 2 verbal requests 15 days apart and written request
- ◆ Written request before 2 independent witnesses
- ◆ Both **Attending & Consulting** physician certify patient:
 - 1 Is competent adult and State resident,
 - 2 Has less than 6 months due to terminal illness
 - 3 Is not acting under duress or coercion,
 - 4 Has been advised of alternatives
 - 5 Is not suffering from mental disease/disorder
 - 6 Is referred to mental health specialist if needed

How does MAID work?

- ◆ All medical personnel may decline participation for moral/religious reasons
- ◆ Attending physician writes lethal prescription (secobarbital/pentobarbital)
- ◆ Patient gets prescription from participating pharmacist
- ◆ Patient ingests medicine if/when he wants or may change mind to let nature takes its course
- ◆ Dept of Health promulgates regulations and maintains detailed records

How has MAID been working?

21 years of Oregon data

- ◆ **Median age 73; even gender split; 46% married; 24% divorced**
- ◆ **White: 97%**
- ◆ **Well educated: 73% some college, 46% BA or above**
- ◆ **90% enrolled in hospice; 99% insured**
- ◆ **77% died of cancer, 8% ALS**
- ◆ **93% died at home; 5% died in long term care facility**
- ◆ **36% never took medicine but kept prescription as bedside comfort**
- ◆ **Average of 59 deaths p.a. (37.2 per 10,000 total deaths in OR)**
- ◆ **93% notified family of decision**
- ◆ **Primary end of life concerns:**
 - 1) **Loss of autonomy, 91%**
 - 2) **Less able to engage in life, 90%**
 - 3) **Financial concerns, 3%**



How has MAID been working?

What the data show

No interest in legalizing euthanasia or expanding coverage of MAID outside current eligibility criteria. (No slippery slope)

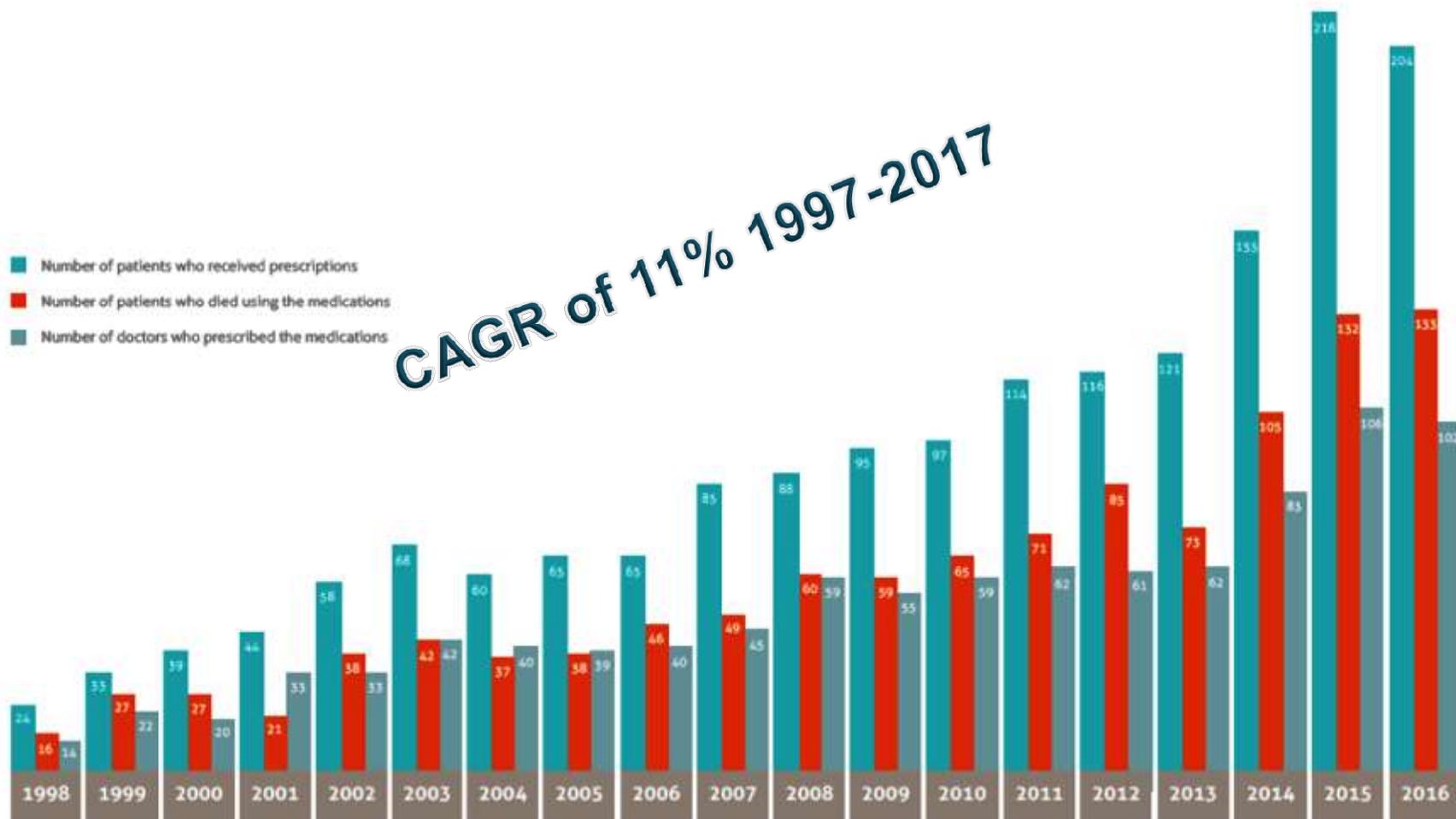
Patients are comforted to have Rx; 38% opt not to ingest

Floor is raised for good EOL care for all:

- 1. More training in pain/symptom management**
- 2. Increase Rx for pain meds**
- 3. Increase (and earlier) hospice referrals**
- 4. Improved communication between doctor/patient**
- 5. Enhanced understanding by doctors/patients of EOL options**

How has MAID been working?

20 years of Oregon data





And in NC?

- ◆ **HB 611 introduced April 2015 and HB 789 introduced in April 2017 legalizing MAID based on Oregon model. Neither bill advanced.**
- ◆ **HB 789 added several safeguards not present in current law**
- ◆ **NC is one of 5 States where “assisted Suicide” not explicitly prohibited**
- ◆ **NC Medical Society issued initial opposition to MAID in 1992, reiterated 3 times**
- ◆ **New Bill to be introduced in 2019**



Increasing widespread support

- ◆ Diverse constituencies overwhelmingly support MAID
- ◆ Overwhelming support in 2016 Medscape survey of 7500 doctors from 25 specialties for MAID (57%-29%)
- ◆ Growing general population support now 69% per Gallup
- ◆ Economist/Ipsos (June 2015) survey in 15 countries found 13 with majority support for MAID: exceptions Poland and Russia
- ◆ No reported abuse in any state; no instances of foul play, coercion
- ◆ AMA's House of Delegates voted June 2018 56%-44% to REJECT report by Council on Ethical & Judicial Affairs (CEJA) which had recommended that AMA maintain its opposition to MAID in its Code of Medical Ethics



Increasing widespread support

Minnesota Medical Association Revises Its Policy on Physician Aid-In-Dying

5/25/2017

At its May 20 meeting, the MMA's Board of Trustees **revised its 25-year old position on physician aid-in-dying.**

The MMA will oppose any bill unless it includes specific protections detailed in the new policy.

The decision came after extended discussion among board members as well as a variety of engagement activities with membership.

The MMA took a deliberate approach to this topic as it's quite sensitive with members. It held a policy forum with members, convened a task force and conducted a member-wide poll.

The poll went out in April, garnering more than 700 responses.

Seventy percent of poll respondents endorsed the recommendation to modify existing policy by withdrawing opposition and moving towards conditional opposition.

The MMA is not alone in reconsidering its position on this topic. A number of other state medical societies have revised their positions on physician aid-in-dying, including California, Colorado, Maine, Maryland, Nevada and Oregon.



Increasing widespread support

◆ **MEDICAL GROUPS NOW SUPPORTIVE OF MAID:**

- American College of Legal Medicine
- American Medical Student Assn
- American Medical Women's Assn
- American Nurses Assn of CA
- American Public Health Assn
- NY State Academy of Family Physicians

◆ **MEDICAL GROUPS RESCINDING PRIOR OPPOSITION TO NEUTRALITY**

- American Academy of Hospice & Palliative Medicine
- American Academy of Neurology (rephrasing MAID as Lawful Physician Hastened Death)
- WA Academy of Family Physicians
- American Pharmacists Assn
- Oncology Nursing Assn
- CA Medical Assn
- CA Hospice & Palliative Care Assn
- CO Medical Society
- Maine Medical Assn
- MD State Medical Society
- MA Medical Society
- Medical Society of DC
- MN Medical Assn
- MO Hospice & Palliative Care
- NV State Medical Assn
- OR Medical Assn
- VT Medical Society
- WA Academy of Family Physicians
- WA State Psychological Assn



Is MAID the same as Physician Assisted Suicide? (PAS)?

- ◆ Suicide is (irrational) shortening of otherwise physically healthy life
- ◆ MAID is (rational) hastening of imminent, inevitable death
- ◆ VSED or Withdrawing of life support not deemed suicide, although result is predictably death
- ◆ PAS occurs where physician facilitates the suicide of depressed but healthy patient & remains illegal, probably in MAID-states as well
- ◆ Although suicide is legal in 50 states, abetting suicide remains illegal in 40 states as felony corresponding to manslaughter
- ◆ Where MAID remains felony, it is often the only instance where it is illegal to assist someone in exercising a legal, constitutional right

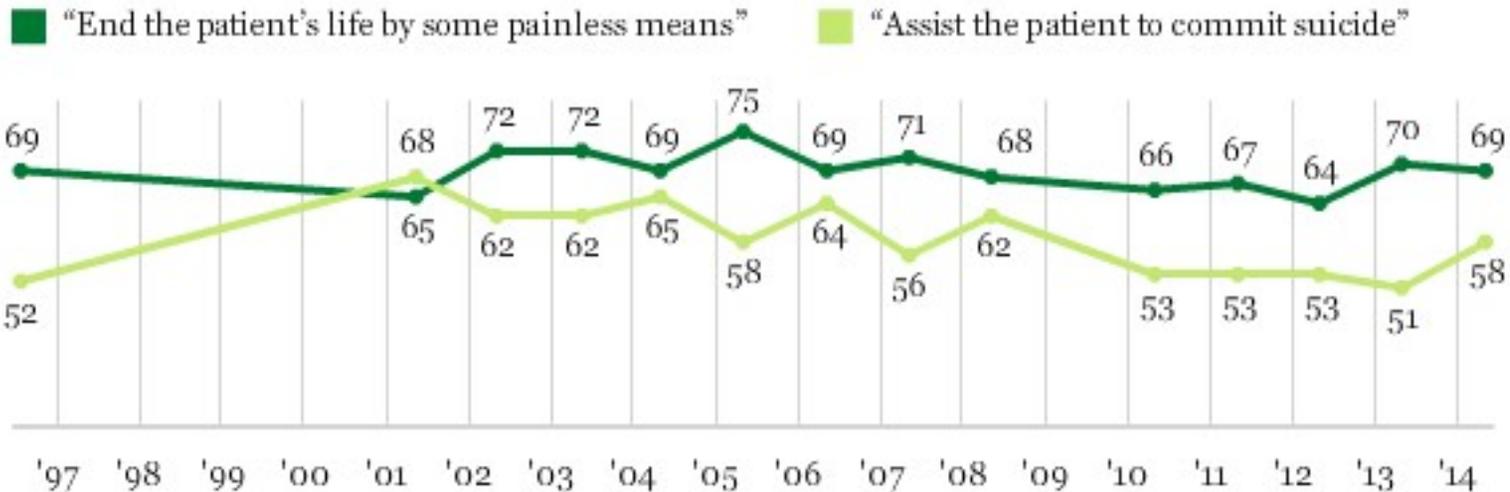


Is MAID the same as Physician Assisted Suicide? (PAS)?

Support for Physician-Assisted Suicide -- Two Question Wordings

(Form A) When a person has a disease that cannot be cured, do you think doctors should be allowed by law to end the patient's life by some painless means if the patient and his or her family request it?

(Form B) When a person has a disease that cannot be cured and is living in severe pain, do you think doctors should or should not be allowed by law to assist the patient to commit suicide if the patient requests it?



GALLUP



NCMS: Recognizing Importance of End of Life Autonomy

END OF LIFE ISSUES (“EOL”):

RESOLVED, That the NCMS supports public and private efforts to enhance understanding of EOL issues so that health care professionals are better able to provide optimal compassionate palliative care of terminally ill patients; and be it further

RESOLVED, That the NCMS supports the use of portable DNR and MOST forms Approved by the NC Dept of Health and Human Services.

Patient Self-Determination at EOL

RESOLVED, That the NCMS supports efforts to ensure that a patient’s wishes regarding the level of EOL treatment are solicited & honored, including, but not limited to, the use of tools such as advanced directives... living will & health care PoA, and portable physician orders such as portable DNR and MOST, and be it RESOLVED,

That the NCMS supports immunity for health care professional who rely & act in good faith on reliable source of information communicating patient’s wishes with regard to desired level of EoL treatment.



NCMS: Recognizing Importance of End of Life Autonomy

PHYSICIAN-ASSISTED SUICIDE

RESOLVED, That the NCMS supports educational programming to improve physician awareness of their patients' overwhelming need to be adequately and effectively relieved of the physical and psychological pain that can accompany terminal and incurable illness; and be it further

RESOLVED, That the NCMS opposes physician-assisted suicide.

(Substitute Report PP-1992, adopted 11/8/1992) (reaffirmed, Report H-2002, adopted 11/17/2002) (revised, Report N-2008, Item 3-47, adopted 10/18/2008) (reaffirmed, Reaffirmation Report-2013, Item 7, adopted 10/26/2013)



The human face of MAID (Brittany Maynard's story)

- ◆ 29-Year old newlywed from California
- ◆ Diagnosed with inoperable, degenerative, incurable brain cancer
- ◆ Moved to Oregon to establish residency and use MAID law
- ◆ Became poster child for the movement when she publicly announced she would take lethal medicine on Nov. 1, 2014
- ◆ Video to California legislature and phone call to Governor Jerry Brown
- ◆ Convinced Gov. Brown to sign the End of Life Option Act on 2015
- ◆ As a result, California became 5th state with MAID law