

OREGON'S PHYSICIAN-ASSISTED SUICIDE LAW

Abused and Exploited

{CASE IN POINT: BARBARA WAGNER AND RANDY STROUP}



Barbara Wagner, a 64-year-old Oregon woman, learned that her lung cancer had returned after two years of remission. Her oncologist prescribed a drug which could extend her life by slowing the cancer's progression.

Randy Stroup, a 53 year-old Oregon man, was prescribed a drug for his prostate cancer that would not cure the cancer, but could extend his life and make him more comfortable by decreasing his pain.

Both Wagner and Stroup applied for payment of the recommended treatment under the Oregon Health Plan, the state's rationed Medicaid program for the poor. Both

received an unexpected and stunning letter from Oregon – the state would not pay for their chemotherapy but would cover assisted suicide drugs. Why? "The state can't cover everything for everyone," explained an Oregon administrator.

Tragically for Oregon's poor patients, if a costly cancer treatment provides a patient with real comfort and care rather than a cure, it will not be covered. Because cancer treatment would cost thousands of dollars a month while assisted suicide costs are usually under \$100, Oregon is allowing cost to be a factor in their decision to ration care.

The Oregon physician-assisted suicide law failed both Wagner and Stroup, even though they didn't request suicide. The law gives Oregon health officials the rationale and option for refusing real treatment to real patients.

Learn more about Barbara Wagner and Randy Stroup:

1. Susan Harding, "Letter noting assisted suicide raises questions," *KATU television*, July 30, 2008 (video and article). <http://www.katu.com/news/26119539.html>
2. Dan Springer, "Oregon Offers Terminal Patients Doctor-Assisted Suicide Instead of Medical Care," *Fox News*, July 28, 2008. <http://www.foxnews.com/story/0,2933,392962,00.html>
3. Tim Christie, "A Gift of Treatment," *Register-Guard*, June 3, 2008. <http://projects.registerguard.com/turin/2008/jun/03/gift-treatment/>
4. Susan Donaldson James, "Death Drugs Cause Uproar in Oregon," *ABC News*, August 6, 2008. <http://abcnews.go.com/print?id=5517492>

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How well is it REALLY working?

"Death with Dignity" supporters in Vermont would like to convince us that physician-assisted suicide is safe from abuses or exploitations because it is supposedly going well in Oregon. But, consider the following:

While Oregon's Physician-Assisted Suicide law mandates that all physicians who participate in assisted suicide deaths report each case to the state, the law does not penalize doctors who fail to do so, and the Oregon Health Division has no authority to enforce the reporting requirement.

Consequently, there is no way to know the exact number of deaths and the actual circumstances prompting a patient to request assisted-suicide. **And, since there is no requirement that a physician be present when the lethal prescription is taken, there is no evidence to show that when patients actually take the lethal prescription they are competent, free from coercion, and self-administer the drug.**

OHD acknowledged early on that it is "difficult, if not impossible, to detect accurately and comment on underreporting." They further state, "**We cannot determine whether physician-assisted suicide is being practiced outside the framework of the [law].**" [Chin et al., "Legalized Physician-Assisted Suicide in Oregon-The First Year's Experience," *NEJM*, 2/18/99]

The Oregon Health Division can only report data that is reported voluntarily to them. They have no authority or resources to look for abuses.

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