

Washington State's Death With Dignity Act Must Be Overturned

No More Assisted Suicide

October 16, 2019

Washington State's Death with Dignity Act was passed by the voters as Initiative 1000. During the election, backers touted it as providing "choice" for individuals. A glossy brochure declared, "Only the patient — and no one else — may administer the [lethal dose]." The Act does not say this anywhere.¹

- The Act legalized assisted suicide as that term is traditionally defined. In the fine print, the Act allows euthanasia.
- The Act applies to adults with a disease expected to produce death within six months. In practice, this includes people with years, even decades, to live. This is because the six months to live is determined without treatment, so that young adults with chronic conditions, such as insulin dependent diabetes, are terminal for the purpose of the Act. This is also because predictions of life expectancy are often wrong, with some people living decades past a terminal diagnosis.²
- Assisting persons can have an agenda: a criminal seeking financial gain; a family member wanting an inheritance; or a doctor who just likes to kill people.³

¹ For more information, see Margaret Dore, "Death with Dignity": What Do We Advise Our Clients?" King County *Bar Bulletin*, May 2009, available at <https://www.kcba.org/newsevents/barbulletin/BView.aspx?Month=05&Year=2009&AID=article5.htm>

² Cf. Nina Shapiro, "Terminal Uncertainty," Washington's new "Death with Dignity" law allows doctors to help people commit suicide - once they've determined that the patient has only six months to live. But what if they're wrong? *The Seattle Weekly*, January 14, 2009, <https://www.seattleweekly.com/news/terminal-uncertainty>; Jessica Firger, "12 Million Americans Misdiagnosed Each Year," CBS NEWS, April 17, 2014, at <https://www.cbsnews.com/news/12-million-americans-misdiagnosed-each-year-study-says>; and Margaret Dore, "John Norton: A Cautionary Tale," 09/22/12, <https://www.massagainstaassistedsuicide.org/2012/09/john-norton-cautionary-tale.html>

³ Consider Tammy Sawyer, trustee for Thomas Middleton in Oregon. Two days after his death by legal assisted suicide, she sold his home and deposited the proceeds into bank accounts for her own benefit. "Sawyer Arraigned on State Fraud Charges," KTVZ.COM, 08/16/16. Consider also Graham Morant, convicted of counseling

- The Act is sold as completely voluntary, but someone else is allowed to speak for the patient during the lethal dose request process, even a stranger or the patient's heir.⁴
- Administration of the lethal dose is allowed to occur in private without a doctor or witness present.⁵ If the patient objected or even struggled, who would know?
- The death certificate is required to list a terminal disease as the cause of death.⁶ This prevents prosecution for murder as a matter of law, no matter what the facts. The Act creates a perfect crime.
- Assisted suicide, even when voluntary, can be traumatic for patients, friends and families.⁷

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his wife to kill herself, to get the life insurance. The Court found: “[Y]ou counselled and aided your wife to kill herself because you wanted ... the 1.4 million,” *R v Morant* [2018] QSC 251, Order, 11/02/18, available at: <https://archive.sclqld.org.au/qjudgment/2018/QSC18-251.pdf> and Charlie Leduff, “Prosecutors Say Doctor Killed to Feel a Thrill,” *The New York Times*, 09/07/00, <https://choiceisanillusion.files.wordpress.com/2019/03/ny-times-killed-to-feel-a-thrill-1.pdf> (“Basically, Dr. Swango liked to kill people. By his own admission in his diary, he killed because it thrilled him.”) See also David Batty, “Q & A: Harold Shipman,” *The Guardian*, 08/25/05, at <https://www.theguardian.com/society/2005/aug/25/health.shipman>. (Attached hereto at A-46 to A-48).

⁴ The Act, RCW 70.245.010(3), allows another person to speak for the patient during the lethal dose request process. The only requirement is that the speaking person be “familiar with the patient’s manner of communicating.” The speaking person is allowed to be the patient’s heir or otherwise in a position to benefit from the patient’s death.

⁵ Dore, at note 1.

⁶ <https://www.doh.wa.gov/Portals/1/Documents/Pubs/422-148-DWDAInstructionsForMedicalExaminers.pdf>

⁷ “Death by request in Switzerland: Posttraumatic stress disorder and complicated grief after witnessing assisted suicide,” B. Wagner, J. Muller, A. Maercker; *European Psychiatry* 27 (2012) 542-546, available at <http://choiceisanillusion.files.wordpress.com/2012/10/family-members-traumatized-eur-psych-2012.pdf>