

# US attorney general supports fundamentalists on physician-assisted suicide

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26 November 2001

US Attorney General John Ashcroft's attempt to kill the Oregon law that allows physician-assisted suicide for terminally ill patients has ignited a storm of opposition and is being challenged in court.

Oregon's Death With Dignity Act, allowing doctors to give lethal doses of barbiturates to individuals who are terminally ill, became law in 1997, after voters had approved it twice by sizable margins. To prevent any possible abuse of the law, two doctors must certify that the patient has less than six months to live and is mentally competent, and patients must take the prescribed drug themselves, orally and after a waiting period.

The law has not led to a large number of such suicides. Only about 70 people have taken their own lives in this fashion, about 20 a year. But a wider number of people have been affected. Many of the dying have explained that the knowledge that they had the alternative of ending their pain has been of great assistance.

As a spokeswoman for the Compassion in Dying Federation, a statewide advocacy group, explained, "Very few people use medication to hasten their death, yet thousands obtain comfort knowing the choice is theirs if they experience intolerable suffering."

Over the past few years hospice care has increased, Oregon having double the national average of such care. Many terminally ill patients have been able to spend their final weeks of life at home with their friends and families.

On November 6, Ashcroft, the religious fundamentalist and former senator from Missouri, issued a directive ordering the Drug Enforcement Administration to remove the licenses of those doctors who prescribe lethal doses of federally regulated drugs. While not openly challenging the constitutionality of

the Oregon law, Ashcroft is seeking to use the federal Controlled Substances Act to make it a dead letter.

The attorney general is acting in line with the wishes of the anti-abortion fanatics and fundamentalist elements who wield enormous influence within the Republican Party and the Bush administration. These advocates of an American-style theocracy believe that the agonizing pain suffered by many cancer patients and others is part of "God's will." Their "pro-life" dogma is used to justify anguish for those nearing the end of life. They show no such concern, of course, for the lives of thousands of prisoners now awaiting capital punishment in the US, or the innocent victims of Washington's bombing campaign in Afghanistan.

Some commentators have pointed out the brazen hypocrisy of the Bush administration in relation to its oft-repeated mantra of "states' rights." As shown most vividly in the theft of the 2000 election, the same political forces that insist federal authorities have no legal basis for making the states enforce anti-discrimination laws show no hesitation in overruling state legislatures or judiciaries when it comes to upholding right-wing nostrums or the privileges of the wealthy.

Ashcroft's attack on the privacy and democratic rights of the sick and elderly is very much in line with the police-state moves he has taken in recent weeks. The attorney general has authorized the secret detention of over 1,000 people, compiled a list of more than 5,000 foreign nationals legally living in the US who are to be interrogated by the FBI, and issued warnings of new terrorist threats based on vague evidence that has never been made public.

Oregon state authorities successfully appealed for a stay of Ashcroft's order. On November 20, Judge Robert E. Jones of the Federal District Court in

Portland extended for at least four months the restraining order he had issued a week earlier, while preparations are made for the trial of a suit against the attorney general brought by the state and four terminal patients. The suit argues that the Justice Department has overstepped its authority in an area that falls under the control of the states. Meanwhile, the Oregon law will remain in effect. The case may eventually find its way to the US Supreme Court.

Harvard professor of medicine Jerome Groopman, a frequent writer on the social questions raised by developments in medicine, observed that the states' rights argument "skirts the more fundamental issue." In a recent newspaper column, he wrote: "Helping nature take its course is not criminal, and it should be outside governmental regulation. Decisions about when and how to die are best left to patients, families and health professionals, not legislators and litigators."

Groopman and others have pointed out that Ashcroft's attack goes far beyond its immediate impact in Oregon. Twenty-two states, while not yet legalizing physician-assisted suicide, have passed laws encouraging aggressive treatment of intractable pain. According to Groopman, Ashcroft's claim that federal authorities could easily make the "important medical, ethical and legal distinctions between intentionally causing a patient's death and providing sufficient dosages of pain medication necessary to eliminate or alleviate pain," showed a basic lack of medical knowledge. The doses of painkillers that are needed to alleviate pain, including narcotics like morphine, at the same time inevitably reduce breathing and lower blood pressure, and hasten death.

Thus, the attack on the one law that explicitly authorizes physician-assisted suicide could very easily become an attack on the undeclared but nevertheless increasing use of painkillers as a means of facilitating a relatively peaceful death for many people all over the US. Such use of painkillers is widespread in hospice care, for instance, although only in Oregon does it take the form of the explicit option of suicide.

The controversy over the Oregon law has undoubtedly struck a chord with many millions of working people who are increasingly alienated from an impersonal and callous profit-centered medical system.

The question of assisted suicide is not a simple one, as demonstrated by the Nazis' use of euthanasia. Nor

did the sensational treatment of the issue by Dr. Jack Kevorkian in recent years do anything to promote a rational and humane approach to the question.

Nevertheless, it is clear that socialists must, in principle, defend the right of terminally ill people, under professional care, to end their own lives. The fundamentalists are correct in one respect—the question of assisted suicide does have something in common with that of abortion rights. At stake in both matters are questions of democratic rights, basic human compassion, equality in access to medical care, and enlightened social policy, in opposition to religious dogma.



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