

making during dying is needed to evaluate the current state of Canadian practice. This evaluation would help determine the possible need for change and identify what those changes should be. If physicians participating in such a study were offered immunity from prosecution based on information collected, as was done during the Rummelink commission in the Netherlands, the study could substantiate or refute the repeated allegations that euthanasia and assisted suicide take place.

4. The public should be given adequate opportunity to comment on any proposed change in legislation. The law should be determined by the wishes of society, as expressed through Parliament, rather than by court decisions.

5. Consideration should be given to whether any proposed legislation¹ can restrict euthanasia and assisted suicide to the indications intended. Research from the Netherlands and Oregon demonstrate that a large percentage of patients who request aid in dying do so in order to maintain their dignity and autonomy.

If euthanasia or assisted suicide or both are permitted for competent, suffering, terminally ill patients, there may be legal challenges, based on the Canadian Charter of Rights and Freedoms, to extend these practices to others who are not competent, suffering or terminally ill. Such extension is the "slippery slope" that many fear. Courts may be asked to hear cases involving euthanasia for incompetent patients on the basis of advance directives or requests from proxy decision makers. Such cases could involve neurologically impaired patients or newborns

¹ E.g., Oregon Revised Statutes. *The Oregon Death with Dignity Act*, § 127.800 - §127.995.

with severe congenital abnormalities. The "Groningen protocol," which sets out five criteria for the provision of euthanasia to incurably ill babies, was adopted in Holland. Psychiatrists recognize the possibility that a rational, otherwise well person may request suicide. Such a person could petition the courts for physician-assisted suicide.

Conclusion

This statement has been developed to help physicians, the public and politicians participate in any re-examination of the current legal prohibition of euthanasia and assisted suicide and arrive at a solution in the best interests of Canadians.