

# California group wants lethal injections for ill patients

by Linda Everett

In Hitler's euthanasia program for chronic patients, code-named T-4 after the address of its camouflage organization, the actual killing of patients was done by physicians. It was Dr. Viktor Brack, the head of the Chancery's "Euthanasia" Department II, who first pronounced the motto: "The syringe belongs in the hands of a physician." Doctors reviewed patients' medical histories, charts, work ability, and disease status.

After the morning rounds, they handed out lists of those patients to be given "medication" that night. To Hitler's personal physician, Karl Brandt, the Reich Commissioner for Health, the euthanasia program could "only be looked at from a medical point of view." Thus, when lethal injections did not induce death quickly enough, Brandt stated "that only doctors should carry out the gassing."

Today, on the streets of California, modern day Nazis are campaigning to make physicians once again the medical executioners of the "incurable." The Hemlock Society and its sister organization, Americans Against Human Suffering (AAHS) are out collecting signatures for their aid-in-dying initiative, which calls for physician to be able to "legally" and "swiftly" kill their "terminally" ill patients with lethal injections and oral medications.

Should the physician-assisted suicide referendum receive the required 450,000 signatures of registered California voters in 150 days, it would qualify for the November 1988 ballot, whereupon California residents could vote to make it law.

The initiative, entitled "The Humane and Dignified Death Act," would amend the California Natural Death Act to state, "Adult persons have the fundamental right to control decisions relating to the rendering of their own medical care, including the decision to have life-sustaining procedures withheld or withdrawn or, if suffering from a terminal condition, to request a physician to administer aid in dying. Modern medical technology has made possible the artificial prolongation of life beyond natural limits. This prolongation of life for persons with terminal conditions may cause loss of patient dignity and unnecessary pain and suffering, while providing nothing medically necessary or beneficial to the patient."

A patient would also sign a written directive or durable power of attorney that assures the patient's treatment decisions are carried out should he be diagnosed incompetent and

"terminally" ill. The directive and anyone appointed to oversee it would be effective immediately and valid for seven years thereafter. It could be revoked at any time. Should a patient fall into unconsciousness, his directive could be put into effect and he would be eliminated with dispatch. There are, however, numerous well documented cases where patients have expressed satisfaction and relief when such directives are ignored, and they are resuscitated.

According to David Clarke, AAHS's northern California campaign manager, the measure is designed to relieve people in the final stages of dying "who have been kept alive against their will." Its provisions specify that a patient "qualifies" for the killer drugs by requesting aid-in-suicide in writing after two physicians have certified in writing that the patient has less than six months to live. Despite the fact that it is difficult enough to make such a prediction, this act would not even require both physicians to have personally examined the patient! So much for second opinions.

The killer drugs can only be administered in a hospital by a physician but never to pregnant women, minors, or the mentally incompetent. Section 401 of the Penal Code would be changed to allow killing of "qualified" patients but would state "Every person who deliberately aids, or advises, or encourages another to commit suicide, is guilty of a felony."

## The people behind it

To truly understand the genocidal intent of this initiative, you have to understand the people behind it. Americans Against Human Suffering is the lobbying arm of the Hemlock Society, whose founder Derek Humphry killed his first wife. Humphry and his second wife, Ann "Wicked" Wickett, have for years encouraged murder, suicide, and assisted suicide, and to this day distribute materials detailing the most effective methods and medications to be used. At Hemlock's conference last year, leaders extolled the useful, if unglamorous, method of using a plastic bag to snuff out a loved one's life.

Members complained that Hemlock's Dignified Death Act should allow lethal pills to be given to patients at home by their friends when they wanted it. After all, they said, "What about those of us who get bored with life?" Hemlock leaders quickly assured the gathering that the act had to be a little restrictive initially to "get a foot in the door." Just like California's Natural Death Act of 10 years ago, it will even-

tually be broadened to eliminate non-terminal patients and allow suicide in your own home. Launching the aid-in-dying act in California is itself a foot in the door, for AAHS is also seeking a congressional resolution to urge states to enact similar models nationwide.

### Genocide gets a legal assist

Proponents of this act were quick to point out to the legal community that Appeals Judge Lynn Compton ruled in 1986 that the right to die "should . . . include the ability to enlist

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assistance from others, including the medical profession, in making death as painless and quick as possible."

After intense debate, delegates to the September California State Bar convention narrowly supported AAHS's act, but amended it so that voluntary execution could not occur before 10 days' notice of the patient's intent had been delivered to his closest relative and the "terminal" diagnosis. These "assurances" that patients act on their own free will are not in the referendum.

Supporters of the act were the Beverly Hills Bar Association's Barry E. Shanley of Potter, Shanley and Shanley and Jerome B. Falk Jr. of Howard, Rice, Nemerovski, Canady, Robertson and Falk. Falk said physicians already help middle- and upper-class patients *sub rosa* and such underground activity was anathema to those who value the rule of law. So Falk wants to change the law.

The proposal received stinging denunciations from the state's largest lawyers' club, the 19,000-member Los Angeles County Bar Association and the Asian Bar Association of the Greater Bay Area. The Inyo-Mono Counties Bar Association argued that it "would raise suicide, and even murder, to a 'dignified' position in our culture. This proposal makes a frightening attack upon a number of the philosophical principles which have been the bedrock of our society, including: Human life is sacred . . . and mercy-killing is anathema to acceptable social order."

AAHS's proposal, they said, was a short step to a "Brave

*New World* or societies of 1984 or *Winterflight*, in which the 'State' makes the decision as to who is allowed to live, and who compelled to die before his/her time." Soon relatives will be "attempting to enjoy a 'termination' decision or even to compel one when proponents finally feel the time is judicially ripe." They ask, can someone terminally ill actually and rationally make this decision? Are physicians equipped to handle it? The proposal, they conclude is "far too fraught with potential for fraud, abuse, and crime to merit balancing it against our culture's long-held tenet of the foundational sanctity of human life."

The California Medical Association (CMA) joined in a vociferous condemnation of the lethal injection plan and thwarted any likelihood of its success in California's legislature during this election year. But CMA's president-elect, Dr. Laurens White, planted his opposition on somewhat dubious moral grounds, saying some people who have watched the painful, prolonged deaths of relatives "have assumed that doctors aren't letting people die, that we need doctors to kill people. Anybody who wants to kill himself has a zillion ways to do it and doesn't need the assistance of the doctor."

The California delegation to the American Medical Association's Interim Meeting of its House of Delegates in Atlanta, Georgia on Dec. 6-9, took a more positive note. They offered a resolution affirming the role of the physician as healer, dedicated to the preservation and enhancement of life. The meeting's 400 delegates unanimously passed a resolution asking the AMA to oppose any federal or state legislation that would require any kind of direct or indirect participation in a patient's suicide.

### Euthanasia for AIDS victims?

No doubt, the spread of the fatal disease AIDS has put wind in the sails of the euthanasia lobby.

One cannot help but draw the contrast between this signally evil referendum, and the ballot initiative for a full-scale War on AIDS which has been placed on the June 1988 California ballot by the Prevent AIDS Now In California (PAN-IC) organization, led by associates of presidential candidate Lyndon H. LaRouche, Jr. The PANIC initiative calls for legally defining AIDS as a communicable and infectious disease and applying to it existing public health statutes and codes for communicable diseases. It further demands a crash research effort at the frontiers of science, particularly in the domain called "optical biophysics," to find a cure for AIDS, while AIDS sufferers are given state-of-the-art medical care, and public health measures are deployed to stop the spread of this killer disease.

The wish to avoid the staggering costs of caring for AIDS victims, let alone the costs of research to actually find a cure, have led today's Nazis to seek a solution of the same kind as Hitler's economic backers did—euthanasia. There is no moral alternative to fostering an economic recovery that will make it possible to pay these costs. In California, the political choice has become very stark.