

Assisted Dying in the United States

Thaddeus Mason Pope, JD, PhD, HEC-C Death with Dignity Canada January 27, 2022





Contrast Canadian & U.S. MAID

Roadmap

5 6

When

Where

9

Who

10

How

Next





Carter v. Canada Feb. 6, 2015 Bill C-14 June 17, 2016

15

16





17 18

>20 years

No U.S. "Carter"

U.S. has "Rodriguez"





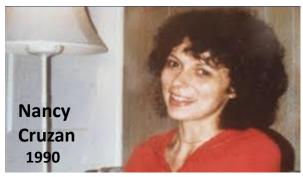




Right to MAID under the U.S. constitution



27



Right to refuse treatment - even life-sustaining

29 30

Equal protection

Persons similarly situated should be treated alike

32

34

31

Terminally ill patients on MV may withdraw MV



33

Terminally ill **not** on MV should also have right to hasten death

>15
appellate judges
agreed





35 36







Litigation seeking right to MAID in **state** constitutions

39 40

State constitutions broader stronger individual rights



41 42

No success

Trial court win Appellate loss

43

44





45



Baxter wins MT DCT

Not reached MT SCT

Appenate it

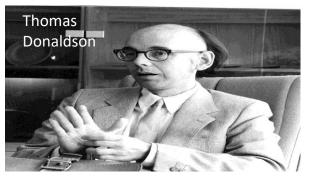
47 48

8

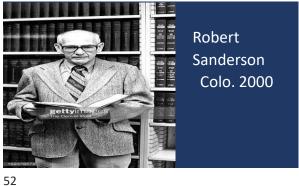
Trial court loss

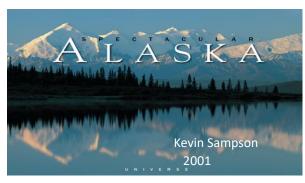
Appellate loss





















State constitutional right **YES 15**

Active case

59 60





Roger Kligler

62



No right to MAID in federal or state constitutions

64



Change state law

65 66

Why is that necessary?

Across USA, since 1800s, helping someone commit suicide is a **crime**

67

68



"assisted suicide prohibitions are deeply rooted in our nation's legal history"

"Assisting suicide ...

aiding another in the
taking of his own life ...
fourth degree felony."

MSA § 30-2-4

69

70





71 72

"consent of the victim ... is a defense"

Everywhere else

73

Must exclude MAID from AS



75

State statute

ways to enact

77

78

Ballot initiatives

Legislation

79

Ballot initiatives

80



1988 California 1991 Washington 1992 California 1994 Michigan

82



problem







Limited to patient administered (self ingestion)



89 90





92



93







95 96

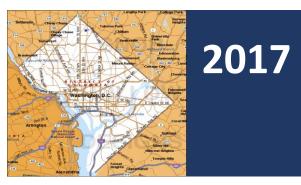
















103





Enacted 3 initiatives 7 bills + Montana



107 108





111

1994

22 years before C-14

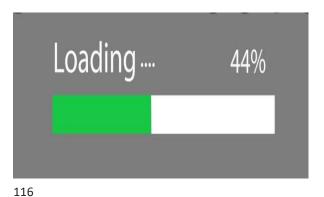
112

BUT

State by state

113 114

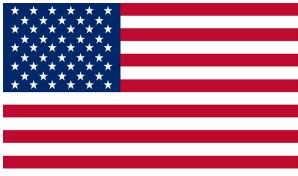














MAID criminally illegal in 45/56 U.S. jurisdictions

122



population

124





125 126

74,000,000

74m 330m

127

128

"1 in 5 Americans"

ongoing

129

130

>½ other states consider bills every year

2022

131

Connecticut Delaware Massachusetts Minnesota **New York**



134

More states

More accessible

136

BUT

Lawsuits CA, NJ

137 138

133

135

Repeal bills NJ, MT, DC

unsuccessful

140

139





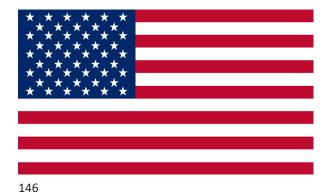
141 142





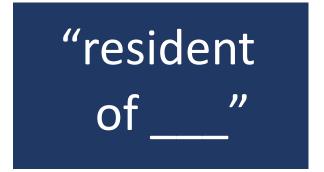
143 144

eligible for publicly funded health care services



145

MAID law at state level → residency at state level



148

147



Confirmed
by attending
physician

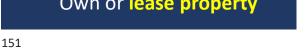
149 150

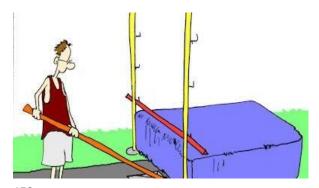
Driver license

Voter registration

Tax return

Own or lease property





152









156 155

WA patients unwilling or unable to become **OR** residents

157

UNITED STATES DISTRICT COURT DISTRICT OF OREGON

PORTLAND DIVISION

NICHOLAS GIDEONSE, M.D.,

Plaintiff.

Case No. 3:21-cv-1568

KATE BROWN, in her official capacity as

COMPLAINT FOR DECLARATORY AND INJUNCTIVE RELIEF

Oregon may not limit MAID to Oregonians

159



160

"citizens of each state shall be entitled to all privileges ... of citizens in [other] states."

161 162 If plaintiffs win lawsuit





168





165 166



Adult
Capacity
Informed consent

167

grievous & irremediable medical condition

2016 - 2021
natural death be
reasonably foreseeable

170

169

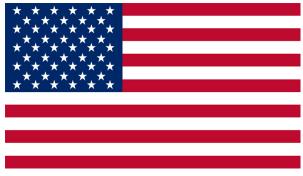
Not a strict temporal measure

Predictable **trajectory** toward death

171 172

March 2021

RFND eliminated altogether



173 174

Strict temporal measure

Patient must be terminally ill

175

"incurable and irreversible disease that ... will ... result in death within six months"

6 months

177

178

176



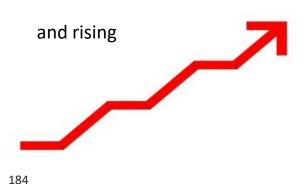


179 180

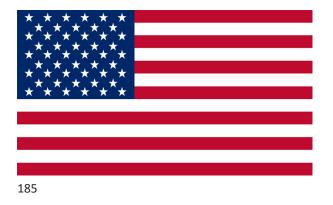




2.5%



183



Varies state to state



0.1%

2500% less

189



190

192

188



Clinician administered Patient administered

191





Only & always

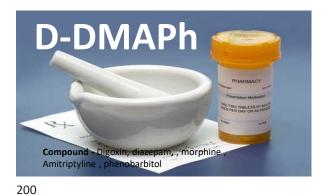
patient administered



Ask & receive prescription drug

198

Self-administer to hasten death



199





201 202





203 204

Others may help prepare meds

May not help administer meds

205

206

Patient alone takes final overt act



207

200

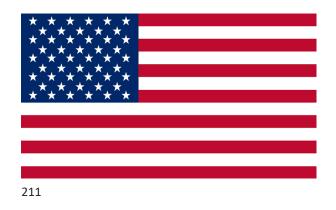
Clinician

administers

medication

Present 100%

209



Clinician prescribes medication

212

Patient administers medication

213

Present <50%

214

When Who Where How

Next

215 216

U.S. MAID is changing



217





219 22





221 222

MAID 1.0

2019 >

223

224



Access

226



Can patients get it?

227



MAID 2.0

230

- 1. Qualified clinicians
- 2. Waiting periods
- 3. Self administration

231

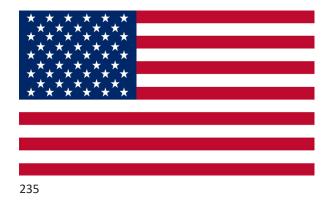
Qualified clinicians

232



Physician or NP

234



Traditional rule

236

Eligibility confirmed by both attending and consulting physician

Attending + consulting clinician

MD or DO

237 238

Waiting Room | A shortage of doctors could strain health-care services

Number of primary-care physicians per p



239 240



Waiting period



2016-2021 10-day wait period

244

242

Mar. 2021 → No wait period



246 245

Traditional rule

15 day wait period

248

247



Assure request enduring

250

BUT

Undue burden

252

251

During the process

Lost capacity 35%

Died 19%

To cite: Seller L, Bouthillier M-E, Fraser V J Med Ethics 2019:45:106—111

253

255

Response

254

256

Waive or shorten wait period

ENACTED
OR CA
NM

HI WA
NC PA
AZ VT

Medication administration



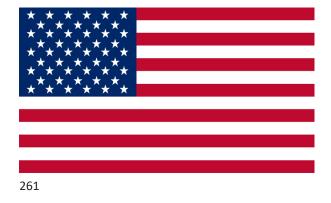
257 258

Clinician administered *Or*Patient administered

99.9%

clinician administered

259 260



Selfadministration

262

Patient alone takes final overt act



263 264





266



Early Stages of ALS ▶ Paralysis in most muscles ► Extremely limited mobility ➤ Muscle weakness ➤ Muscle twitching (fas ► Inability to speak ▶ Inability to breath without assistance of ALS ► Inability to eat without assistance ➤ Muscle cramping ▶ Inability to drink without assistance ► More severe muscle weakness ➤ Paralysis in some muscles Difficulty in swallowing Difficulty in eating/chewingBreathing issues ▶ Bouts of uncontrollable laughter or crying (pseudobulbar affect)

267 268



UNITED STATES DISTRICT COURT NORTHERN DISTRICT OF CALIFORNIA

LONNY SHAVELSON, M.D., et al., Plaintiffs, V.

CALIFORNIA DEPARTMENT OF HEALTH CARE SERVICES, et al.,

Defendants.

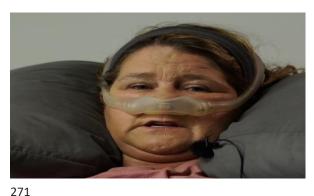
Case No. 21-cv-06654-VC

ORDER DENYING MOTION FOR PRELIMINARY INJUNCTION

Re: Dkt. No. 15

269

45



EOLOA violates **Americans** with Disabilities Act because it discriminates against those physically unable to administer

272



moves to expand access

273 274

> **Expand** qualified clinicians **Shorten** waiting period **Permit** assistance

Conclusion

275 276

January 27
2022

277

279



278

2022

Additional jurisdictions

NY MA MD DE

280

More accessible

Eligibility
Procedures

Thaddeus Mason Pope, JD, PhD, HEC-C

Mitchell Hamline School of Law 875 Summit Avenue

Saint Paul, Minnesota 55105

T 651-695-7661

C 310-270-3618

E Thaddeus.Pope@mitchellhamline.edu

W www.thaddeuspope.com

B medicalfutility.blogspot.com

281 282

References

Materials discussed in this presentation are available at

http://thaddeuspope.com

283 284

Neurologic Diseases and Medical Aid in Dying: Aid-in-Dying Laws Create an Underclass of Patients Based on Disability (with others).

THE RIGHT TO DIE: THE LAW OF END-OF-LIFE DECISIONMAKING (Wolters Kluwer Law & Business) (with Alan Meisel & Kathy L. Cerminara) (2022).

Medical Aid in Dying and Dementia Directives, 4(2) CANADIAN JOURNAL OF BIOETHICS 82-86 (2021).

Physician Assisted Dying. In: UpToDate, Post TW (Ed), UpToDate, Waltham, MA (2021) (with Tim Quill and Peggy Battin) (updated May 2021).

International Perspectives on Reforming End-of-Life Law, in INTERNATIONAL PERSPECTIVES ON END OF LIFE REFORM: POLITICS, PERSUASION, AND PERSISTENCE (Cambridge Univ Press 2021) (with others)

285 286

Medical Aid in Dying: Key Variations among U.S. State Laws, 14(1) JOURNAL OF HEALTH & LIFE SCIENCES LAW 25-59 (Oct. 2020).

Legal History of Medical Aid in Dying: Physician Assisted Death in U.S. Courts and Legislatures, 48(2) NEW MEXICO LAW REVIEW 267-301 (2018).

Medical Aid in Dying in Hawaii: Appropriate Safeguards or Unmanageable Obstacles? HEALTH AFFAIRS BLOG (August 2018) (with Mara Buchbinder).

Safeguards, in PHYSICIAN-ASSISTED DEATH: SCANNING THE LANDSCAPE 5-2 to 5-4 (National Academies of Science Engineering & Medicine 2018).

Medical Aid in Dying: When Legal Safeguards Become Burdensome Obstacles, ASCO POST (Dec. 25, 2017).

Oregon Shows that Assisted Suicide Can Work Sensibly and Fairly, 15(2) FINAL EXIT NETWORK NEWSLETTER 7 (May 2016).

Clinical Criteria for Physician Aid-in-Dying, 19(3) JOURNAL OF PALLIATIVE MEDICINE 259-262 (2016) (with David Orentlicher & Ben Rich).

The Changing Legal Climate for Physician Aid-in-Dying, 311(11) JAMA 1107-08 (2014) (with David Orentlicher and Ben A. Rich).

Oregon Shows that Assisted Suicide Can Work Sensibly and Fairly, NEW YORK TIMES - ROOM FOR DEBATE, Oct. 7, 2014.

Legal Briefing: Medical Futility and Assisted Suicide, 20(3) J. CLINICAL ETHICS 274-86 (2009).

Medical Futility Blog

Since 2007, I have been blogging, almost daily, to medicalfutility.blogspot.com. This blog focuses on reporting and discussing legislative, judicial, regulatory, medical, and other developments concerning end-of-life medical treatment conflicts. The blog has received over 4 million direct visits. Plus, it is redistributed through WestlawNext and other outlets.

289

Thaddeus Mason Pope, JD, PhD, HEC-C

Mitchell Hamline School of Law 875 Summit Avenue Saint Paul, Minnesota 55105

T 651-695-7661

C 310-270-3618

E Thaddeus.Pope@mitchellhamline.edu

W www.thaddeuspope.com

B medicalfutility.blogspot.com

291