

Lilian Topic
Secretary Legal & Social Issues Committee
Parliament House, Spring St., 3002

Halina Strnad

Re: Inquiry into End of Life Choices

Dear Secretary

My response to this inquiry is based on experiences and observations during my years of work as medical scientist in intensive care sections of a large public hospital. I have witnessed and participated in many attempts to prolong lives of patients too ill or injured to have a chance of survival. This was done to avoid a possible charge of neglect. And it was often done in spite of the clearly expressed wishes of the patients who wanted to die. Such cases were dealt with as those of attempted suicide i.e. by a referral to the psychiatrist.

We saw the improving efficacy of life sustaining means as a mixed blessing : offering better post-operative and injury recovery on the one hand, and prolonging the agony of dying on the other.

There were a few cases of terminal illness or injury where life support systems were not used. Severe pain and distress was treated by a drug inducing a semi coma. An increasing dosage was required to maintain this condition. It was, in fact, a slow, gradual poisoning reaching the lethal dose by small increments. We saw this method as futile, costly and short on compassion in patients who asked for help in dying.

Palliative care uses this method for patients who wish to prolong their life. This is their well recognised right. A small proportion of cases fail to obtain relief of pain and distress by those means. Their plea for assistance to die with dignity before the loss of control of bodily functions and when still able to farewell family and friends, requires legal approval.

Medical and scientific publications report legalised aid in dying in a growing number of countries. In Europe - Holland, Belgium, Switzerland, Luxembourg -; Canada and in USA a growing number of States. Variously known as voluntary euthanasia, doctor-assisted suicide or physician-assisted dying, they include a set of safeguards to prevent abuse of the system. Transparency of the process is maintained by the involvement of several medical specialists and in some places the coroner is notified of the impending act of assistance in dying.

Similar safeguards were implemented in our short-lived Act of The Rights of the Terminally Ill in the Northern Territory.

Opponents of such legislation fear that it will lead to involuntary euthanasia. Years of practice in countries abroad show it to be otherwise.

In our country there is an overwhelming support - 82% - 85% in favour of legalising voluntary aid in dying. I therefore believe that neither the courts nor the clergy should have a role in establishing this right to die. I see it as the government's role to meet an important need of its citizens.

I welcome this inquiry and hope that its recommendations will initiate a much needed legal reform.

Yours sincerely

A black rectangular box redacting the signature of Halina Strnad.

Halina Strnad

25.6.2015

Europa's surface and send the orbiting spacecraft through the resulting plume to collect a sample, similar to NASA's Deep Impact mission, which shot a projectile at a comet in 2005.

If we find evidence of past plume activity on Europa, that would be the perfect place to dive bomb, Hibbitts said, because it might increase our odds of hitting the subsurface ocean.

Rather than rely on a robot, some would like to get a bit of Europa back to Earth. Isik Kanik of NASA's Jet Propulsion Laboratory presented a modified version of his team's Life Investigation For Enceladus (LIFE) mission, originally designed to capture a sample from Saturn's geyser-erupting moon Enceladus and bring it home. He described a sample return mission as "the gift that keeps on giving", because the samples "can be analysed and reanalysed for generations to come".

There's just one problem: even a small sample would take a lot of additional fuel to climb out of Jupiter's colossal gravity. Small and dedicated might be the way to go. A proposal from David Mauro of NASA Ames called Europa Plume Chaser would send two small satellites to Jupiter, each carrying a camera and some miniaturised instruments. The first would scout for plumes, hopefully giving scientists enough information to direct the second probe through a plume. Tiny satellites have the potential to transform deep space science, and even *New Scientist* is getting in on the action with our TEENSY mission, a crowd-funded spacecraft for Europa exploration.

A mission to Europa has a lot of wing in its sails. But instruments will have to be selected soon to make the targeted launch date. As it may be decades before NASA sends another probe we should make an effort to find life now. "The clock is ticking," Grunsfeld said. "I just hope we don't miss this remarkable opportunity." ■

INSIGHT

AP PHOTO/COMPASSION & CHOICES



Brittany Maynard chose when to die

US states grapple with the right to die

THE fight to legalise doctor-assisted suicide for people who are terminally ill will take centre stage in the US this year, with bills filed in 20 states plus the District of Columbia.

"I think it's a watershed year," says Peg Sandeen, head of the non-profit Death with Dignity, based in Portland, Oregon, which campaigns for doctors to be able to prescribe lethal doses of barbiturates to terminally ill people. The practice is already legal or has been decriminalised in five states.

Sandeen says public opinion may have shifted significantly after Brittany Maynard, a 29-year-old with terminal brain cancer, moved to Oregon last year, where doctor-assisted suicide is legal. A video by Maynard in which she explained her reasons for choosing assisted suicide has been watched over 11 million times.

Maynard ended her life in November, but her story has given the existing death-with-dignity movement new momentum. Bills were recently filed in New York and California, two of the country's most politically influential states. Assisted suicide has just been legalised in Canada, after similar lawsuits there, although it will be a year before the law takes effect.

The outcome of the legal battles that are likely to ensue in the US are hard to predict. Assisted suicide faces

opposition from religious groups as well as disability activists, who say it implies that those who are disabled, old or ill have lives that aren't worth living – and that people could be pressured into it.

Diane Coleman, head of advocacy group Not Dead Yet, which opposes assisted suicide, says the Oregon Health Authority's annual reports on the practice show the law there isn't working as intended. She points to the motives people gave for choosing this

they feel they are a burden. "To me that feels more like a duty to die than a choice to die," she says.

What's more, according to the data available for Oregon, some people waited longer than six months between asking for the overdose and taking it. It isn't stated how many times this happened, but at least some people lived a few years after obtaining the drugs. Coleman is concerned that this means people are being accepted for assisted suicide who don't meet the criteria of having less than six months to live. "Those people were not actually terminally ill," she says.

Sandeen, however, says that while doctors sometimes underestimate how long people have to live, this is rare. She adds that the small number of people choosing assisted suicide – 105 in Oregon last year out of a population of around 4 million – is reassuring. "That should give other states solace that they will have the same experience – that it will be a rarely used option."

In the UK, the Supreme Court ruled last year that parliament should re-examine the issue as there is a "real prospect" of a future legal challenge succeeding. "There's an appetite for this now," says Jacky Davis chair of Healthcare Professionals for Assisted Dying. **Clare Wilson** ■

"A video in which Maynard explains why she chose assisted suicide has been watched 11 million times"

option. According to the latest figures, released on 12 February, only a third of people who took a prescribed lethal dose of medication in 2014 cited pain or fear of pain as one of the reasons for doing so.

Supporters of assisted suicide often cite pain as a primary reason why people should have the legal right to die. But the state's report showed that people's concerns tended toward loss of autonomy (91 per cent), loss of dignity (71 per cent) or being a burden on their family (40 per cent). Coleman is particularly concerned that people are choosing assisted suicide because