

Iowa Coalition for Ethical Care

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Members of the 2024 Iowa General Assembly:

The **Iowa Coalition for Ethical Care** is a statewide alliance dedicated to preventing the legalization of doctor-prescribed suicide. We are devoted to the mission of protecting people who are suffering or facing the end of life. We believe they would be mistreated and under increased risk of abuse from the legalization of doctor-prescribed suicide in Iowa. **Please do not sponsor or support a bill in Iowa, such as House File 533, to enable doctor-prescribed suicide.**

This bill is not about “choice.” Patients already have autonomy and choice when it comes to health care options. No one ever has to undergo unwanted treatment, and patients are allowed to accept a natural death without medical intervention. In addition, current medical practice is extremely effective in relieving pain. Advances in palliative care and collaboration among medical professionals continues.

Legalizing assisted suicide means that some people who say they want to die will receive suicide prevention, while others, including those with disabilities, will receive suicide assistance, which results in a two-tiered system that respects the life of some and promotes the death of others. California’s “End of Life Options Act,” is being challenged in court on this basis.

There are several reasons why it’s important to oppose assisted suicide laws.

- Assisted suicide gives insurance companies and governments the ability to save money by pushing lethal drugs that are less expensive than treatment. This has happened in Oregon and California where patients were refused coverage of life-saving treatment and offered lethal drugs instead.
- Data from Oregon show that only a tiny percentage of patients are referred for psychiatric evaluation before they are given prescriptions for assisted suicide.
- Inadequate pain control is not among the top-five reasons patients in Oregon and Washington request lethal drugs. In fact, uncontrolled pain or other systems does not appear to be a significant motivation for assisted suicide.
- A six-month prognosis for death is extremely difficult to predict accurately, with many patients living far beyond the six months if they are given the chance.
- Patients who are not dying may receive lethal drugs. The definition of terminal illness in House File 533 includes patients who refuse treatment and might otherwise live for many years. Diabetes has been listed as a reason someone received lethal drugs.
- A CDC report reveals that from 1999-2010, suicide among those aged 35-64 increased 49% in Oregon as compared to a 28% increase nationally.
- No trained medical personnel are required to be present at the time the lethal drugs are taken or at the time of death, creating the opportunity for an heir or abusive caregiver to coerce the patient to take the deadly drugs or put them in the patient’s food without the patient’s knowledge or consent.

Assisted suicide laws are neither good health care or good public policy. The oversight contained in proposed doctor-prescribed suicide legislation are inadequate to protect vulnerable individuals. The version of “autonomy” that advocates of assisted suicide propose makes the vulnerable more anonymous and subject to abuse, not less. There are no special safeguards in HF 533 for the elderly or for people with disabilities and, alarmingly, no witness is required when the patient takes the suicide drugs. The drugs can be prescribed by non-physician providers.

The bill also raises concerns about free speech and freedom of conscience among healthcare professionals. Clinicians are required to provide information on assisted suicide, and health care entities are required to post public notices if they decline to provide assisted suicide services.

Finally, House File 533 requires the falsification of death certificates by forbidding healthcare professionals from recording a death under this chapter as a clinician-prescribed and pharmacologically-induced suicide. This prohibition violates the scientific standard of truthfulness in documentation in order to promote an ideological preference that seeks to hide the actual cause of death.

Unfortunately, the demands of the financial bottom line, the burden of which almost always falls to the most vulnerable, has found some states with legal assisted suicide refuse to pay for some medical treatments while offering to pay for suicide. A prescription for a lethal dose of drugs can be far less expensive than life-saving treatments or efforts to ease pain and suffering. These financial interests can be very powerful when aligned against the vulnerable, especially if presented under the mantle of compassion.

Also, we can expect that legalizing assisted suicide will facilitate a shift in attitudes among physicians and other healthcare professionals, a shift that first views assisted suicide as a patient’s option and then gradually gets communicated as a professional’s recommendation. This shift will be especially encouraged when the care of patients is emotionally or financially costly, and when patients feel they are a burden to others. In short, this attitudinal shift shows how the passage of a law in the name of increasing patient choice can actually have the harmful effect of decreasing healthcare professionals’ respect for the life of every patient.

House File 533 has been introduced in Iowa to legalize doctor-prescribed suicide. As a legislator, your job is to weigh the potential benefits and risks of proposed policies. Preserving the dignity of the suffering and dying cannot be achieved by public policy that proposes dignity for suicide. Any assistance in suicide lessens respect for human life, which weakens our society's moral fabric. We are united in opposing any legislation or court action that permits doctors to participate in the suicide of a patient by prescribing a lethal dose of drugs.

The Iowa Coalition for Ethical Care is an informal group working to oppose the legalization of doctor-prescribed suicide. Signers of this letter include:

**Catholic Medical Association in Iowa • Dubuque County Right to Life • Iowa Right to Life
Iowa Catholic Conference • Lutheran Family Services • Lutherans for Life
Pulse Life Advocates • The Family Leader**

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