

The Maryland State Medical Society

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TO:	The Honorable Peter A. Hammen, Chair Members, House Health and Government Operations Committee The Honorable Ronald N. Young
FROM:	Gene M. Ransom, III, CEO
DATE:	February 19, 2016
RE:	Letter of Information – House Bill 404 – <i>Richard E. Israel and Roger "Pip" Moyer End-of-Life Option Act</i>

The Maryland State Medical Society (MedChi), which represents more than 7,600 Maryland physicians and their patients, submits this Letter of Information regarding House Bill 404.

The American Medical Association has adopted Ethics Opinion 2.211 which is set forth below, and MedChi has likewise adopted this policy:

Physician-assisted suicide occurs when a physician facilitates a patient's death by providing the necessary means and/or information to enable the patient to perform the life-ending act (e.g., the physician provides sleeping pills and information about the lethal dose, while aware that the patient may commit suicide).

It is understandable, though tragic, that some patients in extreme duress--such as those suffering from a terminal, painful, debilitating illness--may come to decide that death is preferable to life. However, allowing physicians to participate in assisted suicide would cause more harm than good. Physician-assisted suicide is fundamentally incompatible with the physician's role as healer, would be difficult or impossible to control, and would pose serious societal risks.

Instead of participating in assisted suicide, physicians must aggressively respond to the needs of patients at the end of life. Patients should not be abandoned once it is determined that cure is impossible. Multidisciplinary interventions should be sought including specialty consultation, hospice care, pastoral support, family counseling, and other modalities. Patients near the end of life must continue to receive emotional support, comfort care, adequate pain control, respect for patient autonomy, and good communication. (I, IV)

Thank you for the opportunity to share this information with the Committee.