



VESV REPORT

VOLUNTARY EUTHANASIA SOCIETY OF VICTORIA INC.

Reg. No. A0006974B

Member of the World Federation of Right to Die Societies

Number 121

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Patients' rights:

MEMBERS MAKE A DIFFERENCE

MEMBERS WHO wrote to us about the death of their relatives, often recounting very bad experiences resulting in unnecessary pain and suffering, have had an important effect on Victorian government policy.

We have learned that the Department of Human Services has undertaken an education program for hospitals and other institutions to provide information about patients' rights under the *Medical Treatment Act 1988*.

Doctors will be informed through their professional journals of their responsibilities, and a web page has been set up for them and for the general public.

Check the web page, www.dhs.vic.gov.au/mta, and if you have suggestions about the information, you can respond to Ellen Kittson, Manager, Biotechnology, Safety and Ethics via the site.

Members can also make a difference by visiting politicians. It is Labor Party Policy for the

newly elected Labor government to hold an all-party Committee of Inquiry into the workings of the *Medical Treatment Act*. By visiting your local State members of Parliament and telling them of your views, the new Labor government will be encouraged to hold this important Inquiry.

Members CAN make a difference!

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ANNUAL GENERAL MEETING

Sunday, 23 February, 2003 at 2.15 pm

Downtowner on Lygon, 66 Lygon Street, Carlton

CHAIRPERSON: Dr Rodney Syme, VESV President

GUEST SPEAKER: Dr Francis Macnab, Uniting Church Minister and VESV Member. In 1961 he established the Cairnmillar Institute which is now a world-recognised psychological, psychiatric and counselling centre.

President's Message - Time for action

2003 DAWNS in many ways as a year of great promise for VESV. We now have a stable Parliament, secure for four years, and therefore able to address contentious issues such as voluntary euthanasia without fearing electoral doom, particularly if approached in a bipartisan manner. We have new members of Parliament and new ministers, some of whom have favourable views on this issue – the others are there to be influenced.

VESV has always believed that persistent, rational argument will eventually persuade. We have worked with Government to produce change. Our counselling work with patients and relatives, and our lobbying of Government departments has produced two recent successes:

- *The Department of Human Services has embarked on a publicity campaign to make medical practitioners and the public more aware of the Medical Treatment Act, its application and its implications*
- *Through our support of an application to VCAT, a de facto judicial approval of the withdrawal of feeding tubes from incompetent patients has been achieved. This is important news for the relatives of many people being sustained in vegetative states by feeding tubes around Victoria.*

These are small victories but are based on arguments about autonomy, quality of life and the right to refuse treatment, even though that refusal will cause death, and the right to be maximally palliated while dying. We are not content with small victories, and will continue, with your help, to press the new Government to return to its policy of an all-party Parliamentary Committee of Inquiry into the Medical Treatment Act.

I ask every member who feels able to visit their members of Parliament (MLA and MLC) to contact our Office to obtain a copy of our submission regarding the Medical Treatment Act, which contains the information and arguments to use when persuading your MP. We aim to visit every MP during this important year at least once – please give us your assistance.

Rodney Syme

How people die remains in the memories of those who live on.

Dame Cicely Saunders – Founder of Palliative Care

Lisette Nigot's suicide creates adverse comment

LATE IN 2002, a 79-year-old Perth woman, Lisette Nigot, committed suicide. She was reported in the media to be 'well', or at least did not have intolerable and unrelievable suffering. Her suicide was a pre-emptive act to 'end it before it gets bad'. Her attitude reflects a philosophy that will resonate strongly with many people and many VESV members, but we must remember that VESV is a law reform society, not a philosophical society.

Philip Nitschke had counselled her, and released details about her death to the media, resulting in some hectic debate. Whatever one may think about her right to end her life in these circumstances, it is essentially peripheral to the debate about voluntary euthanasia, which is about assistance to people of any age who have

intolerable and unrelievable suffering and who rationally request assistance to end their lives. Parliamentarians will never be convinced that people like Lisette Nigot should be given legal assistance – nor can we argue for that.

Unfortunately, the Nigot affair attracted much adverse comment from media commentators, and led to Editorials in *The Age*, *The Herald-Sun*, and *The Sydney Morning Herald* opposing the legalisation of VE.

In many ways, this is a re-run of the 'peaceful pill' debate. Your Committee is clear that we must distance VESV from such arguments, which create confusion and do not persuade those people who matter in the debate. We must present a simple, clear and concise message to the public and to the Parliament.

The Melbourne Ambulance Service's policy on resuscitation

SOME PEOPLE near the end of their life because of a terminal or incurable illness, may not wish to be resuscitated if they should suddenly collapse or become unconscious. When this happens the ambulance service may become involved, and their protocols regarding withholding resuscitation are important.

VESV has contacted the Melbourne Ambulance Service to determine these protocols. Specific instructions to ambulance officers are in place, based on the *Medical Treatment Act*.

Ambulance officers will resuscitate any collapsed person unless:

1. The affected person is able to refuse such treatment and has completed a Refusal of Treatment Certificate, or
2. The agent who has the Medical Enduring Power of Attorney has completed a Refusal of Treatment Certificate for a current condition which is likely to have caused the collapse, or
3. A guardian appointed by the Victorian Civil and Administrative Tribunal has completed a Refusal of Treatment Certificate for a current condition which more than likely caused the collapse.

It follows that unless a Refusal of Treatment Certificate has been completed before the ambulance arrives, resuscitation will almost certainly occur despite the entreaties of those present. This is reasonable, since the ambulance crew has no knowledge of the individual and

their circumstances and insufficient knowledge to make medical decisions. They must err on the side of preserving life. Few if any people are likely to have a Refusal of Treatment Certificate at their fingertips in such circumstances.

Two things follow from this situation. If you do not want to be resuscitated, you must have a completed Refusal Treatment Certificate in preparation, or persuade those caring for you not to call the ambulance unless it is obvious that you are in severe pain or other distress.

The best approach is to call the local doctor for advice, making it clear that the person does not wish to be resuscitated. The doctor can then pass this advice on to the ambulance crew, who, being properly informed, can exercise discretion.

You can complete a Refusal of Treatment Certificate only for a current condition. Thus if you have no specific condition, you cannot refuse treatment. However, if you have heart disease or terminal cancer that might cause you to collapse, you can plan to refuse treatment in that event by implementing a Refusal of Treatment Certificate which is a formal document, within the *Medical Treatment Act*, that is completed by you or your agent after discussion with your doctor and witnessed by the doctor and another person.

Refusal of Treatment Certificates are available from the VESV Office.

Updating your advance directive

AN ADVANCE DIRECTIVE or living will, is a protection against unwanted life-prolonging treatment and should be updated every five years.

The passage of time and the change of circumstance may alter your views on acceptable treatment. It is vitally important that you advise your doctor of your current wishes and any new directive you may have completed.

VESV has produced a comprehensive Advance Directive and recognises the need to cover more

specific illnesses. We now have an Advance Directive for dementia, and are developing Advance Directives for motor neurone disease and nursing home situations. The more specific the Advance Directive the more valuable it is.

This is not to be confused with your Medical Enduring Power of Attorney which appoints your agent to ensure your Advance Directive is followed. If you have any queries please call Lindy at the VESV Office.

New Patron for VESV

JULIAN BURNSIDE QC has agreed to become a Patron for VESV. Whilst practising predominantly in all areas of commercial law Mr Burnside maintains a practice in other areas, particularly intellectual property and crime. He founded the Victorian Society for Computers and Law, and was its chairman from 1981 to 1987. He is a member of the Bar Council and the National Board of Musica Viva Australia. He has published numerous articles about computers and law, and is the author of a children's book.



New VESV Patron – Julian Burnside QC

AGM Voting and Committee nominations

SOCIETY MEMBERS are only entitled to vote at the AGM if their membership fees are up-to-date. Members unable to attend the AGM may appoint another member as their proxy. Proxy forms are available from the VESV Office.

Committee Nomination forms are also available from the Office. Any member wishing to nominate for the Committee is welcome to do so. Signed and seconded nomination forms must be returned to the Secretary seven days prior to the AGM.

Mornington Peninsula Group needs new Leader

UNFORTUNATELY THE Leader of our biggest region, the Mornington Peninsula, has had to resign for health reasons. As so many of our members reside on the Peninsula your Committee is particularly keen to see a new local representative appointed. Is there a member living in that area who is willing to take on this job? Perhaps there are two friends who would be prepared to act as joint Leaders. Being a Group Co-ordinator is not an onerous task but it is important in furthering the aims of the Society and giving members the opportunity to feel more a part of VESV. Full support is given from Head Office. If you are interested please give Lindy a ring on 9521 3297.

John Millard - Country Group Co-Ordinator

How You Can Choose and Achieve a Dignified Death

INFORMATION SESSIONS on *How You Can Choose and Achieve a Dignified Death* will again be conducted in 2003. If you would like to attend one please contact Lindy for details as to time and place, and to book. The fee for these sessions is \$20 per person or \$30 per couple.