

Memoire

To: The Select Committee on Dying with Dignity

From: Mr. R. Bickerdike

Date: March 21, 2011

Introduction / Executive Summary

As with many of the citizens who have expressed their opinions on the subject of euthanasia and assisted suicide to the Select Committee on Dying with Dignity, I have personal stories to tell.

The stories are that of my mother and another family member, who were obliged, because of the illegality of euthanasia, to die long, drawn out, deaths, that they declared they did not want. They were denied the right to choose what **they considered** their best option for death.

So, I will state at the outset of this memoire, that I am of the opinion that euthanasia should be legalized. In addition to our family's personal experiences with this issue, I will also present my case for legalizing euthanasia based on my interpretation of the Quebec Charter of Rights and Freedoms. In so doing, I will examine the historical reasons for which euthanasia is currently illegal in our society and demonstrate that the presence of laws prohibiting provision of the service of euthanasia contravenes the spirit of my rights as defined in the Quebec Charter of Rights and Freedoms. In investigating the reasons for which euthanasia is currently illegal, I will also present convincing evidence that demonstrates that **this situation is unlikely to change**, if the Select Committee bases its recommendations on the views of the moral majority (over 90% of the population). This will lead to maintaining the status quo (the illegality of euthanasia), in contradiction to the evolution of our societal values as defined in the Charter of Rights and Freedoms. As we learned from Socrates, the greatest danger to society and the individual, is the suspension of critical thought. I will show that statistically, in Quebec society today, at least 90% of the population are likely to be suspending critical thought on this issue. Rather, they are obliged, by virtue of their religious beliefs, to conscientiously object to the legalization of euthanasia. Their position on euthanasia is governed by the fifth of the ten commandments of the Bible - "you shall not kill", in which it is understood that God created life and only God has the right to take life away. For those who do not adhere to this religious view, and the Charter of Rights and Freedoms guarantees us freedom from these views, it is inconsistent to restrict our legal rights, based on this religious view.

The Committee's task is not any easy one. I understand that its members have been subjected to the tremendous pressure that the moral majority have brought to bear in their desire to continue to shape our society in ways that are consistent with their values, which are in turn based on their religious beliefs. Indeed, no doubt many members of the Committee are drawn from the moral majority. It will be hard for them to abstract themselves from their beliefs in the interest of serving the secular society that we purport to be. But, indeed, if they will be true to their mandate, they must find the strength of character to do so. I wish the Committee all the courage it will need to recognize that maintaining the status quo (the criminalization of euthanasia and assisted suicide), is synonymous with accepting the religious views of the moral majority, and in so doing, denying the minority their rights as enshrined in the Charter of Rights and Freedoms (specifically the right to the freedom of conscience and of religion guaranteed in Article 3 of the Charter).

The Select Committee it seems, has foreseen the potential impact that the opinion of the moral majority would have on its work. In question 11 of the Commission's questionnaire, you ask "In your opinion, should lawmakers take society's views into account when considering the legalization of euthanasia?". The Committee knew very well in advance what the majority opinion would be. Have courage, just read, and consider with the greatest clarity, insight and sense of justice you can, Article 3 of the Charter of Rights and Freedoms – and free the people from the bonds imposed by the moral majority.

My family's personal experience

My mother was a healthy, physically active, engaged woman with exceptional intellectual gifts that she exercised on a daily basis. Apart from a few days in the hospital when I was born in the 1940's, she had never needed medical treatment of any kind, and in fact by the time she was in her 80's had never taken an anti-biotic or Aspirin. I never recall her even having had a common cold. Up until her early 80's, she walked several miles to the YMCA three days a week for exercise class and then walked home again (in the winter, as well). On trips to Europe she could outwalk me any day of the week, even in her late 70's.

In the course of our lives, we would have occasion to visit family members and friends who, being less fortunate from a health standpoint, had found themselves in a hospital for treatment. Each and every time we would walk through a hospital on our way to the ward to visit the person we had come to see, we would pass patients who were often in lamentable condition, many of whom were moaning, crying out for staff to help them, and who often appeared to be in mental and physical distress to varying degrees. And each and every time my mother would grab me by the arm, turn me to face her, and make me promise that I would never let her live under such circumstances. She was clear that from her standpoint, once her substantial physical and mental gifts deteriorated to the degree we saw manifested amongst many of the patients in the hospitals, that she would no longer want to live like that. In 1998, while in her early 80's, the day she had dreaded came to pass. I had not spoken to her for two or three days and when I called her house my father answered and told me that it was odd, but my mother had caught what appeared to be a cold, and had been in bed for three days and didn't seem to have the energy to get up. Given the unusual nature of the situation for her I went over to the house immediately, and indeed there she was in bed, communicating well, but with no energy to get up. She reported that in terms of symptoms she had a bit of a runny nose in the previous days, but just had no energy. We gave it one more day and then began to seek medical help. We went from doctor to doctor seeking a diagnosis and within one month not only had her energy level not improved (she was now sleeping 20 or so hours a day, and it was a struggle to keep her awake for the four waking hours), but her mental state was in decline, as well. As an example, all her life she was a voracious reader, researcher and debater of ideas (she was a teacher in high school), who scorned television as a passive activity that was deleterious to the mind. During the four waking hours mentioned above, she would now drag herself to the living room and sit in front of the television!! Not my mother's usual behaviour, to say the least. To make a long story short, she was ultimately diagnosed with a condition called Temporal Arteritis, although it is unlikely that this was in fact correct. She lived like this for two years, in and out of hospitals, tested to distraction, physically weak; she would fall periodically, be bruised and cut, and while she still recognized the immediate family, the deterioration in her state of health, physically and mentally was heartbreaking. I could not count the number of times in those two years that she reminded me of my "obligation" to help her end things, because she, in her own words "had had enough". For my part, I could not bear the thought of her dying and although initially I had cursed the universe for letting this happen to her and was heartbroken to see her condition every time I would be with her (mostly every day), I finally came to accept the "new her". And of course, it was against the

law to do anything that would allow her to fulfill her desire to “end things”. At that point, her only recourse was to starve herself to death and in her deteriorated mental state she never thought of it. Every day it was a struggle to find something that we could get her to eat. My father made meal after meal that went 90% in the garbage, but still with lots of encouragement she got enough nutrition to stay alive. None of us of course was about to suggest to her that she could simply refuse to eat – who could have the heart to do that? Finally, after two years of “living”, and I use the word advisedly, in that condition, she died in 2001. I requested an autopsy to at last determine what had caused her these two years of suffering but it was inconclusive.

So there you have her story. A woman who had determined what for her would constitute the “good life” and that included an ending that would be “the good death”. She had said it over and over again and had prepared a living will and mandate. Unfortunately, those documents don't allow for the “end of life” event that my mother wanted. She clearly wanted to be euthanized or at least to have assisted suicide made available, but these options are refused by our society, so she suffered the very fate she feared and made me promise to alleviate, for two years. Do I write this memoir to the commission now out of guilt, because I could not bring myself to break the law and respond to her wishes – who can say? Perhaps if I can tell her story and it will help someone else in the future have the option of choosing for themselves the death they want – then her suffering will not have been for nothing.

I come from a large extended family and in addition to my mother's case, I also had another family member who had had enough of this life, as his health declined in his 80's. By all accounts he remained lucid and grounded in his thoughts, but when his declining physical condition left him hospitalized and no longer able to walk (not a terminal disease), he saw his only way out as starvation. He actually had the courage to accomplish this, with the support of his spouse at his side. He chose the best available “good death”. I'm sure you see the point here - **he chose**. While my mother lacked the strength to choose, given her condition (she could only plead with us to help her end it), this gentleman did have the strength (physically and of character), to choose and to see his choice through to the end. What a wonderfully compassionate society we are to have allowed him the option of starving to death – by a long shot, we treat animals with much more compassion.

So, now, I would like to spend a little time examining just who we are, this compassionate society that in their wisdom would allow those strong enough, to starve themselves to death, rather than affording them the option of euthanasia or assisted suicide. Who are they, those who decided for my mother that she would not be entitled to her wish for assisted suicide? Who are they, indeed, those who would deny people who want it, the right to decide how and when they will die, and what are their motivations for this denial?

Historical Perspective on the illegality of euthanasia

I think it is an undisputed historical fact that the European settlement of our province (and country) was by Christian Europeans. The question of euthanasia by Christians is governed by the fifth of the ten commandments of the Bible - “you shall not kill”, in which it is understood that God created life and only God has the right to take life away. In Appendix 2, I provide the views of the Catholic Church on the subjects of suicide and euthanasia – in short, they are both prohibited by virtue of the fifth commandment.

It is clear that in the course of the evolution of European society over the past 2000 years, Christianity had enormous influence in the development of the laws that were enacted by nations / states. After all,

those enacting the laws, were overwhelmingly of the Christian faith. It should come then, as no surprise, that many of the Christian values, based on their beliefs, have found their way into the laws that governed the nations of our European ancestors, and were subsequently transplanted to the new world.

The extent to which this influence was present in Canadian society is starkly demonstrated by the fact that **attempted suicide, under the Criminal Code of Canada, was a criminal act until 1972**. In other words, if you attempted suicide and were unsuccessful, you could be prosecuted. Note well here, we are speaking about suicide – the taking of one's own life (not assisted suicide). As astounding as that is, the historical view that a person's life did not belong to them, but belonged to God and only God had the right to take it away, was codified in the Criminal Code of Canada, until 1972. Although we purport to have a separation of church and state, the values of Christianity on the subject of suicide were clearly instituted as law, and remained on the books until 1972 – incredible.

So, now that we have taken the step of decriminalizing attempted suicide, and in so doing, have at last affirmed that a person's life is their own. We have recognized, in a small, but important first step, the individual's right to self-determination when it comes to their own death. In other words, neither their life nor their death belongs to anyone else, unless you choose to see it as belonging to a God or someone else – a view that you are entitled to, if you like, by the religious freedoms we have under the Charter of Rights and Freedoms. But it is by no means a view that the moral majority can any longer impose on society at large. I would not minimize the importance of decriminalizing attempted suicide – it was an important first step in reclaiming the rights of citizens to not be governed by laws that were enacted at the pleasure of the moral majority, in service to their religious beliefs.

I say the decriminalizing of attempted suicide is an important first step, because of course we still have the criminalization of assisted suicide and euthanasia. So, while as a society, we will concede that a person's life and death belong to them, we will not make it easy for them to obtain the “death of their choice”. Once again, the Christians will not give up the position of power they have wielded for centuries, over the lives of the citizenry. They are the moral majority and they have used their influence to ensure that the laws of the land serve their religious beliefs, wherever they were able to do so. Now the next step in recognizing the individual's right to self-determination, and rejecting the undue residual influence of religious beliefs on our laws, is the decriminalization of euthanasia and assisted suicide. To fail to do so would once again affirm that we are not the free society we purport to be, but rather we are still the society that is beholden to the moral majority, and that we accept the imposition of their religious beliefs on the citizenry at large, by codifying their religious views in law. For the only rationale to maintain the criminalization of assisted suicide and euthanasia, is that we accept the view that our life and death do not belong to the individual, but rather to another (God or gods, the state, the king, or whatever).

On the submissions that are made to the Select Committee on Dying with Dignity

In following the proceedings that the Committee has published on its website, I see that very frequently, participants who object to euthanasia invoke the position stated in item 8.3 of the Committee's questionnaire:

“Human life is sacred and there is no justification for ending it intentionally”.

This, as I previously mentioned, is undoubtedly the most prevalent underlying motive for having made euthanasia and assisted suicide illegal, historically, in our society. I say underlying, because once the objective has been determined (to resist by any means possible the legalization of euthanasia), then of

course those with that objective can apply themselves to finding other reasons to support their objective. (such as: item 8.2 of the questionnaire: “Legislation is not necessary as only a tiny minority of the ill will request legalized assisted death”. Indeed, this is a rather transparant and blatant attempt by the moral majority to add a specious arguement to their arsenal, but instead, it demonstrates only their disregard for minority views and rights. Of course they know very well that “only a tiny majority will request legalized assisted death” – after all, they are well aware that over 90% of the population is prohibited from doing so by their religious beliefs – how disingenuous can a statement be??).

Let us consider this underlying statement that “Human life is sacred and there is no justification for ending it intentionally”. Parsing the statement, the key notion clearly hinges around the word “sacred”.

The Oxford dictionary defines sacred as: “connected with God or a god or dedicated to a religious purpose and so deserving veneration”

Let us now consider what percentage of the respondants to the Committee would be of the opinion “that human life is connected with God and therefore there is no justification for ending it intentionally.”

I have looked at the religious demographics in Quebec from the most recent study I could find which was made in 2001. Percentages may have changed a bit in the ensuing 10 years, but not enough to significantly affect my observations. At that time, respondents reported their religious affiliations as follows:

Catholic: 83%

other christian: 7%

other religions: 4%

no religious affiliation: 6%

As we can see, about 94 people out of 100 adhere to one religion or another. But, by far the greatest majority are Catholic (83 people out of 100). For the sake of transparancy, I myself was raised in the Catholic religion, but am no longer associated with any religion (I am in the 6% minority shown above as “no religious affiliation”). I should also state at this point, that I am in full support of each individual's right to religious freedom, and celebrate human diversity in all its manifestations. I seek never to impose my spiritual or temporal views on others, and seek to not have their views imposed on me. Acceptance (or at the least, tolerance) of the other – with this we can make much peace on earth.

Let us consider the opinions, that the Committee can expect to have heard, from the respondants who presented themselves before the Committee or who answered the Committee's questionnaire. Since, statistically, 83 people of every 100 who responded to the Committee, will have been Catholic, let us look at the directives they would have received from their religious leaders. Please note, that I am not trying to single out Catholics here, I am simply using this religion as an example of the influence that religious leaders can have on public policy debates – I chose Catholicism because it is overwhelmingly the majority religion in Quebec, and because I am familiar with its practices, having once been a member of that Church. By no means are my comments intended to be disrespectful of the religion, or intorlerant of their teachings – I firmly believe they are entitled to their views.

The Roman Catholic Church's historical position on the question of euthanasia has been clearly stated, as I mention in Appendix 2. As recently as 1995, the Vatican has reinforced its view and refined its directives to its followers on the subject. As it is incumbent on the Church's followers to be cognizant of this material, and act upon it, I am including this additional information here. It is contained in the *Evangelium Vitae*, the encyclical written by Pope John Paul II, which expresses the position of the Catholic Church, regarding the value and inviolability of human life. The Pope issued the encyclical on March 25, 1995.

In *Evangelium Vitae* § 65, concerning euthanasia, we find the following text:

“... in harmony with the Magisterium of my Predecessors and in communion with the Bishops of the Catholic Church, I confirm that *euthanasia is a grave violation of the law of God*, since it is the deliberate and morally unacceptable killing of a human person. This doctrine is based upon the natural law and upon the written word of God, is transmitted by the Church's Tradition and taught by the ordinary and universal Magisterium.”

And for greater clarity on the subject, in *Evangelium Vitae* 73, Pope John Paul II, says: “Abortion and euthanasia are thus crimes which no human law can claim to legitimize. There is no obligation in conscience to obey such laws; instead there is a grave and clear obligation to oppose them by conscientious objection.”

The message from the Pope to his congregation is clear: they are to recognize that “*euthanasia is a grave violation of the law of God*,” and “*that it is a crime which no human law can claim to legitimize*”, and perhaps most importantly that the congregation has “*a grave and clear obligation to oppose them (laws permitting euthanasia) by conscientious objection.*”

So, it is important to understand that, statistically, 83 out of every 100 respondents to the commission are directed, by their Pope, to object to the legalization of euthanasia. In addition, I would note that this moral majority is well organized – they attend church once a week where the clergy has the opportunity to reinforce the Pope's message and urge the congregation to take the action the Pope has directed. After reviewing a sampling of the respondent submissions on the Commission's web site, one would have to conclude that they have been singularly successful in having their collective voice heard.

Now the question we must ask ourselves, is the following: is it appropriate to determine public policy based on the specific opinion of a specific majority, when the specific opinion they are stating, is at the direction of their religious leader?

The answer to this question is clearly no, and the justification for this answer is found in the Quebec Charter of Rights and Freedoms.

As I previously mentioned, I am among the 6% of Quebec society with “no religious affiliation”. My rights, nonetheless, are guaranteed equally with my fellow citizens, who are believers, as follows:

I would cite Article 3 of the Quebec Charter of Rights and Freedoms:

Article 3: Every person is the possessor of the fundamental freedoms, including freedom of conscience, freedom of religion, freedom of opinion, freedom of expression, freedom of peaceful assembly and freedom of association.

It is inconsistent to provide a Charter of Rights and Freedoms enshrining a person's right to the fundamental freedoms of conscience and religion, and then allow a moral majority to dictate the provision of a service based on their religious beliefs, insofar as their objections of "conscience" are grounded in their obligations to adhere to, and advocate for, the teachings of their religious leaders. They are called upon by the Pope to actively advocate for the anti-euthanasia position; in his words ".....there is a grave and clear obligation to oppose them (laws permitting euthanasia) by conscientious objection."

Again, statistically, 83 of every 100 individuals in Quebec, have this obligation imposed on them by the Pope.

My "freedom of conscience" permits me to avail myself of a euthanasia service, if one was available. And as it happens, I am in favour of having euthanasia as one option, should I ultimately decide it is appropriate for me. However, currently I do not have this option, because a moral majority has succeeded in imposing on society their religious views to the extent that laws exist prohibiting me from obtaining euthanasia services. How can the state, in the light of the wording of the Charter of Rights and Freedoms, allow a moral majority to pressure them into imposing, by legislation, their religious views on me? I am now, quite simply, being deprived of my basic rights under the Charter.

The Select Committee it seems, has foreseen the potential impact that the opinion of the moral majority would have on its work. In question 11 of the Commission's questionnaire, you ask "In your opinion, should lawmakers take society's views into account when considering the legalization of euthanasia?". My answer to this question would be: Consider the opinions of those who have a wish to determine and control when they will die. For those who do not wish to use the service of euthanasia for religious or other reasons, their opinions should not affect the provision of services to those who request it. If they have no wish to use euthanasia services but seek to stop others from using them, then they are simply trying to impose their religious based beliefs on others. They are therefore impinging on the freedom of conscience of others; a freedom guaranteed by the Charter of Rights and Freedoms.

We understand how this came to pass, historically. The Church held substantial sway over matters of state for centuries during the formation of the new and old world societies. Now, however, we have the Charter of Rights and Freedoms, passed originally by the National Assembly in 1975. Most certainly a landmark event in the continuing evolution of our society. Thirty five years after the passage of the Charter, it is now time to remove any vestiges of undue influence by the moral majority that remain in force and which are inconsistent with rights and freedoms defined in the Charter. I certainly consider any legislation prohibiting the provision of euthanasia or assisted suicide services as prime examples of such undue influence that must be removed.

In conclusion, I would ask the Quebec government to modify legislation, as required, in order to grant me, and anyone else who so desires, availability to the service of euthanasia, and to no longer allow public policy, on this issue, to be determined by the moral majority. To permit public policy on such an issue to be determined by religious leaders, acting through their constituents, tarnishes our Charter of Rights and Freedoms – they become the rights and freedoms permitted by the moral majority, as directed by their religious leaders. We live in a society that is, in principle, based on a separation of church and state; the prohibition against euthanasia is one of the vestiges of a time when the church wielded significant influence on the state and it is long past due that this be rectified. Legalize euthanasia and send a clear message that we will no longer permit the imposition of the conscience, will and religious beliefs of the moral majority on the minority. This is not the way in which we run our society.

A last point with regard to the numerous so called “experts” who have prepared submissions to the Commission. I have read submissions by psychiatrists and palliative care workers, who were adamantly opposed to euthanasia. One must consider the motivations of such experts. Certainly the above mentioned ones could hardly be considered disinterested parties who are judging the question in an impartial way. If such experts can profit from the denial of euthanasia services to the general population, then their opinions should be weighed with that in mind.

Lastly, as to the circumstances under which euthanasia services should be provided, I have included my thoughts in Appendix 1.

I thank the Commission for accepting and considering my submission,

R. Bickerdike

Appendix 1

Circumstances under which euthanasia services and/or assisted suicide should be provided:

(Note I would recommend the law allow for the provision of both services, to be used at the discretion of the person who requests the service. There are those who will not be physically able to use the assisted suicide option and so euthanasia services should be made available to them. On the other hand, for those who are capable of the physical act implied by assisted suicide, for a variety of personal reasons they may prefer this option, so it too should be made available.)

To consider this question, I begin by considering the circumstances cited in the Commission questionnaire, which I will repeat below for the sake of completeness:

- People with an incurable illness who suffer from unbearable psychological and physical pain
- People in the final stages of a terminal illness who know they will experience intolerable pain
- People whose death is imminent and inevitable. Though their physical pain is treatable, they no longer wish to live
- People with a degenerative and incapacitating illness
- People who are severely handicapped following an accident

From these circumstances, we should eliminate all references to pain, whether psychological or physical. The provision of euthanasia should never be predicated on a pain scale. Pain is often a subjective thing, and if these words are used, those opposed to euthanasia will inevitably use them to deny the service of euthanasia, and even those inclined to provide the service will hesitate and delay until the status of the patient, with respect to these words, can be somehow quantified. When a person simply decides for themselves that they are no longer interested in living with their declining health condition, we should allow them to choose when to die and assist them in the most humane and supportive way possible.

So, I would modify the above items to read:

A request for euthanasia may be made, by any person of majority age,

- who has been diagnosed with an incurable illness.
- whose death is imminent and inevitable. (a definition of imminent is required – say within 5 or 10 years based on statistical information for the condition or disease in question)
- who have a degenerative and incapacitating illness.
- who are severely handicapped following an accident.
- who after the age of 80 feel they have experienced a decline in their quality of life that, from their standpoint, renders life no longer worth living. (this will no doubt be the most contentious suggestion, but I am trying to find a way to accommodate people I have met with sufficient general degradation of their health that they felt they had had enough of this life. They were lucid and thoughtful on the subject – but had simply had enough. Psychologists and psychiatrists would no doubt maintain that they were depressed, delusional, etc., and need to be saved through therapy, but that, of course, is the business they are in. As the saying goes, we can hardly blame a carpenter holding a hammer from seeing all problems as nails. However, we might find it prudent to ensure we don't hire a carpenter holding a hammer, when the service we require is a haircut, for example.)

In addition to the above, a person should have the right to prepare an Advance Directive (living will) in anticipation of incapacity, requesting that they be euthanized under the following circumstances:

- If a person is terminally ill and is unable to recognize people or communicate in any meaningful way
- If a person is not terminally ill, but is in a persistent vegetative state, meaning that the person has lost all upper brain function, leaving the person legally alive, but permanently unconscious no matter what treatment is applied.
- If a person is not terminally ill, but has brain damage that makes them unable to recognize people or communicate with them on any meaningful level (e.g. advanced dementia, Alzheimer's disease), although they may live for a long time like that.
- If a person is not terminally ill, but is in a coma (e.g. massive stroke), with a small likelihood of recovery and a larger likelihood of dying.

Appendix 2

The position of the Catholic Church on the subject of Euthanasia and Suicide, taken from the Catechism of the Catholic Church, as found on the Vatican website (http://www.vatican.va/archive/ENG0015/_P7Z.HTM), March 20, 2011

The subjects of suicide and euthanasia, are treated, in the Catechism of the Catholic Church, under the the fifth of the ten commandments (“You shall not kill”).

(For those not familiar with the Christian faiths, the ten commandments are recognized as a moral foundation in both Christianity and Judaism, and consist of a list of religious and moral imperatives that were given directly by God to mankind. The Bible describes their form as being spoken by God and subsequently as an inscription God wrote with his finger on two stone tablets, which God gave to Moses.)

The following has been taken textually from the Vatican website:

Article 5

THE FIFTH COMMANDMENT

You shall not kill.[54](#)

You have heard that it was said to the men of old, "You shall not kill: and whoever kills shall be liable to judgment." But I say to you that every one who is angry with his brother shall be liable to judgment.[55](#)

2258 "Human life is sacred because from its beginning it involves the creative action of God and it remains for ever in a special relationship with the Creator, who is its sole end. God alone is the Lord of life from its beginning until its end: no one can under any circumstance claim for himself the right directly to destroy an innocent human being."[56](#)

*2324 **Intentional euthanasia**, whatever its forms or motives, **is murder**. It is gravely contrary to the dignity of the human person and to the respect due to the living God, his Creator.*

*2325 **Suicide** is seriously contrary to justice, hope, and charity. It is **forbidden by the fifth commandment**.*

For greater clarity, the following articles of the Catechism are also found:

Euthanasia

2276 Those whose lives are diminished or weakened deserve special respect. Sick or handicapped persons should be helped to lead lives as normal as possible.

2277 Whatever its motives and means, direct euthanasia consists in putting an end to the lives of handicapped, sick, or dying persons.
It is morally unacceptable.

Thus an act or omission which, of itself or by intention, causes death in order to eliminate suffering

constitutes a murder gravely contrary to the dignity of the human person and to the respect due to the living God, his Creator.

The error of judgment into which one can fall in good faith does not change the nature of this murderous act, which must always be forbidden and excluded.

2278 Discontinuing medical procedures that are burdensome, dangerous, extraordinary, or disproportionate to the expected outcome can be legitimate; it is the refusal of "over-zealous" treatment.

Here one does not will to cause death; one's inability to impede it is merely accepted.

The decisions should be made by the patient if he is competent and able or, if not, by those legally entitled to act for the patient, whose reasonable will and legitimate interests must always be respected.

2279 Even if death is thought imminent, the ordinary care owed to a sick person cannot be legitimately interrupted.

The use of painkillers to alleviate the sufferings of the dying, even at the risk of shortening their days, can be morally in conformity with human dignity if death is not willed as either an end or a means, but only foreseen and tolerated as inevitable

Palliative care is a special form of disinterested charity.

As such it should be encouraged.

Suicide

2280 Everyone is responsible for his life before God who has given it to him.

It is God who remains the sovereign Master of life.

We are obliged to accept life gratefully and preserve it for his honor and the salvation of our souls.

We are stewards, not owners, of the life God has entrusted to us.

It is not ours to dispose of.

2281 Suicide contradicts the natural inclination of the human being to preserve and perpetuate his life.

It is gravely contrary to the just love of self.

It likewise offends love of neighbor because it unjustly breaks the ties of solidarity with family, nation, and other human societies to which we continue to have obligations.

Suicide is contrary to love for the living God.

2282 If suicide is committed with the intention of setting an example, especially to the young, it also takes on the gravity of scandal.

Voluntary co-operation in suicide is contrary to the moral law.

Grave psychological disturbances, anguish, or grave fear of hardship, suffering, or torture can diminish the responsibility of the one committing suicide.

2283 We should not despair of the eternal salvation of persons who have taken their own lives. By ways known to him alone, God can provide the opportunity for salutary repentance. the Church prays for persons who have taken their own lives.