

LifeFacts

Doctor-Prescribed Suicide

Doctor-prescribed suicide is a growing threat in Pennsylvania and dozens of other states.

A type of euthanasia, doctor-prescribed suicide involves a physician prescribing a lethal dose of drugs for a patient with the knowledge that the patient intends to use the drugs to commit suicide.

Oregon was the first state to legalize doctor-prescribed suicide in 1994. Advocates claim that assisted suicide laws help people who are in pain and dying; however, **the state of Oregon has not documented any cases of doctor-prescribed suicide to treat unbearable pain,** according to Oregon Right to Life.

National studies indicate that depression is the only factor that significantly predicts the

request for assisted suicide; but, assisted suicide laws do not require a psychological evaluation. In Oregon, only 3 percent of assisted suicide patients were referred for psychological evaluations.

Assisted suicide advocates such as Compassion and Choices are trying to push doctor-prescribed suicide legislation across the country.

The Pennsylvania Coalition to Stop Doctor-Prescribed Suicide works to protect vulnerable individuals from the threat of assisted suicide in the Keystone State. It is a broad-based network made up of disability rights activists, medical professionals, and other concerned groups.

To learn about the threat of assisted suicide in Pennsylvania, visit **NoAssistedSuicidePA.org**.

POINTS TO REMEMBER

Assisted suicide sends the message that some lives are not worth living.

Safeguards against coercion don't work.

A doctor's job is to heal and relieve pain, not kill the patient.

Depression, not physical pain, is the only factor that significantly predicts the request for death, according to national studies.

The Pennsylvania Coalition to Stop Doctor-Prescribed Suicide is a diverse group working to protect the vulnerable from assisted suicide.

Learn more at **NoAssistedSuicidePA.org**.

