

To: College of Physicians and Surgeons of Ontario (CPSO)
Email: feedback@cpsso.on.ca
From:
Pages: 5
Date: February 17, 2015
Re: Draft Policy Planning for & Providing Quality of End of Life Care

I am emailing my response to your draft policy regarding end of life care. I am totally against euthanasia or assisted suicide which is evil and a mortal sin. In case you are not aware, unrepented mortal sin will result in eternity in hell. God is very merciful, but if the person does not change & repent then Final Judgment will be very terrifying for the person or people who commit those sins.

Every human person is made in the Image of God from the moment of conception and no one has a right to kill another human being. It is evil to kill ourselves. I request the College of Physicians and Surgeons of Ontario do not go through with this unjust policy. Instead, please concentrate on good palliative care for end of life care.

I request that all doctors be allowed their conscientious rights and freedom of religious beliefs and not be forced either to perform euthanasia or assisted suicide or have to refer these patients to other doctors to do it because that is a violation of their conscientious rights and religious freedom of beliefs.

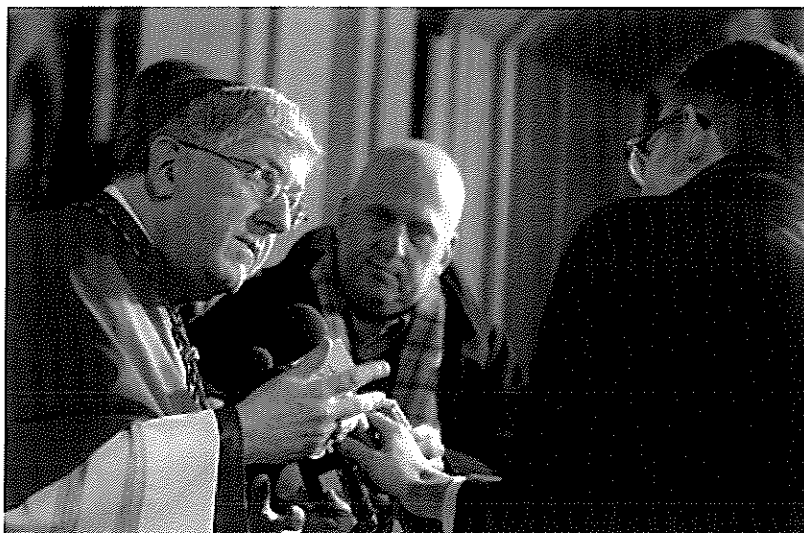
I request you please throw out this evil draft policy. Please also throw out the evil policy regarding Obligations and Human Rights which forces doctors to do abortions, prescribe abortifacets or refer patients to other doctors to kill their babies and gives the women breast cancer. I already responded to that draft earlier in a mailing I sent to your office.

I have enclosed Cardinal Collin's remarks and also the Catholic Civil Rights comments. Please take the time to read them.

If you keep killing the unborn, disabled, elderly etc. then there will be no need for doctors because their patients will be in the grave. Very sad day. Please protect your good Doctors from this evil.

Statement: Cardinal Thomas Collins on Supreme Court of Canada decision on assisted suicide

Friday, February 13, 2015



Cardinal Collins responded to the recent Supreme Court decision on assisted suicide earlier this week. The following statement will be available in parishes this weekend, either as a bulletin insert or at the back of the church.

February 10, 2015

"For my life is spent with sorrow, and my years with sighing; my strength fails because of my misery, and my bones waste away." Psalm 31

In our days, as in the days of the psalmist, so many years ago, people can suffer grievously during their journey through this "valley of tears," and may even be tempted to request assisted suicide. The Supreme Court has now allowed that, and at first glance, it may seem to be the compassionate thing to do.

There is certainly no need to take extreme measures to extend the length of life. When people are dying, we should surround them with love as they enter into their final experience on this earth, and relieve as best we can any suffering they endure. We need as a society to make effective palliative care more available. But there is a profound difference between compassionately journeying with someone who is dying, or who is suffering when not in danger of death, and killing that person, or helping that person to commit suicide. No one has a right to do that, and it is simply wrong for the state to allow or to encourage that.

Suicide is already a sadly common tragedy in our society, as persons facing what at the moment they feel to be intolerable suffering of some kind, decide to end their life. We all need to reach out compassionately to anyone contemplating suicide, and to offer whatever help we can to alleviate their pain, be it physical or psychological, so they can appreciate the value of their life, and know they are loved. But for anyone actually to assist them not to escape but to commit suicide is wrong. It is a perversion of the vocation of physicians to have them engaged in helping people to kill themselves. Physicians are called to be servants of healing, not agents of death.

Assisted suicide is the deceptively attractive face of euthanasia. The most compelling cases grip our attention and sway the debate, and so the Court opens the door to assisted suicide, all the while seeming to do less than it actually has done by surrounding its action with a set of limiting conditions, seeking to guarantee informed consent, as if that were the key issue. But the state is authorizing the killing of an innocent person, whatever controls are in place, and even those limitations can over time be swept away, leading to the more widespread practice of euthanasia. We have only to look at some European countries to see what lies ahead. We Canadians patriotically believe our country is special, but it is not so special as to be immune to the dynamics of increasing access to medical killing, as individualist rationales make persuasive the argument for that in more and more cases.

The court, recognizing that many physicians, faithful to their healing vocation, will not assist people to kill themselves, makes some very slight room for freedom of conscience. It trusts local Colleges of Physicians and other such groups to deal appropriately with the conscience issue.


This trust is misplaced. Currently the College of Physicians and Surgeons of Ontario is proposing a draft conscience policy which states that physicians who refuse to perform a procedure to which they morally object must arrange that the procedure gets done by someone else. In other words, they are compelled to become accomplices. I urge the College not to go through with this unjust policy, and I urge Ontarians, especially physicians, to speak up against it. First the politicians; now the physicians: the assault on freedom of conscience steadily advances in our country.

We all are on the way to death and should gain wisdom from contemplating that inescapable fact, so that we use each present moment to prepare for the moment of our death by living well. We should provide all who are suffering with the best medical assistance we can offer, especially in palliative care for those who are coming to the end of life. Most importantly, we should accompany each person with love, especially those without friends or family. But any society that authorizes killing people through assisted suicide and euthanasia has lost its moral compass.

The Catholic Civil Rights League (CCRL) decries the Supreme Court's 9-0 decision in Carter striking down Criminal Code provisions against physician assisted suicide – Canada enters a new era of “suicide relativism”.

by CCRL | Feb 6, 2015 | News | 0 comments



TORONTO, ON February 6 2015 – The Catholic Civil Rights League (CCRL) warns of the dangers of a new era of “suicide relativism” in Canada, following the Supreme Court's 9-0 decision in Carter  rike down the Criminal Code provisions against physician assisted suicide.

The Supreme Court's ruling now leaves legislatures and provincial health disciplinary mechanisms to sort out the messy business of competing conscience claims, let alone the parameters of “medical aid in dying”.

By this decision, the Court has re-asserted its claim to the title “Policy Maker of the Year”, as recognized by the MacDonald-Laurier Institute in December, 2014. The Supreme Court has moved our country from a position where suicide was opposed outright, to a jurisdiction where suicide is to be made available on request, subject to future unknown conditions.

The Court overruled its previous decision from 1993 in *Rodriguez*, in which the same provisions of the Criminal Code were upheld, by a 5-4 majority, asserting in today's ruling that the law and factual matrix have changed in the past 22 years.

The Court failed to mention that nine different motions or legislative attempts have been raised in Parliament in that timeframe, with six separate votes on the issue, all of which *rejected* efforts to change the law, recognizing the risks to the most highly vulnerable. In fact, in 2011 and in 2012 Parliament gave its near unanimous support for a national anti-suicide prevention policy. The Supreme Court has now undercut such legislative enactments.

Given that history, Parliament will need to give serious consideration to the Charter's notwithstanding clause, to allow further time for serious reflection on the merits of what has been introduced as a new regime in Canada. A one year suspension in an election year is unreasonable.

While the Court has suspended its decision for one year to allow legislatures and provincial health care professional Colleges time to consider legislative changes, that timeframe may be insufficient to allow all of the various public institutions to address the challenging demands involved.

The CCRL sought that clear language be provided by the Court to assert the primacy of conscientious rights of healthcare professionals. The Supreme Court stepped back from making any such pronouncement, preferring to allow a future “reconciliation” of competing rights claims.

Such concerns are not limited to healthcare professionals. Chaplains, lawyers, and other counsellors will be confronted with how to deal with requests for assistance on suicide in the months ahead.

The Court has struck down these provisions of the Criminal Code with severe limitations on any new provisions to re-criminalize particular forms of assisted suicide. The court has asserted that any future law must accept situations based on irremediable medical conditions and where there may be intolerable suffering. In its reasons, the Court stated, “We make no pronouncement on other situations where physician-assisted dying may be sought”. However, as has been seen in other jurisdictions, efforts to impose safeguards rarely limit the availability of assisted suicide. By its own language, the Supreme Court leaves open the likelihood of further challenges to any draft legislation.

For example, the Canadian Civil Liberties Association supported the decriminalization of these provisions primarily on the basis of personal autonomy – i.e. if a competent patient sought to be killed, the medical professional should assist, regardless of the underlying medical condition.

In the state of Washington, research has shown that the introduction of physician assisted suicide quickly is enlarged over time, such that individuals who may have years to live are encouraged to take their life prematurely. Assisted suicide regimes lead to abuse of the aged, especially from those who stand to inherit. Will the next push be to expand euthanasia to non-terminal individuals, or the allowance of individuals other than doctors to prescribe death drugs?

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The Court also awarded the BC Civil Liberties Association full indemnity costs, such that taxpayers are obliged to pay what will likely exceed \$1 million for this challenge at three court levels.

The focus of section 241 of the Criminal Code is on the person who assists in a suicide. The CCRL's intervention emphasised that most Canadian healthcare providers consider physician-assisted death immoral or unethical for reasons of science, conscience or religion. These healthcare providers may now be confronted by demands that they directly or indirectly participate in what they consider to be immoral actions.

Medical Colleges in Saskatchewan and Ontario are currently in the process of addressing such demands, including the contentious issue of mandatory referral by objecting physicians to another doctor, which the CCRL has asserted requires an objecting physician to participate in "wrong". Other provincial Colleges have already mandated such referrals, exposing doctors to professional disciplinary charges. Can migration from the profession in Canada be far behind?

At a minimum, the CCRL asserts the need for robust protection for the freedoms of everyone who declines or opposes physician-assisted death, or refuses to refer patients for such procedures, for reasons of conscience or religion.

About the CCRL

Catholic Civil Rights League (CCRL) (www.ccrl.ca) assists in creating conditions within which Catholic teachings can be better understood, cooperates with other organizations in defending civil rights in Canada, and opposes defamation and discrimination against Catholics on the basis of their beliefs. The CCRL was founded in 1985 as an independent lay organization with a large nationwide membership base. The CCRL is a Canadian non-profit organization entirely supported by the generosity of its members.

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