

President's Letter

Dear Members and Friends,

Now that the busy holiday season is over, it is time to get to work! New Hemlock chapters are forming throughout the state. Groups that have set dates for start-up meetings are listed under "Coming Events" in this Beacon. I do hope that you will make a point of attending a meeting in your area to give support and work with others to make your group a success.

These local chapters are being formed at your request. Responding to our questionnaires last year, many of you asked if there was a chapter in your area, so your Board of Directors has been working for you. The editor, Portia Westerfield, and I have rewritten A Guide to Chapter Formation to aid those of you who have taken the initiative to get a chapter started. The

original Guide was written by Derek Humphry's staff in 1988, so much of the content was out of date. We are very appreciative of his permission to redo the booklet to make it current and appropriate to Florida.

Portia and I have also worked on updating the Advance Directive packet. This packet is free to anyone requesting it. It is sent to any Florida resident who has requested information about the Hemlock Society of Florida (HSOF).

Many of you appear to be confused about membership. Hemlock Society of Florida is now an independent organization, NOT affiliated with any other organization at this time. Therefore, if you have membership with Compassion and Choices or Final Exit Network, that does not make you a member of the Hemlock Society of Florida. To join HSOF, simply fill out the application form on page 7

and mail it with your check. Since many of you wish to be members of a choice-in-dying group, the Board of Directors deliberately made the HSOF dues minimal so that you can belong to one or all of the groups. If you are in doubt about your membership in HSOF, please call me for verification.

Donna

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Hemlock Society of Florida, Inc.

Beacon Newsletter

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DEREK HUMPHRY COMING TO FLORIDA

Derek Humphry, the founder of the Hemlock Society, will have several speaking engagements in Florida the week of February 24, 2008. The tour is being co-sponsored by the Hemlock Foundation of Florida and Final Exit Network of Florida. You will receive a flyer in early February announcing the place, date and time of each talk. We anticipate that he will speak in Sarasota, Orlando and Boca Raton.

FILE OF LIFE

What is the File of Life? It is a card which contains your vital personal medical information and is kept on the outside of your refrigerator in a bright red magnetic pocket. It is readily available to EMTs (Emergency Medical Technicians) when they arrive on a 9-1-1 emergency call. The medical card lists your emergency medical contacts, health problems, medications taken, allergies, recent surgeries and more. The package includes a decal to place on the entry door to your residence to notify arriving EMTs.

The Board of Directors elected to provide the File of Life beginning in 2008. The Hemlock Society also suggests that a copy of your Advance Directive be included in this pocket along with a Do Not Resuscitate (DNR) Order if you have one. This packet helps the EMTs and the hospital emergency staff. You will have peace of mind knowing that others will readily have the information necessary to meet your emergency needs.

The File of Life packets will be available at Hemlock meetings and by mail upon request. At this time, the price is not known but an announcement will be included in the next issue of the Beacon.

MILESTONE IN OREGON

The Oregon Death with Dignity Act has been working for ten years. After Oregon voters passed the law twice, followed by several court challenges, it became effective on October 27, 1997. This law allows a physician to prescribe life-ending medication to a terminally ill, mentally competent patient who has requested it.

In the ten years the law has been in effect, less than 300 patients have used it. There are many safeguards and the law is definitely working. It was hoped that other states would follow in passing a similar law but, unfortunately, this has not happened. Several states have tried and failed by very narrow margins.

Around the World

AUSTRALIA –Study: A study published in the *Journal of Medical Ethics* found that one in three doctors in Australia have helped patients to die. The study questioned over 900 doctors and 53% said they wanted to see changes in the law legalizing euthanasia.

Peaceful Pill: In a recent article from the *Sunday Times* in Perth it was reported that seniors are meeting secretly to develop a “death pill”. They are hoping to make what they call the “peaceful pill” which can be kept on the shelf indefinitely. Should they become seriously ill and death is the preferred option, they will be able to take this pill.

The group is using information from the book *The Peaceful Pill* by Dr. Philip Nitschke. The book has been banned in Australia because it outlines how to manufacture barbiturates.

Australia has no laws permitting physician aid-in-dying, therefore anyone assisting in a death could face life in prison.

GERMANY – The German branch of Dignitas, a Swiss right-to-die organization, plans to carry out an assisted hastened death in Germany, to

set a precedent there. They want publicity about choice in dying because German law remains so unclear on this issue and needs to be forced into public discussion. Complications arise because of accusations against Dignitas that they are in this effort for money.

Choice in dying is a tinder-box because of the Nazis killing of unwanted or “defective” persons during World War II. Any German observed discussing this old issue is still instantly associated with that era, perhaps supportive, which is why there has been so little public conversation about helping the dying shorten their death process.

The idea that these modern patients WANT TO DIE, as opposed to the Nazi victims, who didn't, is still quite new and people will have trouble realizing it is patient choice not patient coercion.

INDIA – Here, euthanasia is illegal. One section of their penal code deals with attempting suicide, another addresses “abetment” or assisting suicide. “Both actions are punishable.” People who recently asked to be allowed

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to die, or taken off life-support, were peremptorily refused. Some medical authorities say the patient, being in pain, isn't qualified to make his own choices. Others say that since God gives life, man has no right to take it away. "Only those who are brain dead can be taken off life support, with family consent."

A Parliament member is introducing a Euthanasia (Permission and Regulation) Bill which would permit "compassionate, humane and painless termination of ...life ...for an individual who is a permanent invalid or bedridden because of a terminal disease." Reaction is intense. The new law could be abused, they say, or it directly contradicts right-to-life language in their constitution. Also, palliative care is improving, so "there's no need to take thisregressive step".

It seems here that the medical, political and religious authorities are as much, if not more, in control (and in denial) as western countries were decades ago with respect to choice in dying.

JAPAN – With suicides over 30,000 in 2006, Japan is beginning to face the issue in that country by asking employers to provide mental health services to their employees. Japan ranks ninth in suicides worldwide with Lithuania ranking first and the United States ranked at 43. Half the suicides in Japan were related to health problems while the remainder was due to money problems and household difficulties. The report also stated that 48% of the suicides were by the unemployed. In addition to mental health care the central government and local authorities are working together to tackle the unemployment problem. The goal is to cut the suicide rate by 20% in ten years.

NETHERLANDS – "Contrary to popular belief, assisted suicide is illegal in the Netherlands." WHAT? Yes, Gerard Schellekens, president of the SVL right-to-die group, was arrested in November for allegedly helping one of his members, age 80, end her life. Remember all the 2002 publicity about the Dutch legalizing assisted death? It was certainly true, but restrictions remain so numerous that assisted dying may seem illegal. A doctor must get a second medical opinion, a doctor must perform the procedure, doctors with conscientious objections can refuse to euthanize, each case must be reviewed by a regional committee (a doctor, a jurist and a medical ethicist) and the patient must be adjudged as incurable and experiencing unbearable suffering. Hospitals are just as inflexible—one of them having arranged Schellekens' arrest.

NEW ZEALAND – Lesley Martin, long-time right-to-die advocate, has founded the Dignity New Zealand Trust to provide "dignity havens" where people can be cared for in a supportive environment and learn about voluntary euthanasia. She said the havens would work with hospices, although she has had no formal dialogue with, nor any response from hospice. Ms. Martin said she respects those who disagree with her and does not intend to change their minds. She stated that she established the Trust so that her work would continue after her death. The Trust will have an infrastructure to follow through when legislation is finally passed for voluntary euthanasia.

SWITZERLAND – Ludwig Minelli, the 75-year-old attorney-founder of Dignitas, the Swiss right-to-die group, describes himself as

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being “in the suicide tourism business”. Seven hundred fifty-three foreigners have used the Dignitas apartment in Zurich in the last eight years to end their lives with overdoses of barbiturates. They pay \$6,500, and they range in age from 20 to 95.

In Switzerland, assisted suicide is legal, providing it’s done “for honorable reasons” and not for profit. Minelli calls his service an emergency exit out of a long dark tunnel which the patient doesn’t want to travel all the way to its natural end. However, his clients often “discover they have much more strength than they ever (realized)... and that roughly 70% of clients who get legal approval for hastened death never follow through.”

Editor’s Note: A client must be interviewed by Dignitas personnel before being helped. One cannot just “arrive on their doorstep” and expect to hasten their death.

UNITED STATES – Hospices: An interesting phenomenon is happening in this country involving hospices. It seems that hospice patients are living too long, or at least longer than actuarially projected. Now, the federal government is asking hospices to repay hundreds of millions of dollars to Medicare.

Charges are assessed retrospectively, so, in most cases, the money has been spent on medicine, salaries and supplies. For the past several years hospices have absorbed huge assessments by borrowing at high rates. Many hospices will likely close since the federal government is now requesting repayment.

Medicare benefits for hospice care are based on patients with six months or less to live. In the

past, most patients in hospice care were cancer patients who tended to die quickly once curative treatment was stopped. Now, many hospice patients tend to outlive the six-month prediction.

Some Medicare officials suggest that in some instances there has been a mismanagement of funds, but apparently this has not yet been investigated. Lawmakers have removed the limit on the number of days allowed for hospice care but have placed a cap on per-patient allowance which in 2007 was \$21,410. The problem seems greatest with for-profit hospices in Mississippi, Alabama and Oklahoma.

What appears to be happening now is that hospices delay admission of patients with illnesses that will result in longer stays. Some hospices are now aiming their services toward cancer patients whose stay is more predictable than patients with other diseases.

Kevorkian: Out of prison, Jack Kevorkian is speaking out in defense of having helped his patients to end their lives. He has promised the State of Michigan that he will no longer assist people to end life but he has remained an outspoken advocate for end-of-life patient autonomy. He is now taking his message to the public by speaking at universities. He recently spoke at the Wayne State University in Michigan, trying to justify a person’s right to self-deliver and to physician-assisted hastened death. He criticized the government for stifling the individual’s rights. Dr. Kevorkian is expected to speak at the University of Florida in Gainesville on January 15, 2008.

*Around the World information
from ERGO listserv*

HELPFUL WEBSITES

www.finalexit.org/ergo-store
to purchase ERGO books/DVDs/
downloads

www.finalexit.org

www.assistedsuicide.org

www.finalexitnetwork.org

www.worldtrtd.net

COMING EVENTS

GAINESVILLE

January 15– 8:00 p.m.

Dr. Jack Kevorkian
University of Florida

Program is free but on a first-come, first-served basis.

Doors open for non-students at 7:30 p.m.

JACKSONVILLE – Hemlock Meeting

January 19 – 10:30 a.m.
Willowbranch Library
2875 Park Street

Information & Directions: Call
Lamar Strother at 904-388-7860

ORLANDO – Hemlock Start-up Meeting

January 22 – NOON
First Unitarian Church of
Orlando
1901 East Robinson Street,
Orlando

Bring your lunch

Information and directions:
Call Kathy Anderson at
407-425-1065

IN MEMORIAM

Chadbourne Cutler

Patricia C. Hart

Dr. Virginia Meyer

Marcy Rudolph

John V. Wilson

DONORS

We would like to recognize individuals and organizations that have donated to the Hemlock Society of Florida and the Hemlock Foundation of Florida. Your financial support is critical to the operation of these organizations and is greatly appreciated.

REMINDER: If you want your donation to be deductible from your income tax, your check must be made payable to the Hemlock Foundation of Florida, Inc. Your dues and donations to the Hemlock Society of Florida, Inc. are not tax deductible.

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Community Contacts

If there is no contact listed for your area, please phone
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TAMPA BAY AREA

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RobRivas@aol.com

Hemlock Society of Florida, Inc.

MEMBERSHIP APPLICATION

Membership dues are **\$20 per person per year**

- New Member Name: _____
(Make check payable to Hemlock Society of Florida, Inc.)
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- Additional Donation Amount _____
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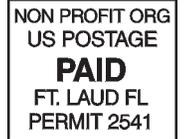
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ADDRESS SERVICE REQUESTED

Winter 2008

Mission Statement

Dedicated to improving the quality of dying through education and advocacy, thereby empowering all citizens to make and carry out their own end-of-life decisions. We affirm the individual's dignity and free will throughout life, including the freedom to hasten death under certain circumstances.

*Pass this newsletter on to your physician as well as interested friends who may want to join us.
If you would like additional copies please send request to
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*If you no longer wish to receive this newsletter,
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