VMS Policy
Physician-Assisted Suicide
Adopted by the VMS Council, 12/2/03

The Vermont Medical Society believes that any discussion of physician-assisted suicide must be pursued within a broad societal dialogue about the care of sick and dying patients. VMS does not support the passage of laws for or against physician-assisted suicide due to a concern that such laws could stifle this dialogue and hinder the provision of high quality end-of-life care.

Our present Vermont health care system provides good care to the great majority of dying patients. Our communities have active Hospice programs with ties to community hospitals that endorse and support the goals of Hospice. Many of our hospitals are developing palliative care services in an effort to better meet the needs of inpatients. Our physicians actively endorse comprehensive palliative care, which includes:

?? The use of state of the art pain and symptom control;
?? The provision of secure and supportive environments through Hospice; and
?? The freedom of the patient to choose or refuse all medical treatment.

Yet more needs to be done. Physicians and other health care practitioners must aggressively respond to the needs of patients at the end of life. Patients should not be abandoned once it is determined that cure is impossible. Multidisciplinary interventions should be sought including specialty consultation, hospice care, pastoral support, family counseling, and other modalities. Patients near the end of life must continue to receive emotional support, good communication, comfort care and adequate pain control. Their autonomy must be respected.

Even when physicians use all the tools at hand to care for pain and suffering, a small number of patients still suffer. Each of these patients is unique; each one of the patients will challenge the caregiver’s skills in the extreme; and each one’s care must be highly individualized and decided in private amongst the patient, physician and family. Medicines given to alleviate suffering in such circumstances may have the unintended consequence of hastening death. Laws against assisted suicide might have a chilling effect on the caregiver’s ability to provide appropriate medicines. Laws for assisted suicide might discourage efforts to provide good palliative care, could pose serious societal risks, and would be difficult to control.

The Vermont Medical Society believes there should be no laws concerning physician-assisted suicide and the Society in no way endorses euthanasia.

The Vermont Medical Society is actively engaged in promoting initiatives that assure all dying Vermonters receive good, comprehensive palliative care. These include ensuring that all members of the Society become educated in the goals and techniques of palliative care and that all members become adept at dealing with the dying patients' special needs. The Society believes that such care and training will provide a strong alternative for patients who ask for assisted suicide.

This policy shall supercede any contradictory earlier policy.