

NEWS

BMA meeting: BMA members reject neutral stance on assisted dying

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BMJ Careers

BMA members have rejected calls for the organisation to take a neutral stance on assisted dying after a tense debate at the union's annual representative meeting in Bournemouth on 27 June.

A motion stating that assisted dying is a matter for society and not for the medical profession and that the BMA should adopt a neutral position on any change in the law was rejected by a considerable proportion of delegates at the conference.

The BMA's 2010 guidance advises doctors to avoid all actions that might be interpreted as assisting, facilitating, or encouraging a suicide attempt, including advising patients on what constitutes a fatal dose of any drug and suggesting the option of suicide abroad.¹

In proposing the motion Raymond Tallis, emeritus professor of geriatric medicine at the University of Manchester and chair of Healthcare Professionals for Assisted Dying, argued that the BMA's continued opposition to assisted dying is at odds with the views of the public and many in the medical profession and relegates the job of helping the terminally ill to die to amateurs, a "morally repugnant" position.

Around 80% of the public support a change in the law allowing assisted dying, 2 3 although opinion among doctors is more divided. One poll found that around two thirds (65%) of doctors are against legalisation of euthanasia or physician assisted suicide, 4 whereas a more recent poll of 1000 GPs commissioned by Dignity in Dying found that almost two thirds (62%) support neutrality among medical organisations on assisted dying. 5

Tallis said that in opposing assisting dying "the BMA is riding roughshod over the majority of patients, expressing a paternalistic view that we thought we had put behind us."

Other speakers at the conference, however, argued that a doctor's primary responsibility is to alleviate patient suffering rather than suggest that patients end their lives and that it would be impossible to ensure sufficient safeguards to guarantee no patient was coerced into ending their life.

Ilora Finlay, a consultant in palliative medicine in Cardiff and crossbench member of the House of Lords, told the conference: "Neutrality does not bring balance to the debate. It will tell

parliament we see this as an acceptable option. The BMA would inadvertently signal that it has relaxed its paramount concern of public safety rather than insist that doctors should redouble their efforts to bring comfort to the sickest, the dying, and to never walk away."

Both the chairman of BMA council Hamish Meldrum and the chairman of the BMA's Medical Ethics Committee Tony Calland called on delegates to reject the motion. Meldrum stated that "the neutral position is the worst of all positions," effectively excluding doctors from the argument over an issue that will directly affect their working lives, and Calland warned that a neutral position would be equivalent to the BMA removing its objections to assisted dying and giving the "green light" to a change in the law.

Earlier this month Tallis and Healthcare Professionals for Assisted Dying joined the *BMJ* in calling on medical organisations such as the BMA and the royal colleges to stop opposing assisted dying for terminally ill, mentally competent adults ^{6 7}

Fiona Godlee, *BMJ* editor in chief, argued that "legalisation is a decision for society not doctors." "A change in the law, with all the necessary safeguards, is an almost inevitable consequence of the societal move towards greater individual autonomy and patient choice," she said.

- BMA Ethics. Responding to patient requests relating to assisted suicide: guidance for doctors in England, Wales and Northern Ireland. July 2010.
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- 4 Seale C. Legalisation of euthanasia or physician-assisted suicide: survey of doctors' attitudes. *Palliat Med* 2009;23:205-12.
- 5 Dignity in Dying. Doctors.net.uk survey of GPs' attitudes towards medical bodies' position on assisted dying. May 2012. www.hpad.org.uk/events/.
- 6 Tallis R. Our professional bodies should stop opposing assisted dying. BMJ 2012;344:e4115, doi:10.1136/bmj.e4115.
- 7 Godlee F. Assisted dving. *BMJ* 2012;344:e4075, doi:10.1136/bmi.e4075.

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