

VOLUNTARY EUTHANASIA BILL 2010

687. Hon MICHAEL MISCHIN to Hon Robin Chapple:

My question is directed to Hon Robin Chapple as the member in charge of the Voluntary Euthanasia Bill 2010 and it concerns the medical and nursing evidence upon which the bill is based.

- (1) Did the member obtain advice from any medical practitioners about the ability to accurately predict a patient's death within two years of examination; and, if so, what advice did he receive?
- (2) How many medical or nursing practitioners specialising in palliative care did the member consult; who were they; when were they consulted; and, to what extent did the information they provide inform the drafting of the bill?
- (3) How many medical practitioners did the member consult regarding the scheme in the bill and to what extent did they support it; and were they consulted before or after he decided to present the bill?
- (4) When did the member last visit and speak to the staff of a palliative care centre; and, which one?

Hon ROBIN CHAPPLE replied:

I thank the member for his question without notice of which some notice had been given.

- (1) I have been interested in law reform in this area for many years and have spoken to numerous medical practitioners about it in the course of developing and promoting my bills.

It has been made very clear to me that, in a great many cases, especially in the final stages of a terminal illness, it is possible to establish with great certainty that death will occur before the two-year time frame. In some cases, though, it will not be clear, and I want to be explicit that I acknowledge that. In those cases, if it is not clear to the assessing medical practitioner under the bill, the applicant will not be able to progress the application and will be ineligible under this bill.

- (2) I have not kept records of the exact number of palliative care doctors or nurse practitioners I have consulted with in the course of developing and promoting this bill, but I have been consulting since well before 2002. I have attended many events where end-of-life decision making and practice were central to proceedings. Recent examples are that, in 2010, I attended the Palliative Care WA state conference "At the Coalface" on 28 May and the Council on the Ageing's "Death: A Whole of Life Experience" on 17 August 2010. I have also had written communication with the Palliative Care WA executive committee, and I addressed that committee on Thursday, 19 August 2010.

- (3) I have the clear impression that some supportive doctors do not want to be publicly named, because of course the issue is contentious within their profession, and the area of life and death involves possible interaction with the justice system. But there are strong numbers of experienced and prominent doctors here and elsewhere in Australia who unambiguously support lawful, voluntary euthanasia, with all the appropriate safeguards of course. Victoria's well-known and respected Dr Rodney Syme is one, and South Australian palliative care expert, Dr Roger Hunt, is another.

However, I do not want to be accused of gilding the lily. Many doctors oppose voluntary euthanasia; the Australian Medical Association opposes the notion; and palliative care organisations at best are neutral in this area. But here is the key point—I will be brief because this bill will be debated very soon: the medical profession generally and even palliative care professionals have acknowledged that some pain cannot be relieved and some suffering cannot be alleviated, even with the best available palliative care. That is still true today, even with the advancements in palliative care.

- (4) Please refer to answer (2).