

The perils of assisted suicide



**ASSIGN
BUSTER**

The Perils of Assisted Suicide. Purpose: To make the audience aware of the dangers of Assisted Suicide. Thesis: Assisted Suicide is open to abuse and should not be legalized. Good evening to you all! I stand here before you to assert that Assisted Suicide is a very real danger, whose repercussions can affect any one of us here at any time. You or I could be the next person to walk across the street, meet with an accident, and become the latest ‘ paralyzed statistic,’ in need of assistance to die! This is an issue which urgently concerns us all! As a keen follower of the euthanasia debate, I have judiciously weighed the various facets of the issue, and have concluded that Assisted Suicide is dangerously open to abuse and must on no account be legalized. If Assisted Suicide is sanctioned by law, it could be abused by unscrupulous family members, the patient may not receive proper treatment for psychosocial factors, and economic needs may transcend humanitarian considerations. Let us examine each of these points. In most cases of Assisted Suicide, it is obviously the family members who will have the right ‘ to pull the plug.’ In the absence of legal safeguards, what protects the terminally ill or the disabled from unscrupulous family members who are in a hurry to come into their inheritance? Again, nobody can vouch for the integrity of the family’s motivation. Parents may not want the burden of a disabled child. Children may not want the burden of old or terminally ill parents. This family attitude of resenting the patient, as an emotional or financial burden, directly leads to my second point. The patient may be motivated to end his life, not by subjective views of personal well-being, but by guilt at being a financial burden to the family. The resentment of family members may become a form of emotional coercion which forces the patient to opt for Assisted Suicide. Secondly, medication induced depression can

make patients choose suicide. When such clinical depression is treated, the desire to commit suicide often disappears. Other psychosocial factors can also be present. For example, an AIDS victim may be motivated to die, more because he cannot cope with the social stigma associated with his condition than because he is in pain. The doctors will have no incentives to try new treatments. Overriding such emotional and social factors, practical financial considerations can also come into play. No one can deny that medical care of the terminally is expensive. Statistics show that one-third of Medicare's budget goes for costs incurred in the last one year of life, and 40% of that goes for expenses in the last one month of life. A physician may hasten Assisted Suicide to free the bed for the next patient. Assisted Suicide can become a cheap alternative in the case of poor people and those without health insurance. When Assisted Suicide is viewed from this angle, it cannot be denied that human life is being debated in terms of health care costs! It is evident that Assisted Suicide is dangerously open to abuse. If it is legalized, there will be no safeguards for the terminally ill or disabled from greedy or uncaring family members. The psychosocial motivations of the patient will not be closely examined and treated. Human Life will be reduced to the level of bread-and-butter economics. Let us join hands to raise awareness on this issue and prevent Assisted Suicide from becoming legal. Thank you.