

**RESOLUTION  
17-15**

**SUBJECT:                    Medical Aid in Dying**

**PRESENTED BY:            Robert Morrow, MD**

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WHEREAS, The New York State Academy of Family Physicians (NYSAFP) currently maintains a “neutral” position on state or federal legislation regarding aid in dying by means of a patient-directed, patient-administered prescription medication, and

WHEREAS, the New York State legislature has before it a bill that would authorize medical aid in dying, A.2383/S.3151, the Medical Aid in Dying Act, that would allow a terminally ill, mentally capable adult to ask for a prescription for medication that they can take to bring about a peaceful death at a time of their choosing—or never—should suffering become unbearable at the end of life, and likewise provide criminal and civil immunity for physicians who provide such prescriptions if they comply with the requirements of the law; and

WHEREAS, a position of “neutrality” can have negative consequences for patients and can be viewed as patient abandonment,<sup>i</sup> and

WHEREAS, a survey of New York residents showed 73.5% in agreement with the statement, “If I am terminally ill, the decision about whether or not I use medication to speed my death should be up to me and my family, under a doctor’s care,”<sup>ii</sup> and

WHEREAS, in Oregon, end-of-life care improved after implementation of its Death with Dignity law,<sup>iii</sup> and

WHEREAS, rates of assisted dying in Oregon showed no evidence of heightened risk for the elderly, women, the uninsured, the poor, the disabled or other vulnerable groups,<sup>iv</sup> and

WHEREAS, the mission of the NYSAFP is to “improve the health of patients, families and communities by serving members of the Academy through education and advocacy,”<sup>v</sup> and

WHEREAS, NYSAFP supports “physicians’ right to refuse to participate in any action against his or her personal code of ethics is essential,”<sup>vi</sup> THEREFORE, BE IT

RESOLVED, that the NYSAFP support pending legislation in the NYS Legislature to expand options at end-of-life to include medical aid-in-dying by means of a patient-directed, patient administered prescription medication, and be it further

RESOLVED, that the NYSAFP prepare educational materials for members regarding medical aid-in-dying, including data and findings from states where medical aid in dying is currently permitted, and inform its members of pending legislation pertaining to the issue.

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<sup>i</sup> Frye, J et al. A Call for a Patient-Centered Response to Legalized Assisted Dying. *Ann. Int. Med.*, 2016 Nov 15;165(10):733-734.

<sup>ii</sup> Eagle Point Strategies, 2015.

<sup>iii</sup> Wang, SJ, et al. Geographic Variation of Hospice Use Patterns at the End of Life. *J. Palliat. Med.* 2015 Sep;18(9): 771-80. doi: 10.1089/jpm.2014.0425. Epub 2015 Jul 14, *available at* <http://www.ncbi.nlm.nih.gov/pubmed/26172615>

<sup>iv</sup> Battin MP, van der Heide A, Ganzini L, *et al* Legal physician-assisted dying in Oregon and the Netherlands: evidence concerning the impact on patients in “vulnerable” groups. *J. Med. Ethics* 2007; 33:591-59.

<sup>v</sup> New York State Academy of Family Physicians Mission Statement, *available at*: [http://www.nysafp.org/NYSAFP/media/PDFs/1470750949\\_NYSAFP-Policy-Positions.pdf](http://www.nysafp.org/NYSAFP/media/PDFs/1470750949_NYSAFP-Policy-Positions.pdf), page 33.

<sup>vi</sup> *Id.* at 36.