



ASSISTED SUICIDE: FATALLY FLAWED

Questions Worth Answering

IF	THEN
If someone claims his life has lost value and isn't worth living anymore...	... then can <i>anyone's</i> life lose value simply by one's own choosing?
If someone says her dignity is diminished because she can no longer perform certain activities...	... then does everyone lose dignity when they lose the ability to perform those same activities?
If suicide is an irrational and tragic act...	... then why is physician-assisted suicide a healthy reaction to suffering?
If guardrails are touted by physician-assisted suicide advocates as guarantors of safety...	... then why do they consistently try to remove these guardrails?
If physician-assisted suicide is a reasonable approach to the fear of being a burden to our loved ones at the end of life...	... then is it reasonable for us to kill ourselves whenever we're a burden to our loved ones?
If healthcare organizations put profits over people with the opioid crisis ¹ , child transgender surgeries ² , and the smoking epidemic ³ then why should we trust them to put people over profits when it is exponentially cheaper to offer patients physician-assisted suicide than care for them?
If doctors make treatment recommendations based on their own judgements and biases...	... then couldn't they offer you poison if they think it's best for you?
If depression and anxiety make people prone to suicidal ideation and self-harm...	... then isn't depression a prime reason someone would choose physician-assisted suicide?
If depression is a common occurrence after receiving a terminal diagnosis...	... then shouldn't we put more emphasis on psychiatric treatment when patients receive a terminal diagnosis, instead of physician-assisted suicide?

IF	THEN
<p>If doctors occasionally misdiagnose life expectancy...</p>	<p>... then isn't it risky to rely primarily on life expectancy diagnoses to determine eligibility for physician-assisted suicide?</p>
<p>If the main reason for physician-assisted suicide legislation is to offer the terminally ill an escape from suffering...</p>	<p>... then why is unbearable suffering never a top reason provided by patients for choosing physician-assisted suicide?</p>
<p>If the main reason behind physician-assisted suicide is to relieve suffering...</p>	<p>... then what's the harm in legalizing euthanasia as well?</p>
<p>If death is generally seen as a bad thing, and if most patients' complaints at the end of life are related to poor pain management and care...</p>	<p>... then shouldn't we try to fix palliative and hospice care first before normalizing people killing themselves prematurely?</p>
<p>If helping someone commit suicide is widely seen as immoral and illegal...</p>	<p>... then why is it okay if it's done by a doctor?</p>
<p>If euthanasia is illegal due to concerns over coercion and patient consent...</p>	<p>... then why is physician-assisted suicide legal given the strong possibilities of coercion regarding patient consent?</p>
<p>If murder and euthanasia are both the intentional killing of another person...</p>	<p>... then how is euthanasia any different from murder?</p>

Notes

1. Haffajee, Rebecca L. and Mello, Michelle M. "Drug Companies' Liability for the Opioid Epidemic." *The New England Journal of Medicine*, U.S. National Library of Medicine, 14 Dec. 2017, <https://pmc.ncbi.nlm.nih.gov/articles/PMC7479783>
2. Smith, Wesley J. "The 'Gender-Industrial Complex' Makes Billions Annually." *National Review*, National Review, 28 Aug. 2024, <https://www.nationalreview.com/corner/the-gender-industrial-complex-makes-billions-annually>
3. Little, Becky. "When Cigarette Companies Used Doctors to Push Smoking." History, A&E Television Networks, <https://www.history.com/news/cigarette-ads-doctors-smoking-endorsement>