



**LEGISLATIVE ASSEMBLY**  
FOR THE AUSTRALIAN CAPITAL TERRITORY

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**SELECT COMMITTEE ON END OF LIFE CHOICES IN THE ACT**

Ms Bec Cody MLA (Chair), Mrs Vicki Dunne MLA (Deputy Chair), Ms Tara Cheyne MLA,  
Mrs Elizabeth Kikkert MLA, Ms Caroline Le Couteur MLA.

## Submission Cover Sheet

### End of Life Choices in the ACT

**Submission Number: 308**

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**From:** Rowan Shann  
**To:** [LA Committee - EOLC](#)  
**Subject:** Re: End of Life Choices in the ACT  
**Date:** Monday, 19 March 2018 5:33:05 PM

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The Secretary,  
Select Committee on End of Life Choices in the ACT

Sir,

I beg to make the following submission to the Select Committee:

1. Current practices utilised in the medical community to assist a person to exercise their preference in managing the end of their life, including palliative care:

There is excellent palliative care available, and as in so many branches of medicine, this is improving all the time. No one wants a seriously ill person to suffer, and nobody should. Many people can receive palliative care at home in the surroundings they know and love. My Mother died in a Nursing Home – she needed care 24 hours a day – and I have been grateful all my life for the excellent palliative care she received. The morphine which is generally used in palliative care can actually kill the patient, but it is not given for that purpose. It is given as a wonderful relief for pain. I have a good friend at present dying in hospital without pain or discomfort, his extensive cancers managed with a morphine drip. He will die when the moment arrives, and that is how he and his family wish it to be. Meanwhile, some of his large family are always with him.

The first words of the Hippocratic Oath are 'Do no harm'. If doctors are allowed to euthanase a patient it totally alters the doctor/patient relationship and destroys trust. There are too many tragic stories coming out of Belgium and Holland of pressure applied to elderly patients to ask for euthanasia, or relatives pressuring a doctor to euthanase a patient. I have heard of a nursing home in one of those countries where patients are given a form every evening. If they haven't signed that form by morning they are euthanased, and that's that. The cold callousness involved is unbelievable. This is a dark and dangerous road. It is never morally right to kill somebody, neither the unborn and very young nor the elderly and infirm.

3. Risks to individuals and the community associated with voluntary assisted dying, and whether and how these can be managed.

For generations people have been able to depend on the family doctor and even in these days with big clinics most people have their special doctor. The feeling that your doctor can turn into your executioner changes a relationship that people have always relied on. It is wrong to kill. It may at times appear convenient, but it is never morally right. Too many evils flow from it. It is morally highly dangerous for the doctor and it is of course fatal for the patient.

I do beg that the Committee will firmly reject this unsavoury and unwholesome idea.

Rowan Shann

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I am grateful for this opportunity to make a submission on this important subject.