



# World Right-To-Die Newsletter

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## Euthanasia decriminalized under tight rules

The Belgian law on euthanasia came into force on 23 September 2002. To avoid misunderstandings or misinterpretations (I have read everything and its contrary about this law since the last months), it seems important to stress its main elements:

The request of the patient is at the centre of the debate. Without this request, there is no question of euthanasia, defined as: the act, performed by a third person, in order to end the life of a person at the request of this person. Actually, it uses the same definition as the

Dutch law. This is not surprising since we made use of the Dutch experience as much as possible. Nevertheless, the Belgian legislation is not at all a copy of the Dutch one and takes account of our own specificities.

Belgium's Criminal Code remains unchanged but this specific law introduces the de-criminalization of euthanasia if the physician follows the pre-conditions foreseen by the law.



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To avoid prosecution, the physician—and he/she only—has to respond only to the voluntary, written, well thought-out and reiterated request by an adult patient who is in a serious and incurable medical condition, in a hopeless medical condition and experiences unbearable physical or mental suffering.

The physician must also inform the patient of the state of his/her health and of his/her life expectancy, of the possible therapeutic measures and the available palliative care.

The physician must also hold a consultation with a second physician.

If the death is not expected within a short period of time—in other words, for not terminally ill patients, the physician must request a consultation with a third physician, either a psychiatrist or a specialist of the patient's pathology. In that case, a delay of at least one month between the request and the euthanasia has to be observed.

### Watchdogs

Like the Netherlands, Belgium has a system of control. The physician has to declare the act of euthanasia to a Federal Commission composed of 8 physicians, 4 jurists and 4 persons from environments entrusted with the problems of patients suffering from an incurable disease. This Commission has a second mission: to establish every other year a statistical and evaluation report and to suggest recommendations.

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The living will called "anticipated declaration" is officially recognized but strictly limited to the state of irreversible unconsciousness of the person.

Freedom and self-autonomy are the cornerstones of this law. No physician is bound to perform euthanasia.

But a physician who, calling upon his right of freedom of conscience, refuses to perform euthanasia, must transfer the patient's medical record to a colleague of the patient's choosing.

The law refers explicitly to the concept of euthanasia without allusion to "assisted suicide". In Belgium, for cultural reasons, it is very difficult to speak about suicide because it invests incurable illness with a different meaning.

Thus the law does not specify the method to be used by the physician, even though he must describe it in the official form to be forwarded to the Control Commission. The future declarations may show us that if it is the wish of the patient, and if the physical condition of the patient allows this solution, a lethal oral ingestion may be chosen instead of an injection.

Another question raised frequently: can citizens of foreign countries come to Belgium for euthanasia? The pre-conditions and procedure of the law clearly establishes the principle of a strong doctor-patient relationship. Outside of this long-standing personal contact, it is not possible to consider a legal euthanasia.

We made a tremendous important step for the right to choose but we have to remain vigilant. Around the enforcement of the law, opponents have already let hear their voices, especially about the voluntary death of Mario Verstraete on 30 September of this year.

Mario, member of the board of the Dutch-speaking Association for the Right to Die in Dignity, was the only patient who was heard first-hand during the hearing in the Senate. He was suffering from Multiple Sclerosis. In full serenity, he spoke of his life and of his wish that his request to die in dignity be respected when he so decides.

And he made his decision after the vote of the law in May but had to wait until the enforcement. But because he made public statements, there were some criticisms, some of them very objectionable, to the effect that people like Mario who live until the last second in full respect of their convictions, should hide themselves and die in the shadows.

Good-bye, Mario! You were a fighter for this law of freedom and maybe the first to call upon it. I shall remember you as a real lover of life.

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Member of the Federal Commission of  
Control on Euthanasia.*

# Brussels conference also a celebration

Before going to Brussels, my Berlitz guidebook told me that the people of this city "resolved long ago to have a good time, come what may, and their stoic enjoyment of life is very contagious". And, with over a hundred different Belgian beers available, it was certainly a great place and occasion, last September, to celebrate the fact that Belgium had legalized (by a final vote of 86 to 51) physician-assisted dying in May 2002.

The 14th World Conference was a great success. Delegates came from twenty-one countries—so much information was exchanged, important contacts were initiated and also renewed, and much encouragement for the future was generated. The national slogan of Belgium is "L'union fait la force" (Unity is strength)—all of us who were in Brussels gained a great deal from our various personal associations and from the more formal sessions.

In the delegates' meetings, the activities and financial records of the past two years were reviewed, a new member society (Friends at the End—FATE—in Scotland) joined, the Executive Director's fund-raising efforts in the United States were welcomed (this central office is now self-financing), and a new Board—for the next two years—was elected.

The European member societies, in a separate meeting, agreed to streamline their organizational structure. They considered the consequences of "euthanasia tourism"—one major disadvantage being that the pressure on national governments to legalize in favour of physician-assisted dying is lessened if the possibility for euthanasia should exist in a neighbouring country.

And, this group approved a project (initially for two years, to be financed by the World Federation, the European Division, and some individual member societies) for a research assistant to keep a regular watch on what is happening in the Council of Europe, the European Commission and the European Parliament on right-to-die issues.

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### GRANT FOR PILOT PROGRAM

We are pleased to announce that the World Federation has received a grant of \$5,000 from the Walter & Elise Haas Fund of San Francisco. The money will be used to support a pilot educational outreach program aimed at increasing public awareness of the work of the Federation. We would like to express our sincere gratitude to the Haas Fund for this grant.

