



## NEWS RELEASE

June 28, 2011 – For immediate release

### Woman with ALS asks court for legal right to die with dignity

**Vancouver, BC:** Nearly two decades after Sue Rodriguez fought for the right to die with dignity, another British Columbia woman with ALS, also known as Lou Gehrig's disease, has come forward to ask the court for choice in dying. Today, Gloria Taylor filed an application with the BC Supreme Court asking to be added as a plaintiff in the BCCLA's death with dignity lawsuit. Gloria, 63, of Westbank, BC, is terminally ill with ALS, a fatal neurodegenerative disease with no known cure or effective treatment.

The lawsuit filed by the BCCLA in April 2011 challenges the laws that make it a criminal offense to assist seriously and incurably ill individuals to die with dignity. It seeks to allow mentally competent adults, who are suffering from serious, incurable illnesses, the right to receive medical assistance to hasten death under certain specific safeguards.

Gloria began to experience the early symptoms of ALS in 2003. A neurologist diagnosed her with the disease in 2009. Eighty percent of people with ALS die within two to five years of diagnosis. Since her diagnosis, Gloria's condition has steadily deteriorated.

Gloria Taylor: "I'm asking the mercy of the court to allow me the option to work with my doctor to ease my pain and help me end my life peacefully and with dignity. I should be able to make the choice about how much suffering to endure, based on my own beliefs and values. All of my life, I've been a supporter of the dying with dignity movement. I strongly believe that all Canadians like me should have the choice and comfort of aid in dying. It doesn't make any sense that it's legal for me to commit suicide, but it's illegal for someone to help me to die at peace, without pain, in the comfort of my home, with family and friends surrounding me."

Grace Pastine, BCCLA Litigation Director: "We're asking the court to recognize that where deeply personal and private choices regarding end of life care are involved, the law should entrust those decisions to the individuals whose lives are at stake, not the government. Choosing the time and manner of one's death is one of the most profoundly personal choices a person may make in a lifetime. In a free society, competent individuals should be allowed to make those decisions for themselves, based on their own core values and beliefs."

Joseph Arvay, Q.C., lawyer for the plaintiffs: "A number of countries around the world as well as a number of states in the U.S. now allow for medically-assisted aid in dying. The time has come for Canada to follow their lead. The experience in these countries reveals that fears about allowing physician assisted dying are unfounded. All Canadians deserve compassionate care at the end of life, including the option of a medically-assisted death."

The plaintiffs are represented by Joseph Arvay, Q.C. and Alison Latimer of Arvay Finlay, Sheila Tucker of Davis LLP and Grace Pastine of the BCCLA.

[Read the Amended Notice of Claim here >>](#)

#### **MEDIA CONTACTS:**

[Read additional materials about the Assisted Dying case here >>](#)

Grace Pastine, BCCLA Litigation Director, 778-241-7183, [grace@bcccla.org](mailto:grace@bcccla.org)

Joseph Arvay, Lawyer for the BCCLA, 604-505-1728

# PRESS BACKGROUNDER

## **“Woman with ALS pleas with court for legal right to die with dignity”**

BC Civil Liberties Association

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### **Why is the BC Civil Liberties Association working to change law on medically-assisted dying?**

We believe that everyone has the right to choose a dignified death. The BCCLA is passionate about alleviating suffering and honouring autonomy. The BCCLA has consistently opposed the criminalization of assisted dying, arguing that the principles of liberty, autonomy and equality, as well as the humanitarian commitment to preventing unnecessary suffering and to preserving the dignity of the individual, justify decriminalization.

The Criminal Code provisions against medically assisted-dying are unconstitutional because they deny individuals the right to have control over choices that are fundamental to their physical, emotional and psychological dignity and restrict the liberty of physicians to deliver compassionate end of life care to incurably ill patients.

### **Who is Gloria Taylor?**

On June 29, 2011 Gloria filed an application with the BC Supreme Court asking to be added as a plaintiff in the BCCLA’s death with dignity lawsuit.

Gloria Taylor was born and raised in Castlegar, B.C and now resides in Westbank, B.C. She is terminally ill with ALS, also know as Lou Gehrig’s disease, a fatal neurodegenerative disease with no known cure or effective treatment. Gloria is a grandmother, motorcycle enthusiast and former residential care worker. She founded a Kelowna support group for people living with ALS, and she is actively involved in raising money for groups that support people who are living with ALS and their caregivers.

Gloria began to experience the early symptoms of ALS in 2003. A neurologist diagnosed her with ALS in 2009. Since her diagnosis, her condition has steadily deteriorated. As she approaches the end of her life, Gloria would like to have the option to request physician assisted dying so she can die a compassionate and peaceful death, surrounded by her family and friends.

### **What is ALS?**

ALS, which is also known as Lou Gehrig’s disease, is a fatal neurodegenerative disease. People with ALS become progressively paralyzed due to the degeneration of the upper and lower motor neurons in the brain and spinal cord. Eighty percent of people with ALS die within two to five years of diagnosis. ALS frequently begins with weakness and/or cramping in the hands, feet or limbs. As the disease advances, muscles progressively weaken until paralysis sets in. Progressed ALS generally impacts the abilities to chew, swallow, speak and breathe. Respiratory failure is the most common cause of death for people with ALS.

### **Who are the plaintiffs in the BCCLA lawsuit?**

Currently there are four named plaintiffs in the lawsuit. Lee Carter and her husband Hollis Johnson are two of the plaintiffs. Lee and Hollis accompanied Lee’s 89-year-old mother, Kathleen (“Kay”) Carter to Switzerland in January 2010 to end her life with dignity. Kay suffered from spinal stenosis, a degenerative condition, which confined her to a wheelchair, unable to feed herself, and suffering from chronic pain. Her doctor told her that the condition would quickly leave her reduced

to lying flat in bed, completely unable to move. Kay feared she would become trapped in own body and stripped of her independence.

Kay was a lifelong supporter of the dying with dignity movement and she insisted on having choice and control over how she would end her life. Lee and Hollis believe that by participating in this lawsuit they are honouring her intrepid spirit.

Another co-plaintiff in the lawsuit is Victoria family physician Dr. William Shoichet who believes the ability to participate in physician assisted dying on request and in appropriate circumstances is an important component of the provision of compassionate health care to the seriously and incurably ill.

Finally, the BC Civil Liberties Association is also named as a plaintiff in the lawsuit. The BCCLA works to advance human rights and civil liberties throughout Canada. In this lawsuit, the BCCLA is a voice for seriously and incurably ill individuals who are not able to bring their own cases to court in light of their personal circumstances.

### **What is medically-assisted dying?**

While different people may define the term in various ways, for the purposes of the BCCLA lawsuit, “medically-assisted dying,” (also known as “physician-assisted dying”) refers to two different types of assistance that can be offered to seriously, incurably ill persons. The first type of assistance is “physician-assisted suicide,” where a doctor, prescribes a life-ending dose of medication to a mentally competent, incurably ill adult at his request, and the patient then chooses to administer the medication himself.

In some situations, mentally competent individuals may be so ill that they may have lost the ability to use their hands or to swallow, and therefore cannot administer the medication themselves. “Consensual physician-assisted death” is where a doctor prescribes a life-ending dose of medication to a mentally competent, incurably ill adult at his request and a doctor, or a person under the supervision of doctor, such as a nurse, administers the medication.

### **What is the current law in Canada regarding medically-assisted dying?**

Medically-assisted dying is illegal in Canada. The primary legal obstruction to medically-assisted dying is Section 241 of the *Criminal Code*, which makes it illegal to: (a) counsel, or (b) aid or abet, a person to commit suicide.

### **What is the current law in Canada regarding suicide?**

The act of suicide itself was decriminalized in Canada in 1972. Currently, in the same way Canadians are able to make choices in regards to medical treatment and health care, it is legal for a Canadian to choose to end her own life. However, those individuals who are unable to end their own lives due to disability (for example, a lack of mobility due to terminal illness such as ALS) are not able to exercise this option. This leaves incurably ill individuals who wish to die with dignity before their illness has progressed to a point where they are unable to enjoy life with the agonizing decision: they can either take their own life while they are capable of doing so, but before their illness has progressed to a point where they are ready to die, or to ask a friend, associate, or doctor to break the law and risk legal punishment to help them in carrying out their wishes.

### **What is the law in other jurisdictions?**

A significant number of countries now allow for medically-assisted dying in some form. In the United States, the states of Oregon and Washington have passed legislation allowing for death with dignity. Belgium, Luxembourg and the Netherlands have also legalized medically-assisted dying. All these jurisdictions have passed legislation specifying the requirements for a medically-assisted death to be considered legal. These safeguards may include patient counselling, assessment by multiple physicians, ensuring that patients are incurably ill due to their conditions,

and a time lapse to ensure that the decision cannot be made rashly, and that patients are consistent in their wish for a physician-assisted suicide over a period of time.

### **Is legalizing medically-assisted dying a slippery slope toward involuntary euthanasia?**

No. The “slippery slope” argument is commonly argued by individuals who oppose medically-assisted dying; however, the experience in a number of other countries suggests that these fears are unfounded. The key to protecting the vulnerable is to ensure that Parliament enacts rigorous regulations to supervise medically-assisted dying. Oregon and the Netherlands have created stringent procedures to protect against abuses and ensure all legally sanctioned assisted deaths are fully voluntary and desired by the patient. Canada should enact legislation with equally stringent safeguards.

### **Does pain management and palliative care negate the need for physician-assisted suicide?**

While pain management has improved over time, physicians and advocates recognize that even the most aggressive pain management treatments do not alleviate suffering for all patients, who are then forced to spend their last days, weeks, months, or years in agony. Not all patients want to be heavily sedated as they approach the end of their lives, yet the law forces some patients to choose between unrelenting pain and an alert mental state. In addition, pain management is unable to treat the loss of dignity, autonomy, anxiety, and fear that frequently accompanies incurable illness. Many patients are from terminal diseases. The

### **Where can I find additional information about medically-assisted dying?**

The following websites provide in-depth information about medically-assisted dying, including information about end-of-life care legislation around the world:

<http://www.dyingwithdignity.ca/>

<http://www.deathwithdignity.org/>

<http://www.compassionandchoices.org>